



HBCH 2017 Interest Survey Results

The survey was completed between December 15, 2016 – February 15, 2017. It was included along with 2017 member invoices and was used as an incentive to reduce the annual fee by 15%. It was also sent to HBCCH member prospects. The survey was sent to each organization's primary contacts to HBCCH. The survey was administered via Survey Monkey.

I. Organizational Demographics, Challenges & Opportunities

The survey was completed by 41 organizations of which 98% were HBCCH members. Employers represented 60% of responders, reflective of employer HBCCH membership. The energy & support services sector was the leading industry completing by survey. Respondents represented 319,281 local employer-sponsored lives and 616,017 national lives.

Survey participants were asked to describe their top three 2017 health benefits challenges. Several themes were identified. The list below is a summary of top issues listed in order of response prevalence with listed comments, recognizing there is overlap between categories.

- **Cost:** medical claims, high cost claims, premiums, transparency, aging workforce, out of network utilization/charges, retiree medical
- **Pharmacy:** cost, trend, traditional, specialty, site of care
- **Engagement:** communication, wellness / well-being, education, consumerism, HSA use, motivation
- **Chronic condition management:** diabetes, BP, consumer tools, coordinated care, maternity, musculoskeletal, obesity
- **Other:** limited resources, dynamic industry, market pressure, complicated admin system, uncertainty, compliance, ACA, reporting, geographic location of all buildings
- **Wellness & Well-being:** engagement, demonstrating ROI, health improvement, participation, buy-in
- **Delivery:** bed less hospitals, ER utilization, healthcare system navigation, PCP utilization and follow-up, out of network charges, preventative services, quality, emerging provider structures, out of network
- **Design:** HDHP replacement, incentives, HSA enrollment, retiree medical, flex benefits, employee satisfaction, HSA satisfaction, population health management, hourly worker benefits
- **Data:** direct access, reporting, population health management, cost & outcome transparency

Survey participants were also asked to identify the top three areas of opportunity for impactful change for 2017. The list below is a summary of top perceived areas of opportunity listed in order of response prevalence with listed comments, recognizing there is overlap between categories.

- **Wellness & Well-being:** nutritional services, incentives, coaching, integrated strategy, adding a program, successful programs, creating a culture, health improvement, customized portals, behavioral change, convenient fair locations
- **Delivery:** Alternative delivery & payment Models (COEs), high quality PCPs, correct diagnosis, maternity care, urgent care vs. ER utilization, on-site clinics, concierge navigation of HC system, quality, telehealth, treatment guidelines impact, ACOs, coordinated care, pain management, access
- **Engagement:** cost education, technology, meaningful communication methods, consumerism education and tools
- **Pharmacy:** rebates to employers, internal cost management, price transparency, data analysis, steer to generic prescriptions, overall strategy
- **Cost:** reference-based pricing, consumer guidance, value-based purchasing, new administration, HSA utilization, cost control, dependent preventative care, cost shifts to drive innovation, cost transparency, cost education, integrated budgets
- **Design:** consumer driven model, elective benefits, design diversity, meaningful plan changes, tiered networks, spousal preventative services utilization, steer usage, value-based design, integrated strategy
- **Other:** new administration focus on HSA, less regulation, not sure, benefits outsourcing, unsustainability will drive innovation, collaboration among different entities, improved customer experience
- **Data:** mining, reporting, access, transparency tools, create strategy around data, access to medical and pharmacy costs
- **Chronic disease management:** musculoskeletal, diabetes, stress

II. Preferred General Topics

Survey participants were requested to rank order their preferred **general topics** of interest. Ten categories were available from which to choose. For each general topic below, the first percentage is the cumulative of responders identifying in their top 3. The second is the cumulative of responders identifying in their top 6. Topics are listed in order of top 3 preferences.

• Wellness & Well-being:	52.6%	71.0%
• Alternative Delivery & Payment:	47.5%	60.5%
• Condition Management-Best Practices	39.5%	73.7%
• Current Benefits Design Issues:	37.8%	82.5%
• Benefits Communications:	31.6%	68.4%
• Data Repository & Analytical Platforms:	26.4%	71.0%

• Benefits Legislative & Regulatory Issues	26.3%	55.2%
• Employer Benefits Purchasing Toolkits	15.8%	42.1%
• Employer Health Clinics	13.1%	42.1%

III. Preferred Specific Topic Areas

Survey participants were requested to select **up to three specific topics** under as many general topics as desired. There was a minimum of six and a maximum ten choices under each general topic. Results below show the cumulative percentage of responders listing each topic among their top 3.

• Alternative Delivery & Payment Models		
○ Centers of excellence		63.2%
○ Value-based purchasing		47.4%
○ Condition specific bundled payments		42.1%
• Purchasing Tools through Catalyst for Payment Reform		
○ Tools for specialty pharmacy		57.9%
○ Tools for supporting transparency		55.3%
○ Tools to assess Houston's health delivery system		34.2%
• Employer Health Clinics		
○ Virtual / telephonic / concierge delivery		50.0%
○ On-site clinics for population health mgmt.		47.4%
○ Use of clinics for chronic condition management		39.5%
• Data repository & Analytical Platforms		
○ Best population management dashboards		65.8%
○ Case studies of using data to impact change		57.9%
○ Recommended data set collection & analysis		47.4%
• Current Benefits Design Issues		
○ Linking benefits design to desired outcomes		79.0%
○ Specialty pharmacy management		52.6%
○ Linking health benefits & human capital development		52.6%
• Benefits Communications		
○ Best practices for benefits awareness and utilization		79.0%
○ Tools for transparency, navigation & consumerism		57.9%
○ Best practices for open enrollment		52.6%
• Wellness / Well-Being		
○ The ROI of wellness vs. disease management		76.3%
○ Best incentives to drive engagement & outcomes		68.4%
○ Increased utilization of preventative services		47.4%
• Condition Management Best Practices		
○ Obesity		71.0%
○ Diabetes		63.2%

- Musculoskeletal 60.5%
- **Current Benefits Legislative & Regulatory Issues**
 - The future of the Affordable Care Act 94.7%
 - Top 10 benefits compliance issues 55.2%
 - EEOC rulings impacting health benefits design 42.1%

IV. Benchmarking Interests Supported by HBCH

Survey participants were requested to rank order the type of benchmarking they would like HBCH to support and /or administer. Seven categories were available from which to choose. For each benchmarking type below, the first percentage is the cumulative of responders identifying as their #1 choice. The second is the cumulative of responders identifying as their #1 and #2 choices. Topics are listed in order of their #1 choice.

- HBCH Annual Employer Health Benefits Design & Cost Survey 29.0% 52.6%
- Benchmarking of pharmacy benefit managers (PBM) 23.7% 43.2%
- Benchmarking of local health plans, e.g. eValue8 21.1% 34.2%
- Benchmarking of local health systems, e.g. Leapfrog 13.2% 26.3%
- National consultant surveys, e.g. Aon, WTW 7.9% 39.5%
- HBCH employer benefits provider listing 5.3% 13.2%
- Other 0.0% 0.0%

IV. Event Logistics

Survey participants were requested identify preferences for HBCH programming. Results are displayed in order of preference.

- **Number of general membership events per year**
 - 5-7 57.9%
 - 3-4 34.2%
 - 8-9 7.8%
- **Preferred general membership meeting location**
 - West Houston 34.2%
 - Galleria area 34.2%
 - Downtown 31.6%
 - Others 15.8%
- **Preferred general membership meeting start time**
 - 8:00 am 42.1%
 - 9:00 am 31.6%
 - 12:00 pm 31.6%

- 3:00 pm 21.1%
- Other 2.6%

- **Preferred general membership meeting time length**

- 1-2 hours 71.0%
- 2-3 hours 23.7%
- 3-4 hours 5.3%

- **Preferred educational program modality**

Survey participants were requested to identify their preferred educational program modality. The first percentage is represents those who identified as their #1 choice. The second percentage is those identifying as their #1 or #2 choices. Results are listed in order of #1 preference.

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| ○ General membership program | 57.9% | 63.2% |
| ○ Small group by issue | 26.3% | 65.8% |
| ○ Small group by size or industry type | 13.2% | 52.6% |
| ○ Webinar (1-hour) | 2.6% | 18.5% |