

COVID-19 DIGITAL LISTENING for

HEALTH INSURANCE

Group and Individual Benefits Insights and Competitor Trends

05.15 – 05.28 BRIEFING



MARKETBRIDGE



Table of Contents

Weekly Updates for Individual & Group Health Insurance

Top Trends

Within the individual and group health insurance industry, an overview of the top trends from the period

03 Health Payer Trends – Individual & Group

In-depth exploration of the trends and implications among health payers in the individual and group landscape

04 Consumer Trends – Individual & Group

In-depth exploration of the trends and implications among consumers in the individual landscape

08

Industry News Updates

Overview of the most recent industry and regulation happenings within the individual and group space

10

Top Trends Among Individual & Group Insurance During Coronavirus

1

HEALTH PAYER

Insurers continue to expand virtual mental health and well-being plan benefits.

[Page 4](#)

2

HEALTH PAYER

Insurers are supporting community food and essential supply needs during the pandemic.

[Page 5](#)

3

HEALTH PAYER

Insurers recognize the need to guide employers when reopening their offices.

[Page 6](#)

4

HEALTH PAYER

State health insurance marketplaces are offering virtual support to residents.

[Page 7](#)

5

CONSUMER

COVID-19 has surfaced a communication gap between members and insurers.

[Page 8](#)

6

CONSUMER

Consumers are still hesitant to return to in-person healthcare.

[Page 9](#)

1

Insurers continue to expand virtual mental health and well-being plan benefits.

WHAT IS HAPPENING

Insurers and health organizations are continuing to upgrade their virtual mental health and well-being offerings as the pandemic is prolonged.

- Kaiser Permanente is the first insurer to offer the Calm app at no cost to its members.
- Cigna made Talkspace available to its 14 million members enrolled in employer-sponsored health plans.
- Magellan Health is launching a weekly virtual events to support mental health and well-being in youth and young adults.

WHAT ARE THE DETAILS



- Added Calm, a leading mindfulness, meditation and sleep app to its digital self-care portfolio in response to an increased need for well-being assistance during the COVID-19 pandemic.
- Kaiser members will have unlimited access to Calm's content, including guided meditations, sleep stories and video lessons on mindful movement.



- Added Talkspace to its behavioral provider network, expanding members' ability to reach licensed therapists through text, voice and video messages.
- Launched multiple virtual initiatives to address anxiety, depression and burnout, substance use recovery, and OCD, available in select states.



- The virtual Stay at Home for MY LIFE event is for youths ages 13-23 who have experienced mental health, substance abuse and other traumatizing issues.
- Will feature nationally recognized speakers and fun activities to help participants feel hopeful about the future.

WHY THIS IS IMPORTANT

Insurers recognize COVID-19 is impacting members' mental health and are working to remove traditional barriers to care.

IMPLICATION

Insurers should consider implementing virtual mental health and well-being programs as a part of their benefit offerings, as shelter-in-place orders are impacting mental health.

2

Centene is supporting community food and essential supply needs during the pandemic.

WHAT IS HAPPENING

Insurers are establishing programs to provide continued support to in-need communities.

- Centene formed the Health Disparities Task Force to ensure vulnerable populations have access to quality healthcare.
- MHS Health Wisconsin, a Centene subsidiary, is providing donations to fulfill community social determinants of health needs for those heavily impacted by COVID-19.

WHAT ARE THE DETAILS



- The Task Force will contain a group of medical, non-profit and community leaders who meet on a regular basis to advise Centene through the pandemic and beyond.
- Actions will include studying causes of disparities during the pandemic, recommending policy improvements, and performing outreach to community leaders.



- In partnership with Centene, donating a million meals a month for the next 12 months to feed in-need populations.
- Distributing gift cards to help individuals purchase essential healthcare and educational items.
- Making small donations to various organizations throughout Wisconsin that support educational and health initiatives.

WHY THIS IS IMPORTANT

Centene is working to address major health disparities among vulnerable groups.

IMPLICATION

Insurers should continue to support vulnerable populations that have been severely impacted by COVID-19 to support the health and wellness of communities. This can be accomplished through donations and other support initiatives that target health disparities.

3 Insurers recognize the need to guide employers when reopening their offices.

WHAT IS HAPPENING

Multiple insurers have implemented preparedness plans to advise employers about how to safely reopen as states lift stay at home restrictions.

- HealthPartners launched its "Back to Business" solution to support employers that are reopening.
- Geisinger launched an online resource hub to provide businesses with reopening materials and guidance.
- Kaiser Permanente's "Planning for the Next Normal at Work" playbook will guide employers through health considerations for returning to the workplace.

WHAT ARE THE DETAILS



- Providing direct consultation and personalized support to employers, using medical expertise and scientific evidence.
- The consultations will focus on preparedness planning, employee communication, screening and testing, absence management and more.



- The online resource center will include FAQs, best practices, screening guidance, signage kits and other types of informative guidance.
- Employers will also be able to participate in virtual consultations upon request.



- The 98-page playbook was developed in response to business customers' requests for guidance to help them restart their workplace.
- The playbook contains relevant sources and information from the Centers for Disease Control and other leading response organizations as regular updates from the insurer.

WHY THIS IS IMPORTANT

In this unprecedented time, employers need guidance from reputable sources like insurers, to reopen their businesses safely.

IMPLICATION

As partners in care, insurers can be a source of guidance for employees seeking to reopen their businesses by providing safe return-to-workplace health strategies. Consider offering a playbook to display support and thought leadership.

4 State health insurance marketplaces are offering virtual support to residents.

WHAT IS HAPPENING

State marketplaces are using outreach to provide individuals with relevant health plan information.

- Tenet Health partnered with Meredith Health Center to host a Zoom presentation about enrolling in Covered California.
- Covering Wisconsin is driving awareness for its navigators to help state residents enroll in coverage.

WHAT ARE THE DETAILS



- Virtual attendees of the [Zoom informational webinar](#) learned about different coverage options available on the Covered California marketplace.
- Open to all community members, attendees will be able to ask Covered California representatives specific questions about the marketplace.



- The organization [touted its navigators in a local editorial](#) to spread awareness to Wisconsin residents who may need help finding health insurance coverage.
- Navigators are currently using phone calls or video chats to virtually enroll residents that call or schedule appointments, answering outstanding question throughout the process.

WHY THIS IS IMPORTANT

Many recently unemployed consumers who typically have access to their employer health insurance are unfamiliar with how the marketplace works.

IMPLICATION

Insurers with ACA plans should consider developing or expanding virtual solutions to help address the knowledge gap of new marketplace enrollees.

5

COVID-19 has surfaced a communication gap between members and insurers.

WHAT IS HAPPENING

A lack of relevant information and communication from insurers during the pandemic is impacting how members perceive their health insurance carrier.

- A recent J.D. Power consumer attitudes study found consumers expect a more integrated and communicative experience from their commercial plan insurers.
- According the research, 60 percent of private plan members say they were never contacted by their insurer with information related to COVID-19.

WHAT ARE THE DETAILS



- The study found telehealth was one of the largest missed opportunities for communication, likely because of its recent emergence in the medical space.
- According to the research, 75 percent of consumers are aware of telehealth, but 54 percent don't know if their insurer covers the benefits.
- Consumers, often paying high premiums, struggle to see the value of their insurance plans, opening a gap that insurers need to overcome.

WHY THIS IS IMPORTANT

Health plans are not fulfilling consumer expectations of a coordinated, integrated health plan experience.

IMPLICATION

During uncertain times, members want support and guidance from their insurer about how to use their health plan to stay safe and healthy. Insurers should consider enhancing their communication mix to include a variety of outbound tactics such as email, text, mail, outbound calling - as well as inbound tactics such as chatbots to quickly provide advice and information to members.

6

Consumers are still hesitant to return to in-person healthcare.

WHAT IS HAPPENING

Consumers do not consider on-site healthcare safe as COVID-19 continues to permeate the United States.

- Recent studies have shown consumers are hesitant to go to healthcare facilities because of COVID-19 concerns.
- While virtual care platform use has risen, 84 percent of doctors report having patients who struggle with navigating digital platforms
- Premera Blue Cross launched a new virtual care employer plan to address surfacing member concerns of in-person healthcare visits.

WHAT ARE THE DETAILS



- An Alliance of Community Health Plans survey found 41 percent of respondents have delayed in-person care services while 42 percent are uncomfortable going to a hospital for any medical treatment.
- The study found 74 percent of respondents believe there will be a resurgence of COVID-19 in the fall or winter.
- Consumers have turned to telehealth as an alternative; 28 percent have used telehealth in the past three months and 46 percent of respondents were comfortable with trying telehealth.



- The new virtual care plan was designed in partnership with 98point6, a telehealth company.
- It will offer free virtual visits and will be available at a reduced premium compared to a standard PPO plan.

WHY THIS IS IMPORTANT

Members who avoid getting care for fear of COVID, may suffer the longer-term consequences of unaddressed health issues.

IMPLICATION

Insurers should consider introducing virtual healthcare benefits and/or virtual care plans to ensure members are still getting the care they need during COVID and beyond. Further education about how to use telehealth should be provided in tandem as the focus on virtual benefits grows in demand.

Industry News Related to Coronavirus

As of May 28, 2020

LAI-D-OFF WORKERS FACE DEADLINES TO RECEIVE ACA HEALTH INSURANCE

- Workers who lost their jobs (and therefore health insurance) at the end of March are reaching the end of their 60-day Special Enrollment Period for enrolling in individual health insurance coverage through the ACA marketplace.
- Many people may struggle to sign up for coverage on the ACA marketplace due to their lack of knowledge and an overall lack of information about how to apply to the federal health insurance exchange.

INSURERS ARE PROJECTED TO EXPAND THEIR ACA PRESENCE IN RESPONSE TO HIGH ENROLLMENT

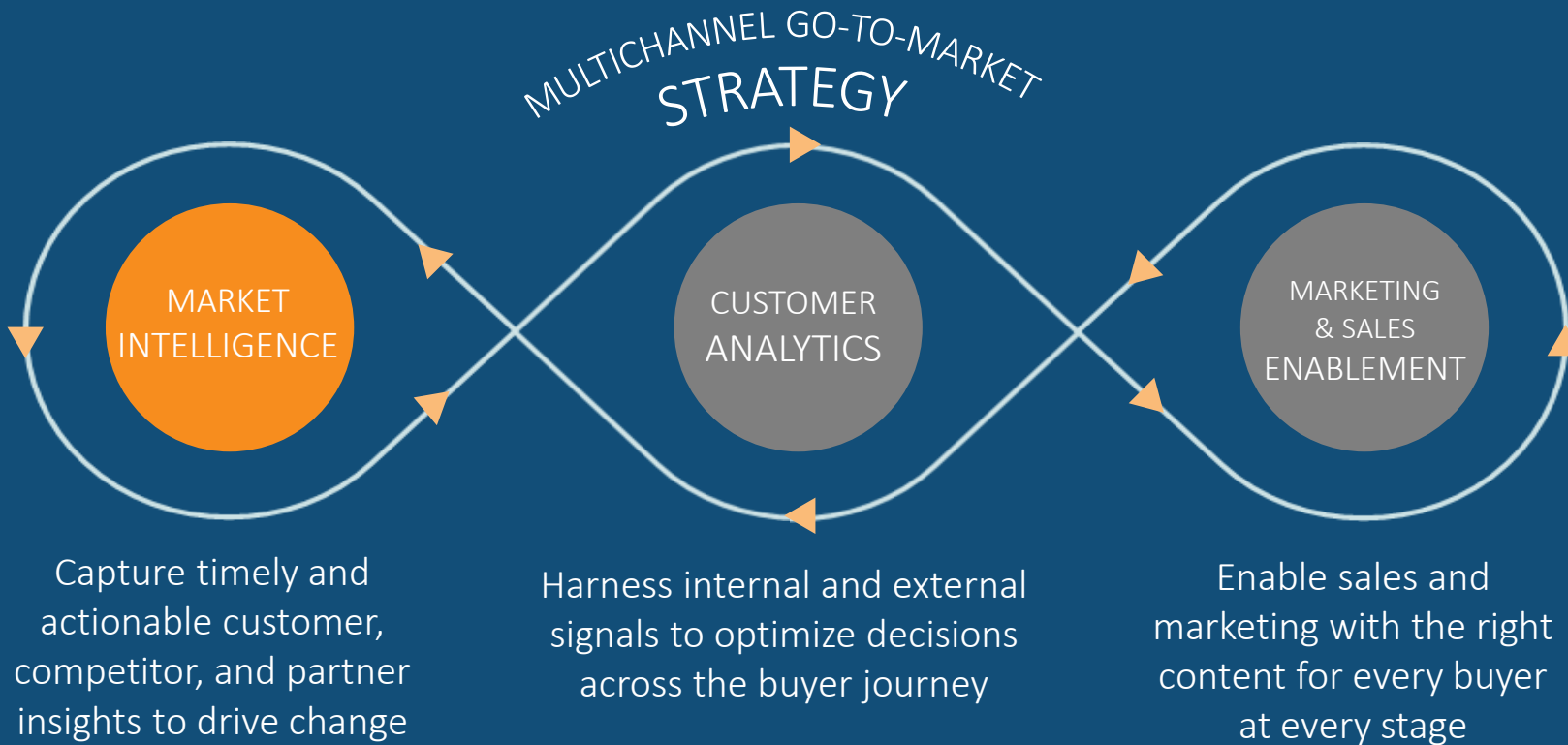
- As people start to lose their employer-sponsored health insurance, they are turning to the ACA marketplace to fulfill their health insurance needs.
- Tax advisory firm KPMG estimates an increase of 4.3 million people in the exchanges through June.
- Health insurers Bright Health, UnitedHealthcare, Anthem and others have announced plans to expand their ACA presence in the next few years.

1.6 MILLION TEXANS HAVE LOST THEIR EMPLOYER HEALTH INSURANCE

- Over 2 million Texans have filed for unemployment since the start of the COVID-19 pandemic.
- Texas had the nation's highest uninsured rate pre-pandemic and the recent layoffs threaten to expand this gap.

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