

2018 Employee Health Care Preconference Workshop

Lightning Round Q&A

Modernizing Benefits Delivery and Administration to Stay Agile and Engaging

March 7, 2018, Marriott Marquis, New York



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Following are some questions asked by attendees during our **Lightning Round Q&A** — and our experts' responses.

What decision support tools did you offer to help your employees with the benefit selection process? And which did they find useful?

Kelley Elliott: There are two main tools that are part of the standard decision support offered within our benefits marketplace platform. One is the recommendation engine, which offers three paths employees could choose from when they first log in – get a recommendation from the system, quickly make my own decisions, or shop on my own. The recommendation engine would ask you to complete a series of profile questions, and then the best benefit choices for you would appear based on how you answered the questions. You don't necessarily have to take the recommendations, though. The provider lookup tool was also very easy to use. A high percentage of our employees used that to plug their doctors in and see if they were in the networks they were considering.

Maureen Paradine: We also use the decision support tool that's built into the platform, the recommendation engine. And we recognized that the more information people put in, the more accurate their recommendations were going to be. So we only gave them the option of one path. We were pretty sure that if we gave them the option to make these decisions on their own, this would lead to inertia. People would stay in their same PPO plans, so we wanted them to see the information they'd get from the system. Not everyone took the recommendation, however. But going forward, now that they understand how it works and see the value in getting a recommendation, we'll be offering all the paths since if they've gone through it once, they will already have a base recommendation to start with.

How does the benefit delivery platform experience change in year two and beyond?

Kelley Elliott: We're looking forward to being able to pull in historical information on claims in future years that employees will not have access to in year one.

Maureen Paradine: In year two, that historical information was there for our employees. So in year one, some employees found it cumbersome to enter their information for themselves and their dependents – for example, information about prescription drug usage, which is very important to enter. But this year, when they went back into the system, it was easier for them to get a recommendation because all of their information was already in there. In other words, if they wanted to get a quick recommendation based on the prior year's history, they could do that. Or they could go through the whole process again and shop for new plans.

What did you think of the experience yourself, as an employee?

Joanne Abate: As an employee, I wasn't surprised by the recommendation I got. And to be honest, I tried to "break" it, figure out all the paths that would lead to different roads. I have a lot of dependents and it was interesting to see how that works, especially around some of the financial questions that were asked. I ended up taking the lowest-contribution plan. As an employee going through the tool, I thought it was pretty intuitive and asked the right questions, which made people think very differently.

In terms of communication efforts around your benefits, what is the best way to reach employees?

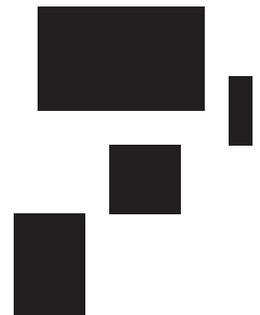
Maureen Paradine: In our case, email is easiest, but it doesn't always reach all employees. So we had flyers up on bulletin boards, we have flat-screen TVs in our break rooms and out on the floor, and we ran infomercials playing nonstop during the day. Every Tuesday morning at 10 o'clock we ran an update and employees were trained to expect something new about our move to the benefit delivery platform. We ran teasers and set it up in a fun, easy way that kept them engaged and got their interest piqued up front. We filmed these internally. And we had different HR people talk about what was in the email each week.

Rhonda Hinton: Our employees are quite spread out, so we used multiple media. We did email blasts, and we also put up posters. We also had flat-screen TVs, where we put up bulletins about what was happening. We also did direct mailings to people's homes. And we had paycheck stuffers. We had lineup meetings with department heads where we gave them information to talk about with their teams on whatever topic we assigned that particular week.

Joanne Abate: We also did everything – emails, flat-screen TVs, posters, banners – and I'd say it pretty much works for everyone. Except for the few that will always say, "I didn't know it was time to enroll."

Debbie Clark: Well, we're a communications company so we did a lot with video. We recorded our U.S. benefit manager and our U.S. total reward head answering questions. We did live Q&A sessions and email – all of our employees have access to that.

Kelley Elliott: We have 1,500 locations in the U.S. So we really struggle to do anything in person, as much as we might want an individual counseling approach. We really try to do as much as we can through our HR teams in our facilities. We do a whole lot of education for our HR team in the facilities with the employee service managers, and they help us facilitate. And we track on a weekly basis how much enrollment we're getting. And we really are engaged with them and ensuring that in the locations where we're not getting that enrollment, we do a bit more to really pump up participation. We have a group of about 35,000 part-time supervisors that work hourly, sometimes even in the middle of the night. They may not be on a regular schedule, so we have to target them with home mailers. There's more we have to do with that group to get them engaged, and we don't have all of their email addresses.



Are you seeing a decrease in 401(k) contributions with the addition of health savings accounts (HSAs) to your benefits? Is your company keeping track of these kinds of changes?

Debbie Clark: We have a relatively highly compensated employee base, and we have not seen a decrease in their 401(k) contributions.

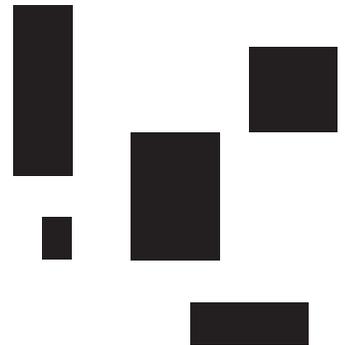
What were the results of adding a hospital indemnity plan to your benefit choices?

Maureen Paradine: That was something that came up about three years in a row in our employee survey. Our employees wanted hospital indemnity, and this complemented our high-deductible HSA plan. We were surprised by how many people actually took the hospital indemnity plan. And when we look at migration to the new offerings, that was the number one best migration of all of our six voluntary products. And each year we do a post-survey and that benefit was the one employees were most happy that we had. And we saw differences in who is taking the coverage – most of the people who took it were 52 and over and were hourly employees, not very many millennials.

How did moving to a new benefit delivery platform affect your negotiating power with carriers?

Joanne Abate: We saw some considerable savings mainly because we hadn't put any of these programs in place before. We moved to Willis Towers Watson's Rx Collaborative, which dramatically changed the way our pharmacy was being managed. And the high-deductible plan, alongside our other two plans – a PPO and a middle-of-the-road high-deductible plan – actually showed us significant savings.

Debbie Clark: Aside from medical, we ran six RFPs in 2017, and not necessarily to get new coverages. In some cases, like life insurance, we got a significant savings not just on the basic, but even on the supplemental. So that was one of the really positive outcomes – our people could visibly see that the cost of their supplemental life insurance coverage went down. Just by opening everything up and really putting everything out to the market, we were able to realize significant savings.



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