

Employee Benefits Accountability and Consumerism Survey 2011

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research



About WorldatWork®

The Total Rewards Association

WorldatWork (www.worldatwork.org) is a not-for-profit organization providing education, conferences and research focused on global human resources issues including compensation, benefits, work-life and integrated total rewards to attract, motivate and retain a talented workforce. Founded in 1955, WorldatWork has nearly 30,000 members in more than 100 countries. Its affiliate organization, WorldatWork Society of Certified Professionals®, is the certifying body for the prestigious Certified Compensation Professional® (CCP®), Certified Benefits Professional® (CBP), Global Remuneration Professional (GRP®), Work-Life Certified Professional™ (WLCP®), Certified Sales Compensation Professional™ (CSCP™), and Certified Executive Compensation Professional™ (CECP™). WorldatWork has offices in Scottsdale, Arizona, and Washington, D.C.

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Introduction & Methodology

This report summarizes the results of an August 2011 survey of WorldatWork members to gather information about current trends in employee benefits and how well informed employees are as consumers of these benefits. This is the third edition of this survey report. Previous versions were conducted in 2004 and 2006. The focus of this information is to build an improved understanding of the priorities involved in making employees better consumers of benefits and more accountable for their benefits decisions within an organization.

On July 20, 2011, survey invitations were sent electronically to 5,057 WorldatWork members. Audience selection from the WorldatWork membership database included members who designated benefits and compensation or benefits only in their title or in a responsibility function area. The survey closed on August 5, 2011, with 492 responses, a 10% response rate. The dataset was cleaned, resulting in a final dataset of 462 responses.

In order to provide the most accurate data possible, data was cleaned and analyzed using statistical software. Any duplicate records were removed. Data comparisons with any relevant, statistically significant differences are noted with this report.

This report includes data and comparisons from the 2004 and 2006 administration of the Employee Benefits Accountability and Consumerism surveys. However, not all results from previous years are illustrated in this report.

The demographics of the survey sample and the respondents are similar to the WorldatWork membership as a whole. The typical WorldatWork member works at the managerial level or higher in the headquarters of a large company in North America.

The frequencies or response distributions listed in the report show the number of times or percentage of times a value appears in a dataset. Due to rounding, frequencies of data responses provided in this survey may not total exactly 100%.

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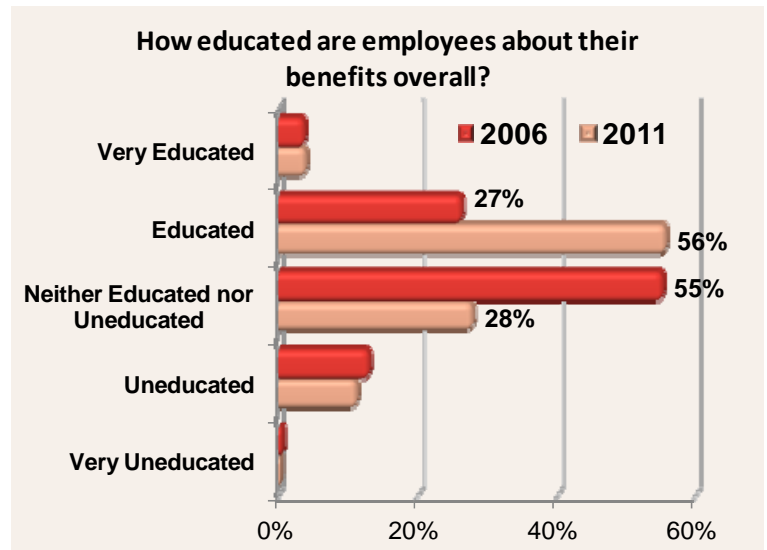
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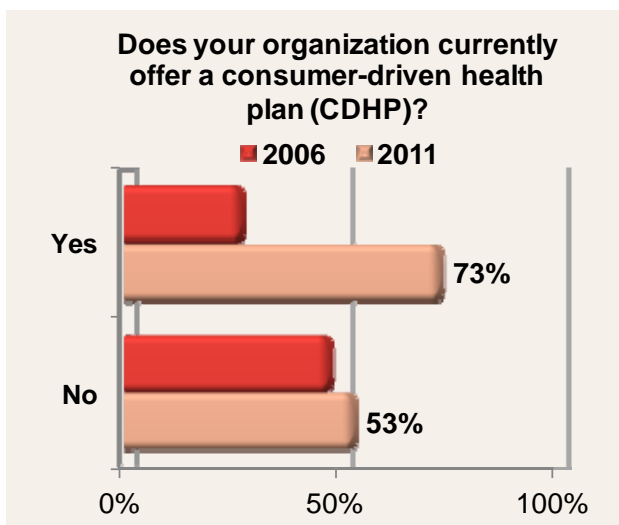
Executive Summary

Overall, the 2011 survey results reflect an attempt by many organizations to increase their efforts to make employees better consumers of their benefits programs, primarily in the health-care arena. In order to increase consumerism and accountability among their employees, employers must first attempt to educate them on how to effectively access and use their benefits programs. According to survey respondents, they consider their employees much more educated than as previously reported in the 2006 survey; in fact, 60% would assign a “very educated/educated” rating to their workforce (Figure 1).

Although declining, the primary metric for measuring the education level of employees is the number of inquiries into HR/benefits departments (Figure 3). To increase employee benefits consumerism and accountability, written communications and health promotion/wellness initiatives are the primary vehicles (Figure 14). Although only 3% reported using social media as an option (Figure 14), it is expected that this number will grow as more organizations begin to use such approaches for total rewards communications.



In 2011 organizations report at statistically significantly higher levels (38%) compared to 2006 (24%) seeing the desired changes in employee behavior when it comes to making employees better consumers of health-care benefit programs (Figure 15).



As expected, more companies are offering consumer-driven health plan options (CDHP) (Figure 7), and most respondents indicated offering health savings account-based plans as their preferred choice. Although most companies reported offering such plan choices alongside traditional health-care options, as compared to 2006, more companies are offering CDHP as the sole option in 2011 (Figure 9). Out of the 79% of survey respondents who reported offering CDHP alongside traditional options, the number of employees electing such options has increased since 2006 (Figure 10) but at a slow pace, indicating the need for more frequent and effective education regarding these plans. The low numbers may also

indicate the need for employers to revisit their current plan designs and contribution strategies for these plan options.

What is the impact of health-care reform?

Health-care reform does not appear to be the primary driver for the trend toward offering more CDHP options. Although 31% reported that their efforts toward offering CDHP increased due to reform, 67% reported that their efforts stayed the same (Figure 21). This would imply that, in looking at Figure 8, most organizations were already in the process of implementing or had implemented CDHP options prior to health-care reform's passage in early 2010. According to the results in Figure 6, it is almost evenly split regarding whether the scheduled opening of the health-care exchanges will have an impact on organizations' consumerism efforts.

What is the impact of health promotion and wellness initiatives?

Several survey questions addressed the prevalence of health promotion and wellness initiatives:

- 72% of respondents reported offering health promotion and wellness initiatives in 2011 (Figure 18). These programs continue to be quite popular, increasing in prevalence from 2004 to 2011 (Figure 11).
- Respondents have primarily observed increased program participation and anecdotal employee awareness in response to their efforts (Figure 16).
- 53% reported (Figure 17) actual increased employee participation in wellness initiatives and 32% reported increased use of wellness websites and intranet tools.

On the retirement side, there has been an increase in the number of organizations offering financial education and financial advice since 2006 (Figure 23); however, there is still opportunity for more to offer such programs (Figure 25). Especially with the recent economic downturn and many negative actions taken, it is surprising that there are not more employers embracing this opportunity.

Regarding a company's efforts to have a more integrated approach to their consumerism efforts among all their health management initiatives, there would appear to be an opportunity for employers to better leverage all of their programs and practices to increase their return on investment (ROI) (Figure 20). In comparing answers in Figure 20 to the level of priority in making employees better consumers (Figure 4), it was found that organizations taking an integrated approach to health management initiatives were statistically significantly more likely to state it is a high or top priority to the organization's top management (Figure 34).

Organizations taking an integrated approach to health management initiatives, support the following at significantly higher rates:

93% offer health promotions and wellness initiatives.

64% state top management sets a high or top priority to making employees better consumers of health benefits.

70% commit to a deliberate or strategic decision to making employees better consumers of the benefits programs offered.

57% noted seeing desired changes in employee behavior when it comes to making employees better consumers of benefits programs.

76% of survey respondents reported having either a deliberate strategy or considering one to make employees better consumers (Figure 12). In comparing the answers in Figure 20, relative to having an integrated health management approach, to Figure 12, responses indicated that those organizations taking an integrated approach to health management initiatives were statistically significantly more likely to assert making a deliberate and strategic decision to make employees better consumers of the benefits programs offered (Figure 35).

Additional highlights:

- Organizations targeting different messages to specific segments of the workforce are statistically significantly more likely to state their workforce has become more educated within the past two years with regard to benefits programs (93%) over organizations that generally communicate the same messages to all groups (73%). (Figure 40)
- Organizations targeting different messages to specific segments of the workforce are statistically significantly more likely to state making a deliberate or strategic decision to make employees better consumers of benefits programs offered (65%) over organizations that generally communicate the same messages to all groups (44%). (Figure 41)
- Organizations targeting different messages to specific segments of the workforce are statistically significantly more likely to offer health promotion and wellness initiatives to employees (85%) over organizations that generally communicate the same messages to all groups (68%). (Figure 42) This implies that organizations that have targeted initiatives believe it to be more effective to achieve their health and wellness objectives by targeting specific segments.

Opportunities:

- ✓ One of the opportunities the survey reflects is for more organizations to measure the results of their efforts to increase employee accountability and consumerism (Figure 26); 42% reported not having measured their efforts.
- ✓ The need for more frequent and effective education regarding CDHP options.
- ✓ The need for employers to revisit their current plan designs and contribution strategies for CDHPs.
- ✓ Opportunity to use social media platforms and other communication channels for increased and varied total rewards communications.
- ✓ Although there has been an increase in the number of organizations offering financial education and financial advice to employees since 2006, there is still opportunity for more employers to offer such programs.

5 Takeaway Opportunities

1. Measure results
2. Educate more regarding CDHP options
3. Revisit CDHP plan designs and contribution strategies
4. Use social media/increase communication
5. Advise and educate employees in financial planning

Results and Analysis

Figure 1: Overall employee benefits education

"What rating would you assign to your employee population right now with regard to how educated they are about their benefits overall?" (n= 462)¹

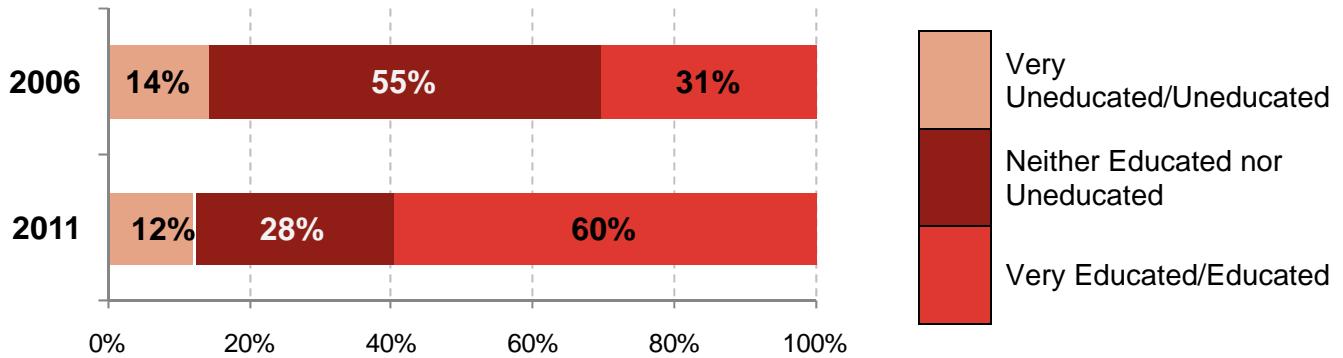
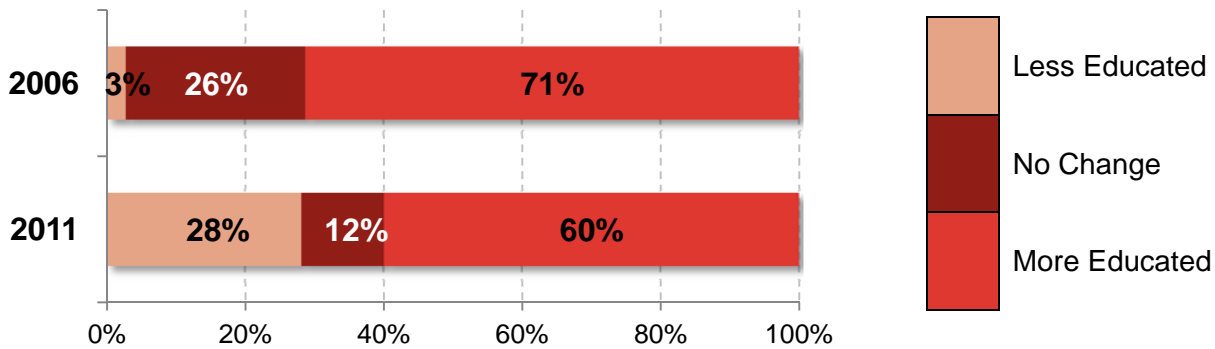


Figure 2: Employee benefits education change over past two years

"Within the past two years, have your employees become more educated or less educated with regard to their employer-provided benefits programs?" (n= 462)²



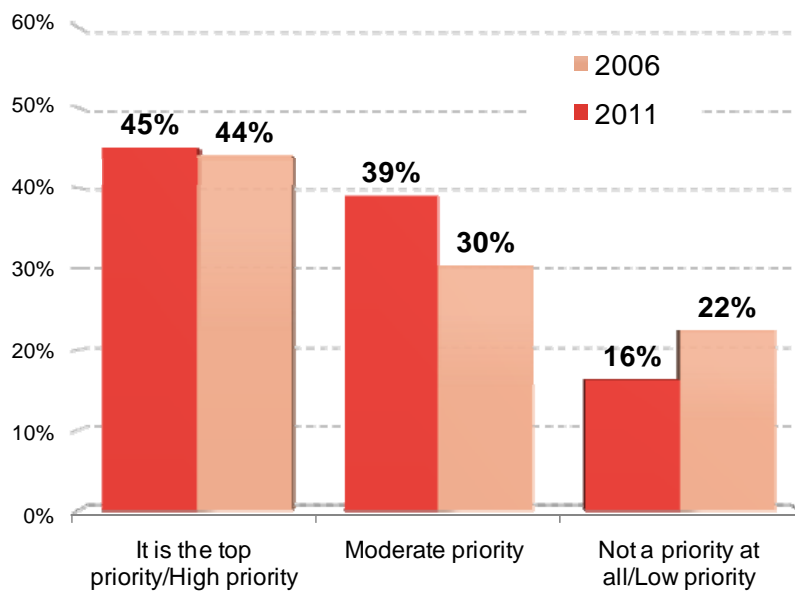
¹ Organizations report that employees are educated or very educated when it comes to their benefits overall at statistically significantly higher rates in 2011 (60%) over 2006 results (31%). Similarly, participants report that employees are neither educated nor uneducated when it comes to their benefits overall at statistically significantly higher rates in 2006 (55%) over 2011 results (28%).

² Organizations report that within the past two years, employees became more educated with regard to their employer-provided benefits programs at statistically lower rates in 2011 (60%) when compared to 2006 results (71%). Likewise, organizations reported statistically lower rates in 2011 (12%) when it came to employees having no change in education levels and employer-provided benefits programs compared to 2006 (26%). Lastly, organizations report that employees over the past two years became less educated with regard to their employer-provided benefits programs at statistically higher rates in 2011 (28%) when compared to 2006 results (3%).

Figure 3: Measurement in employee education levels
 "How does your organization measure changes in how educated employees are with regard to their benefits programs? (Check all that apply.)" (n= 454)

	2004	2006	2011
Questions into benefits or human resources department	66% ³	60%	56%
Employee meetings	39% ⁴	29%	34%
Employee surveys	39%	36%	29%
We do not measure	18%	30% ⁵	29%
Intranet usage/Web page hits	22%	25%	16%
Employee focus groups	17%	13%	8%
Other	n/a	n/a	4%

Figure 4: Consumers of benefits and top management priority levels
 "How high of a priority is it for your organization's top management to make employees better consumers of benefits and more accountable for their benefits decisions?" (n=450)



³ Organizations reported using questions to benefits or human resources department to measure changes in employee benefits education levels at statistically significantly higher rates in 2004 (66%) over 2011 (56%).

⁴ Organizations reported using employee meetings to measure changes in employee benefits education levels at statistically significantly higher rates in 2004 (39%) over 2006 (29%).

⁵ Organizations reported not measuring changes in employee benefits education levels in any way at statistically significantly higher rates in 2006 (30%) over 2004 (18%).

Figure 5: Organization actions and employer-provided health care
"Which of the following actions has your organization undertaken within the past 12 months regarding your employer-provided health care?"

	Already Implemented	Implemented but considering additional changes	In Design	In Consideration	Not Considering
Increasing employee cost sharing (n=439)	51%	11%	3%	17%	18%
Providing health education and wellness initiatives (n=441)	47%	18%	13%	17%	5%
Designing plans that increase employee decision making and accountability (n=437)	39%	13%	11%	25%	12%
Executing plans that increase employee decision making and accountability (n=438)	37%	11%	10%	27%	15%

Figure 6: Health-care exchanges and consumerism
"Do you believe the scheduled opening of the health-care exchanges will change your approach to consumerism?" (n= 439)

Yes
 No
 I don't know what health-care exchanges are

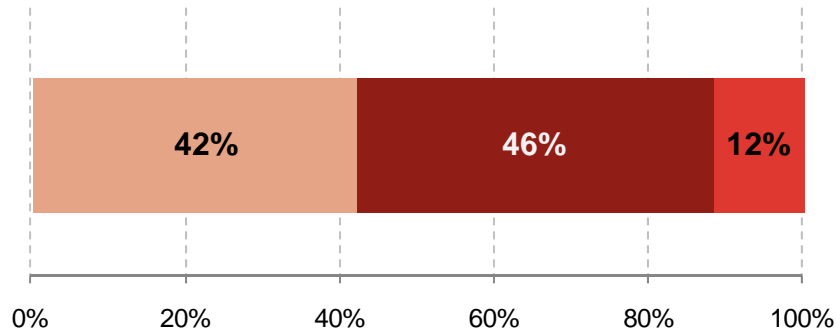


Figure 7: Organizations offering consumer-driven health plan
 "Does your organization currently offer a consumer-driven health plan (CDHP)?"
 (n=439)

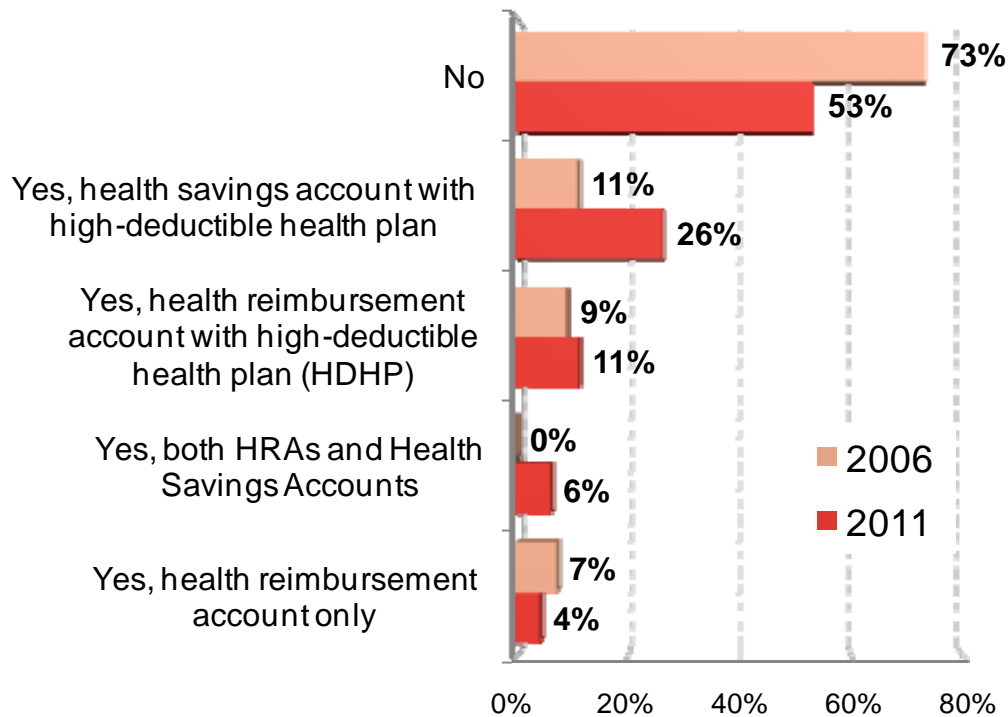
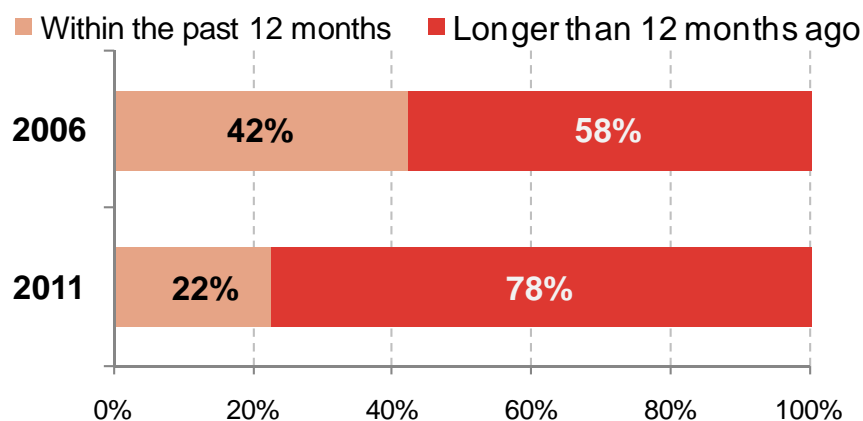


Figure 8: Consumer-driven health plan (CDHP) implementation
 "When was your organization's consumer-driven health plan (CDHP) implemented?" (n=188)⁶

Only participants who answered "yes" in any form in Figure 7 received this question.



⁶ Organizations report implementing a consumer-driven health plan more than 12 months ago at statistically significantly higher rates in 2011 (78%) over 2006 (58%).

Figure 9: Consumer-driven health plan as a replacement to a traditional plan
 "Did your organization's consumer-driven health plan (CDHP) fully replace traditional health care, or is it offered alongside other traditional health-care options?" (n= 189)
 Only participants who answered "yes" in any form in Figure 7 received this question.

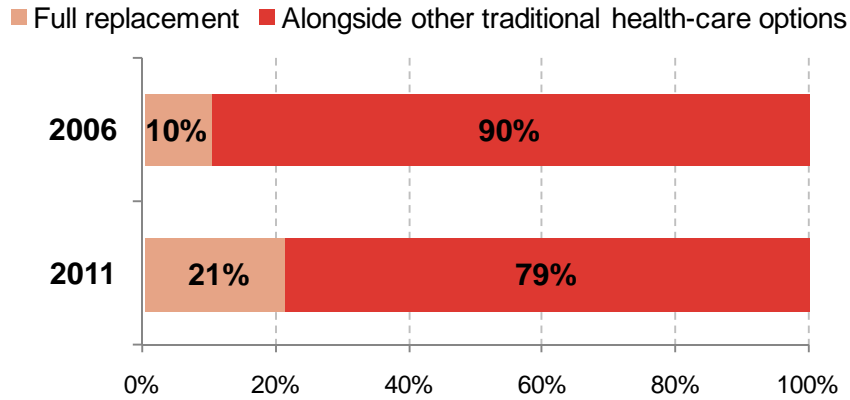


Figure 10: Percentage of employees currently enrolled in the consumer-driven health plan
 "What percentage of employees is currently enrolled in the consumer-driven health plan (CDHP)?" (n= 149)
 Only participants who answered "Alongside other traditional health-care options" to Figure 9 received this question.

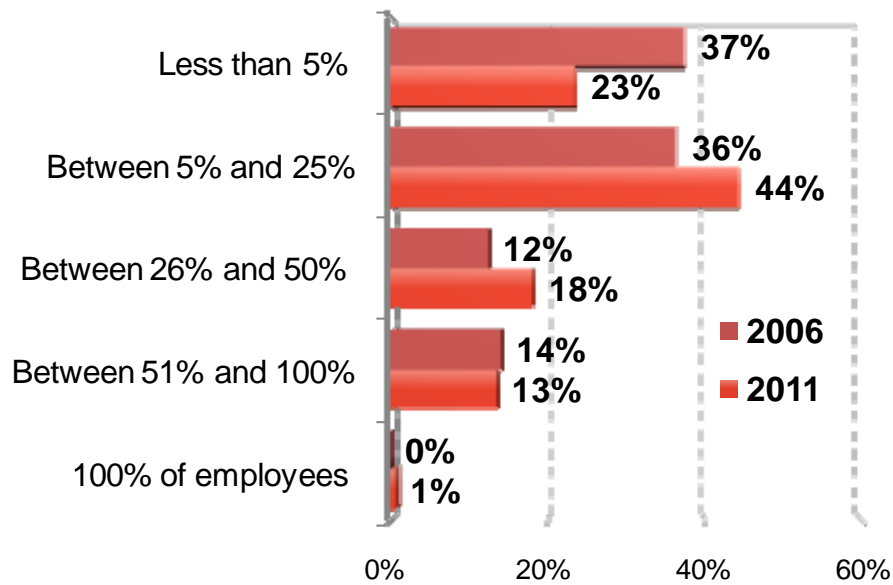


Figure 11: Options for offsetting potential future health-care cost increases
 "To offset potential future health-care cost increases, which of the following (if any) is your organization currently either considering or planning? (Check all that apply.)"
 (n=413)

Option	2004	2006	2011
Health promotion and wellness initiatives	65%	73%	75% ⁷
Increase plan deductibles	n/a	36%	42%
Health savings account	36%	30%	30%
Health reimbursement account	40% ⁸	22%	19%
Move to co-insurance instead of co-pays	21%	23%	19%
No changes	n/a	n/a	14%
Move certain drugs off the prescription drug formulary	15%	10%	11%
Discontinuation of employer-sponsored health care	0%	0%	4%
Discontinue prescription drug coverage	0%	0%	1%

Figure 12: Attempting to make employees better consumers of benefits programs
 "Is your organization currently attempting to make employees better consumers of the benefits programs you offer?" (n= 430)

Option	Percent
Yes, we have made a deliberate or strategic decision to do so	43%
Yes, it is happening without a deliberate or strategic decision to do so	13%
We are currently considering a strategy or strategies to make them better consumers	33%
No, we are not	10%

⁷ Organizations report using health promotion and wellness initiatives to offset potential future health-care cost increases at statistically significantly higher rates in 2011 (75%) over 2004 (65%).

⁸ Organizations reported using health reimbursement accounts to offset potential future health-care cost increases at statistically significantly higher rates in 2004 (40%) over both 2006 (22%) and 2011 (19%).

Figure 13: Primary champion of making employees better consumers of benefits programs

"Who in your organization (if anyone) is the primary champion of the idea that employees should be better consumers of benefits programs?" (n= 387)

Participants who answered "no" to Figure 12 were excluded from this question.

Option	2006	2011
Top HR executive	34%	41%
Top Benefits/Total rewards executive	39% ⁹	22%
All of senior management	10%	14%
CEO or president	7%	10%
No one	2%	4%
Other	6%	4%
Chief financial officer (CFO)	0%	2%
Board of Directors	1%	1%
Chief operating officer (COO)	1%	1%
Employees	1%	1%

Figure 14: Resources to increase employee benefits consumerism and accountability

"What types of resources have you either implemented or increased in usage over the past two years to increase employee benefits consumerism and accountability? (Check all that apply.)" (n= 385)

Participants who answered "no" to Figure 12 were excluded from this question.

Option	2011
Written communications	71%
Health promotion and wellness programs (e.g., smoking cessation, weight loss programs)	70%
Self-service technology (Internet, HR portals, Web-based tools)	67%
Employee meetings	61%
Health fairs	50%
Social media (Twitter, blogs, LinkedIn, etc.)	3%
None	3%
Other	4%

⁹ Organizations report that the top benefits/total rewards executive is the primary champion of the idea that employees should be better consumers of benefits programs at statistically significantly lower rates in 2011 (22%) compared to 2006 (39%).

Figure 15: Changes in employee behavior as a response to efforts to make employees better consumers of benefit programs

"In your organization's efforts to make employees better consumers of health-care benefit programs, have you seen desired changes in employee behavior?" (n= 327)¹⁰
Participants who answered "no" to Figure 12 were excluded from this question.

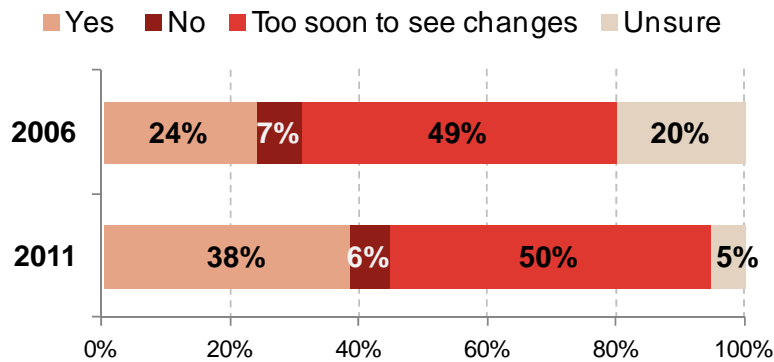


Figure 16: Observed changes in employee behavior as a response to efforts to make employees better consumers of benefit programs

"Which of the following have been observed (not necessarily measured) within your organization as a result of efforts to make employees better consumers of health-care benefits? (Check all that apply.)" (n=130)

Only participants who answered "yes" to Figure 15 were included in this question.

Option	Percent
Program participation	78%
Anecdotal employee awareness	68%
Improved utilization decisions by plan members	46%
Perception of overall improvement in employee healthy lifestyle behaviors	39%
Gut feeling or impression of improvement by employees	19%
Decreased absenteeism and/or increased presenteeism	13%
Increased productivity	5%
Lower turnover	5%
All of the above	3%
Other	3%

¹⁰ In 2011 organizations report at statistically significantly higher levels (38%) compared to 2006 (24%) seeing the desired changes in employee behavior when it comes to making employees better consumers of health-care benefit programs. Conversely, in 2006 a statistically significantly higher number of organizations (20%) reported being unsure if they were noting the desired changes in employee behavior when it came to making employees better consumers of health-care benefit programs over 2011 results (5%).

Figure 17: Measured changes in employee behavior as a response to efforts to make employees better consumers of benefit programs

"Which of the following, if any, has your organization measured and experienced as a result of efforts to make employees better consumers of health-care benefits? (Check all that apply.)" (n= 325)

Participants who answered "no" to Figure 12 were excluded from this question.

Option	Percent
Increased participation in wellness initiatives	53%
Increased utilization of wellness websites and intranet tools	32%
Reduced health-care costs	26%
No positive results	23%
Perception of (or actual) aggregate employee weight loss	17%
Improved results on employee health risk appraisals	16%
Positive indications from the numbers and types of calls to shared service and/or call centers	12%
Lower financial impact on high-risk categories/profiles	8%
Positive results on pre- and post-decision tools	6%

Figure 18: Health promotion and wellness initiatives

"Does your organization offer health promotion and wellness initiatives?" (n= 376)

Participants who answered "no" to Figure 12 were excluded from this question.

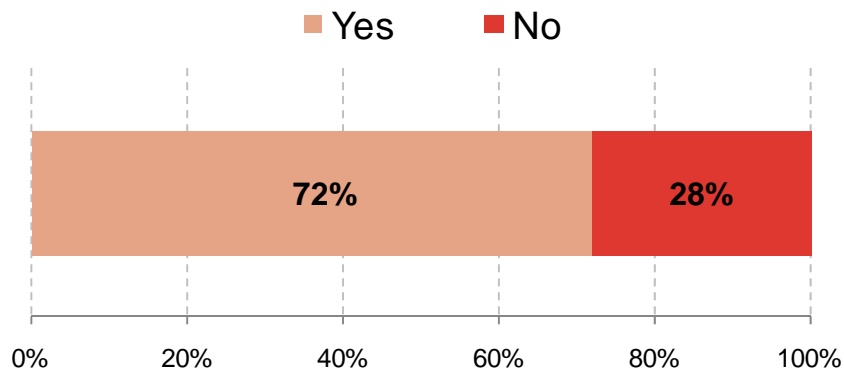


Figure 19: Incentives for participation in health promotion/wellness initiatives
"What types of incentives does your organization offer to employees for participation in health promotion/wellness initiatives? (Check all that apply.)" (n=270)
 Participants who answered "yes" in Figure 18 were included in this question.

Option	Percent
Giveaways and prizes, such as gift certificates	56%
Financial incentives (cash)	38%
Lower health insurance employee payroll contributions	33%
Subsidization of all or part of health promotion initiatives	26%
Employee discounts	16%
Additional money into health reimbursement accounts or flex credits	14%
None	11%
Paid time off	6%
Refund a portion of health insurance employee contributions	4%
Higher medical plan reimbursements	2%
Other	5%

Figure 20: Health management initiatives to increasing employee consumerism
"Is your organization currently offering health management initiatives as part of an integrated approach to increasing employee consumerism (e.g., health and wellness initiatives, EAPs, disease management, health promotion, etc.)?" (n=380)
 Participants who answered "no" to Figure 12 were excluded from this question.

Option	2006	2011
Yes, we are taking an integrated approach	24%	28%
We are offering some health management initiatives, but not in an entirely integrated way	37%	42%
We are not integrated	18%	15%
We are working toward alignment and integration	21%	15%

Figure 21: New health-care law impact on consumerism efforts
"How has the new health-care law impacted your organization's efforts regarding consumerism and shared accountability?" (n=383)
 Participants who answered "no" to Figure 12 were excluded from this question.

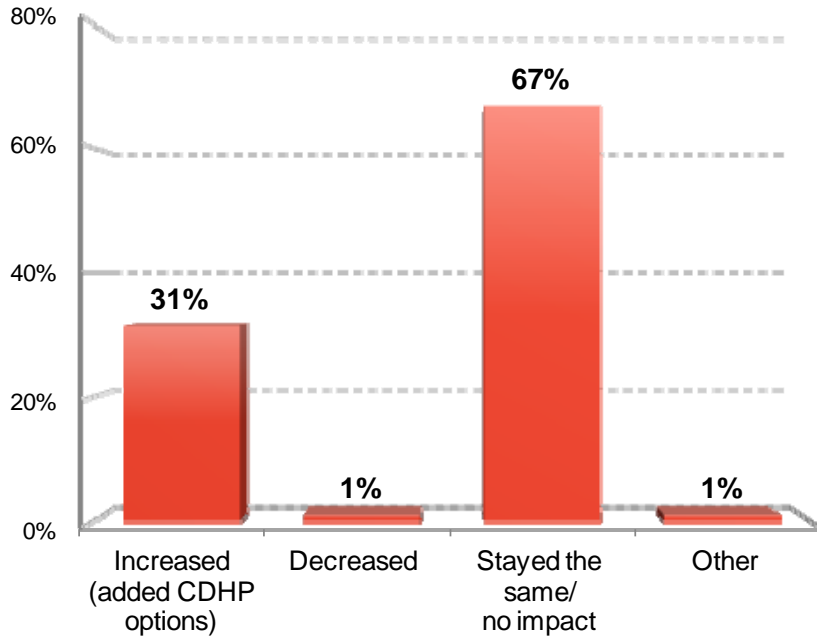


Figure 22: Type(s) of retirement plans offered
"What type of retirement plan (or plans) does your organization currently offer employees? (Check all that apply.)" (n= 382)¹¹
 Participants who answered "no" to Figure 12 were excluded from this question.

Option	Percent
401(k), 403(b) or 457 plans with or without a profit-sharing feature	95%
Defined benefit	24%
Defined contribution, other than 401(k) (e.g., money purchase, Employee Stock Ownership Plan, etc.)	15%
Cash balance	5%
Other	4%
Pension equity	2%
None	1%

¹¹ The follow-up question, "Have you frozen or terminated a defined benefit plan in the past two years or are you considering freezing or terminating a defined benefit plan in the near future? (Check all that apply.)" was excluded from this report due to a technical error.

Figure 23: Third-party employee financial education and/or financial advice
"Does your organization provide employee financial education and/or financial advice (e.g., through a third-party)?" (n=380)

Participants who answered "no" to Figure 12 were excluded from this question.

Option	2006	2011
Yes, employee financial education only	28%	30%
Yes, financial advice only	7%	4%
Yes, both employee financial education and financial advice	22%	36%
No, we offer neither	21%	23%
We are considering or planning to offer one or both	10%	6%

Figure 24: Efforts to make employees better consumers of retirement benefit programs
"In your organization's efforts to make employees better consumers of retirement benefit programs, have you seen desired changes in employee behavior?" (n=289)

Participants who answered "no" to Figure 12 were excluded from this question.

Option	2011
Yes, increased employee contributions to our defined contribution plans	19%
Yes, increased investment elections (e.g., more active participation in making investment decisions)	6%
Yes, both of the above	24%
No, we have not seen changes	31%
Too soon to see changes	21%

Figure 25: Actions to increase employee usage of retirement plans
"What actions, if any, is your organization taking to increase employee usage of retirement plans? (Check all that apply.)" (n=344)
 Participants who answered "no" to Figure 12 were excluded from this question.

Option	Percent
Automatic enrollment	33%
Financial education	27%
Immediate eligibility	12%
Financial advice	7%
Automatic increases/escalation	6%
Increased matching contributions	4%
Other	11%

Figure 26: Positive results and efforts to increase employee consumerism in retirement planning
"Which of the following positive results, if any, has your organization experienced due to efforts to increase employee accountability and consumerism in retirement planning? (Check all that apply.)" (n=363)
 Participants who answered "no" to Figure 12 were excluded from this question.

Option	Percent
Have not measured	42%
Increased employee participation/enrollment	36%
Increased employee contributions	30%
Better asset allocation decisions (more diversification)	17%
Increased attendance at voluntary education seminars and meetings	17%
Perception of better employee understanding of retirement plan benefits statements	16%
Increased communication by employees, indicating a better understanding	12%
Increased employee planning and savings for life changes (home buying, college savings, retirement, etc.)	6%
Other	1%

Figure 27: Targeted messages about benefits programs to specific workforce groups
 "In the past 12 months, has your organization attempted to communicate different, targeted messages about benefits programs to different segments of your workforce in order to foster more employee consumerism/accountability?" (n=375)
 Participants who answered "no" to Figure 12 were excluded from this question.

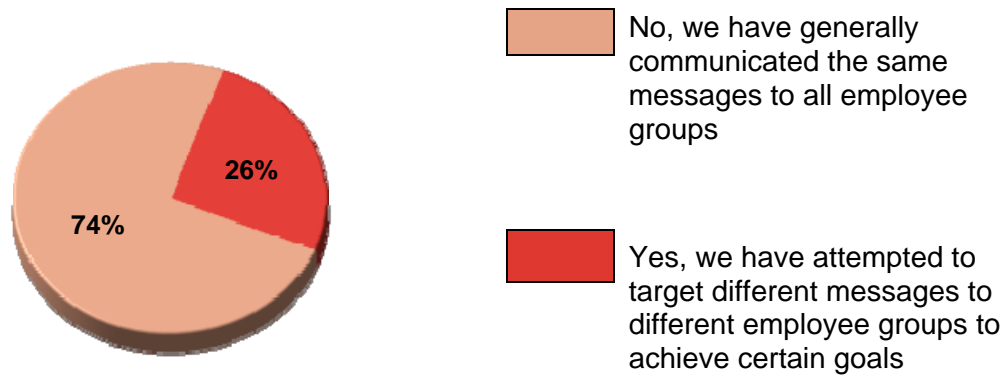


Figure 28: Mechanisms used to target messages to specific employee groups
 "What mechanisms have you used to target different messages to different employee groups? (Check all that apply.)" (n=97)
 Only participants who answered "yes" to Figure 27 were included this question.

Option	Percent
Direct mailing to home	69%
Intranet/portal technology	60%
Group meetings	56%
Newsletters	49%
One-to-one communications	45%
Virtual education	23%
Call centers	16%
Social media (Twitter, blogs, LinkedIn, etc.)	3%
Focus groups	8%

Comparisons by organizations making a deliberate or strategic decision to make employees better consumers of the benefits programs

Figure 29: Deliberate or strategic decision to make employees better consumers and perceived education level

"What rating would you assign to your employee population right now with regard to how educated they are about their benefits overall?" (n=430)

Option	Overall	Extremely uneducated / uneducated	Neither Educated nor Uneducated	Extremely Educated / Educated
Yes, we have made a deliberate or strategic decision to do so	43%	6%	20%	73% ¹²
Yes, it is happening without a deliberate or strategic decision to do so	13%	13%	29%	59%
We are currently considering a strategy or strategies to make them better consumers	33%	17%	36%	46%
No, we are not	10%	20%	30%	50%

Figure 30: Deliberate or strategic decision to make employees better consumers and currently attempting to make employees more educated consumers

"Within the past two years, have your employees become more educated or less educated with regard to their employer-provided benefits programs?" (n=430)

Option	Overall	More educated	Less educated	No Change
Yes, we have made a deliberate or strategic decision to do so	43%	88% ¹³	1%	12%
Yes, it is happening without a deliberate or strategic decision to do so	13%	80%	0%	20%
We are currently considering a strategy or strategies to make them better consumers	33%	64%	3%	34%
No, we are not	10%	45%	0%	55% ¹⁴

¹² Organizations taking a deliberate or strategic approach to make employees better consumers of benefits programs are statistically significantly more likely to rate their employee education level about benefits overall as educated or extremely educated (73%) over organizations that are considering a strategy (46%) or organizations making no effort to make employees better consumers (50%).

¹³ Organizations taking a deliberate or strategic approach to make employees better consumers of benefits programs are statistically significantly more likely to rate their employees as more educated within the past two years (88%) over organizations that are considering a strategy (64%) or organizations making no effort to make employees better consumers (45%).

¹⁴ Organizations *not* taking a deliberate or strategic approach to make employees better consumers of benefits programs are statistically significantly more likely to state there has been no change in the past two years regarding employee education levels (55%) compared to organizations without a deliberate or strategic approach to employee consumerism (20%) or organizations with a deliberate or strategic approach to employee consumerism (12%).

Figure 31: Deliberate or strategic decision to make employees better consumers and the priority of top management to make employees better consumers of benefits
 "How high of a priority is it for your organization's top management to make employees better consumers of benefits and more accountable for their benefits decisions?" (n= 427)

Option	Overall	No/Low Priority	Moderate Priority	High/Top Priority
Yes, we have made a deliberate or strategic decision to do so	43%	4%	27%	68% ¹⁵
Yes, it is happening without a deliberate or strategic decision to do so	13%	30%	48%	21%
We are currently considering a strategy or strategies to make them better consumers	33%	14%	49%	37%
No, we are not	10%	50%	41%	9%

Figure 32: Deliberate or strategic decision to make employees better consumers and observing the desired changes in employee behavior regarding consumerism
 "In your organization's efforts to make employees better consumers of health-care benefit programs, have you seen desired changes in employee behavior?" (n=326)¹⁶

Option	Yes	No	Too soon to see changes
Yes, we have made a deliberate or strategic decision to do so	55% ¹⁷	5%	40%
Yes, it is happening without a deliberate or strategic decision to do so	26%	9%	65%
We are currently considering a strategy or strategies to make them better consumers	24%	8%	68% ¹⁸

¹⁵ Organizations taking a deliberate or strategic approach to make employees better consumers of benefits programs are statistically significantly more likely to state it is a high or top priority to the organization's top management to make the workforce better consumers of benefits and more accountable for their benefits decisions (68%) compared to all other groups; organizations without a deliberate or strategic decision (21%), organizations that have not adopted but are considering a deliberate or strategic approach (37%), or organizations without a deliberate or strategic approach (9%).

¹⁶ Zero participants responded "No, we are not" in this model.

¹⁷ Organizations taking a deliberate or strategic approach to make employees better consumers of benefits programs are statistically significantly more likely to report seeing the desired changes in employee behavior regarding consumerism (55%) over organizations that do not have a deliberate or strategic approach (26%) or organizations considering a deliberate or strategic approach (24%).

¹⁸ Organizations *not* taking a deliberate or strategic approach to make employees better consumers of benefits programs are statistically significantly more likely to report too soon to see the desired changes in employee behavior regarding consumerism (68%) compared to organizations without a deliberate or strategic approach to employee consumerism (65%) or organizations with a deliberate or strategic approach to employee consumerism (40%).

Figure 33: Deliberate or strategic decision to make employees better consumers and organizations offering health promotion and wellness initiatives
 "Does your organization offer health promotion and wellness initiatives?" (n= 375)¹⁹

Option	Yes	No
Yes, we have made a deliberate or strategic decision to do so	85% ²⁰	15%
Yes, it is happening without a deliberate or strategic decision to do so	65%	35%
We are currently considering a strategy or strategies to make them better consumers	58%	42% ²¹

Comparisons by organizations taking an integrated approach

Figure 34: Integrated approach to increasing consumerism and the priority of top management to make employees better consumers of benefits
 "How high of a priority is it for your organization’s top management to make employees better consumers of benefits and more accountable for their benefits decisions?" (n= 377)

Option	Overall	No/Low Priority	Moderate Priority	High/Top Priority
Yes, we are taking an integrated approach	28%	5%	32%	64% ²²
We are offering some health management initiatives, but not in an entirely integrated way	42%	14%	39%	47%
We are not integrated	15%	18%	48%	34%
We are working toward alignment and integration	15%	11%	37%	53%

¹⁹ Zero participants responded “No, we are not” in this model.

²⁰ Organizations taking a deliberate or strategic approach to make employees better consumers of benefits programs are statistically significantly more likely to report promotion of health and wellness initiatives (85%) over organizations that do not have a deliberate or strategic approach (65%) or organizations considering a deliberate or strategic approach (58%).

²¹ Organizations only considering a deliberate or strategic approach to make employees better consumers of benefits programs are statistically significantly more likely to report not promoting health and wellness initiatives (42%) over organizations that do not have a deliberate or strategic approach (35%) or organizations with a deliberate or strategic approach (15%).

²² Organizations taking an integrated approach to health management initiatives are statistically significantly more likely to state it is a high or top priority to the organization’s top management to make the workforce better consumers of benefits and more accountable for their benefits decisions (64%) compared to organizations not integrated at all (34%) or organizations offering some health management initiatives, but not in an entirely integrated way (47%).

Figure 35: Integrated approach to increasing consumerism and attempting to make employees better consumers of the benefits programs you offer
 "Is your organization currently attempting to make employees better consumers of the benefits programs you offer?" (n= 380)

Option	Overall	Yes, we have made a deliberate or strategic decision to do so	Yes, it is happening without a deliberate or strategic decision to do so	We are currently considering a strategy or strategies to make them better consumers
Yes, we are taking an integrated approach	28%	70% ²³	11%	19%
We are offering some health management initiatives, but not in an entirely integrated way	42%	47%	14%	40%
We are not integrated	15%	19%	25%	56%
We are working toward alignment and integration	15%	44%	9%	47%

Figure 36: Integrated approach to increasing consumerism and witnessing the desired changes in employee behavior when it comes to making employees better consumers
 "In your organization's efforts to make employees better consumers of health-care benefit programs, have you seen desired changes in employee behavior?" (n=323)

Option	Overall	Yes	No	Too soon to see changes
Yes, we are taking an integrated approach	28%	57% ²⁴	6%	37%
We are offering some health management initiatives, but not in an entirely integrated way	42%	38%	5%	57%
We are not integrated	15%	18%	11%	71%
We are working toward alignment and integration	15%	35%	8%	57%

²³ Organizations taking an integrated approach to health management initiatives are statistically significantly more likely to assert making a deliberate and strategic decision to make employees better consumers of the benefits programs offered (70%) over organizations not integrated in any way (19%) or organizations offering some health management initiatives, but not in an entirely integrated way (47%) and organizations working toward alignment and integration (44%).

²⁴ Organizations taking an integrated approach to health management initiatives are statistically significantly more likely to witness seeing the desired changes in employee behavior regarding health-care benefit consumerism (57%) over organizations not integrated in any way (18%).

Figure 37: Integrated approach to increasing consumerism and organizations offering health promotion and wellness initiatives

"Does your organization offer health promotion and wellness initiatives?" (n= 372)

Option	Overall	Yes	No
Yes, we are taking an integrated approach	28%	93% ²⁵	7%
We are offering some health management initiatives, but not in an entirely integrated way	42%	72%	28%
We are not integrated	15%	42%	58%
We are working toward alignment and integration	15%	67%	33%

Comparisons by organization type

Figure 38: Organization type and perceptions of employee education regarding their benefits overall

"Your organization is:" (n=415)

Option	Overall	Extremely uneducated / uneducated	Neither Educated nor Uneducated	Extremely Educated / Educated
Public sector (local, state, federal government)	14%	14%	21%	66%
Private sector - publicly traded	38%	17%	34%	49%
Private sector - privately held	32%	8%	26%	67% ²⁶
Nonprofit/Not-for-profit (educational organizations, charitable organizations, etc.)	16%	7%	28%	64%

²⁵ Organizations taking an integrated approach to health management initiatives are statistically significantly more likely to offer health promotion and wellness initiatives (93%) over organizations not integrated in any way (42%) or organizations offering some health management initiatives, but not in an entirely integrated way (72%) and organizations working toward alignment and integration (67%).

²⁶ Private sector - privately held organizations rated their workforce as educated or extremely educated at statistically significantly higher rates (67%) over Private sector - publicly traded organizations (49%).

Comparisons by Organizations that Deliver Targeted Messaging

Figure 39: Organizations that communicate different, targeted messages about benefits programs to different segments of the workforce and the priority of top management to make employees better consumers of benefits

"How high of a priority is it for your organization's top management to make employees better consumers of benefits and more accountable for their benefits decisions?" (n= 372)

Option	Overall	No/Low Priority	Moderate Priority	High/Top Priority
Yes, we have attempted to target different messages to different employee groups to achieve certain goals	26%	5%	31%	64% ²⁷
No, we have generally communicated the same messages to all employee groups	74%	14%	41%	45%

Figure 40: Organizations that communicate different, targeted messages about benefits programs to different segments of the workforce and employees education gain with regard to their employer-provided benefits programs

"Within the past two years, have your employees become more educated or less educated with regard to their employer-provided benefits programs?" (n= 375)

Option	Overall	More educated	Less educated	No Change
Yes, we have attempted to target different messages to different employee groups to achieve certain goals	26%	93% ²⁸	0%	7%
No, we have generally communicated the same messages to all employee groups	74%	73%	2%	25%

²⁷ Organizations targeting different messages to specific segments of the workforce are statistically significantly more likely to affirm it is a high or top priority to the organization's top management to make the workforce better consumers of benefits and more accountable for their benefits decisions (64%) over organizations who generally communicate the same messages to all groups (45%).

²⁸ Organizations targeting different messages to specific segments of the workforce are statistically significantly more likely to state their workforce has become more educated within the past two years with regard to benefits programs (93%) over organizations that generally communicate the same messages to all groups (73%).

Figure 41: Organizations that communicate different, targeted messages about benefits programs to different segments of the workforce and attempting to make employees better consumers of the benefits programs offered
"Is your organization currently attempting to make employees better consumers of the benefits programs you offer?" (n= 374)²⁹

Option	Overall	Yes, we have made a deliberate or strategic decision to do so	Yes, it is happening without a deliberate or strategic decision to do so	We are currently considering a strategy or strategies to make them better consumers
Yes, we have attempted to target different messages to different employee groups to achieve certain goals	26%	65% ³⁰	13%	23%
No, we have generally communicated the same messages to all employee groups	74%	44%	15%	41%

Figure 42: Organizations that communicate different, targeted messages about benefits programs to different segments of the workforce and offering health promotion and wellness initiatives to employees
"Does your organization offer health promotion and wellness initiatives?" (n= 367)

Option	Overall	Yes	No
Yes, we have attempted to target different messages to different employee groups to achieve certain goals	26%	85% ³¹	15%
No, we have generally communicated the same messages to all employee groups	74%	68%	32%

²⁹ Zero participants responded "No, we are not" in this model.

³⁰ Organizations targeting different messages to specific segments of the workforce are statistically significantly more likely to state making a deliberate or strategic decision to make employees better consumers of benefits programs offered (65%) over organizations that generally communicate the same messages to all groups (44%).

³¹ Organizations targeting different messages to specific segments of the workforce are statistically significantly more likely to offer health promotion and wellness initiatives to employees (85%) over organizations that generally communicate the same messages to all groups (68%).

Demographics

Figure 43: Organization Type
“Your organization is:” (n=415)

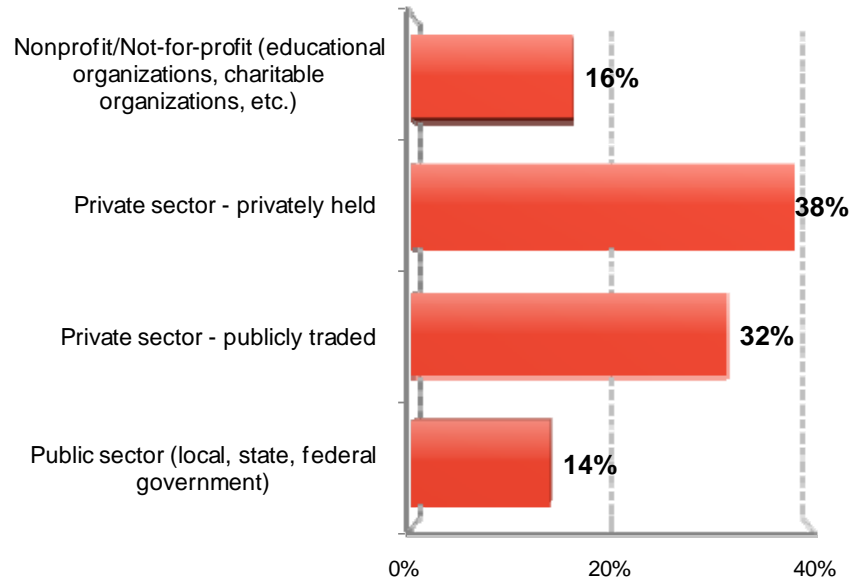


Figure 44: Number of full-time employees
“Please choose the total number of full-time employees (FTEs) your organization employs worldwide:” (n=421)

Option	Percent
Less than 100 employees	11%
100 to 499	24%
500 to 999	13%
1,000 to 2,499	16%
2,500 to 4,999	14%
5,000 to 9,999	6%
10,000 to 19,999	6%
20,000 to 39,999	4%
40,000 to 99,999	3%
100,000 or more	2%

Figure 45: Industry

“Please choose one category that best describes the industry in which your organization operates.” (n=420)

Option	Percent
Finance & Insurance	14%
All Other Manufacturing	12%
Consulting, Professional, Scientific & Technical Services	9%
Healthcare & Social Assistance	9%
Utilities, Oil & Gas	8%
Public Administration	5%
Retail Trade	4%
Information (includes Publishing, IT Technologies, etc.)	4%
Construction	3%
Computer and Electronic Manufacturing	3%
Educational Services	3%
Real Estate & Rental & Leasing	2%
Pharmaceuticals	2%
Transportation	2%
Agriculture, Forestry, Fishing & Hunting	1%
Mining	1%
Other Services (except Public Administration)	1%
Arts, Entertainment & Recreation	1%
Management of Companies & Enterprises	1%
Other	13%

Figure 46: Voluntary turnover
 "What is the approximate annual voluntary turnover for employees?" (n=414)

Option	Percent
0-5%	29%
6-10%	36%
11-15%	18%
16-20%	9%
21-26%	5%
27-40%	1%
41% or more	2%