## Pulse of the Purchaser 2024 Survey Results



## Summary

Pulse of the Purchaser, a national survey of employers, was conducted September-October 2024 with 188 responses from private and public employers and purchasers across the country

The survey gauged concerns and views of employers around the following:

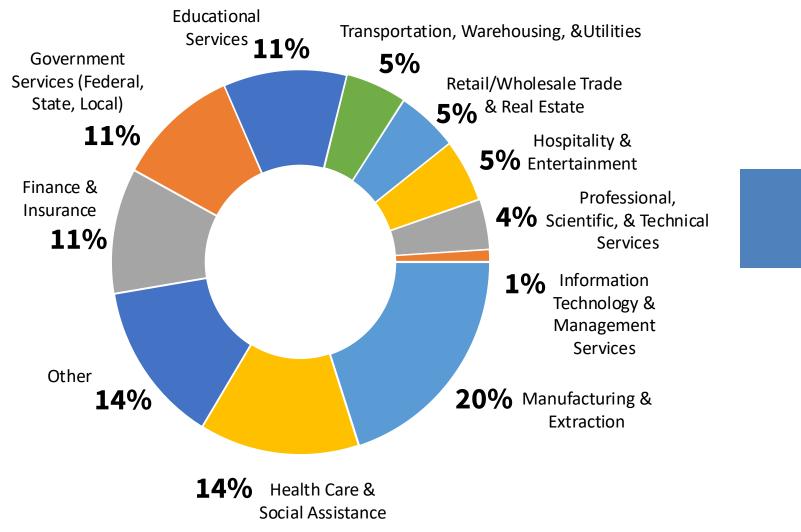
- Workforce environment
- Health strategies (e.g., women's health, obesity management, mental health, equity)
- Pharmaceutical drug strategies
- Hospital price strategies
- High-cost claim strategies
- Fiduciary strategies
- Potential health reforms

The survey was conducted with member coalitions and organizations with more than 10 employer members responding including – Midwest Business Group on Health, Lehigh Valley Business Coalition on Healthcare, Florida Alliance for Healthcare Value, Dallas/Fort Worth Business Group on Health, and HealthCareTN



### **188 Total Respondents**

#### **Industry Breakdown**



### Organization Size Breakdown Number of Employees

Small employers (Fewer than 1,000 employees) **24%** 

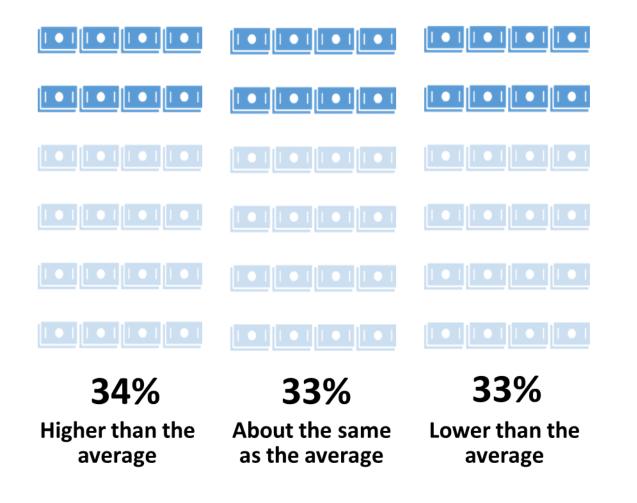
Mid-size employers (1,000 - 9,999 employees) **40%** 

> Large employers (10,000 - 49,999 employees) **25%**

> > Jumbo employers (50,000+ employees) **11%**

#### **Employer healthcare spending varied widely**

In 2023, the average annual premium for fully insured employer-sponsored health insurance was \$8,435 for single coverage and \$23,968 for family coverage.



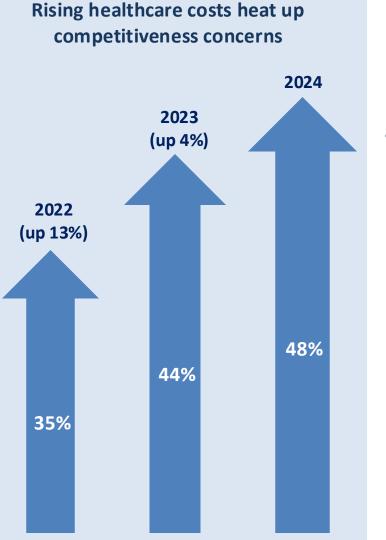
Several employers highlighted the success of strategies in managing costs:

"We have used alternative healthcare plan strategies that have allowed us to control our healthcare spend as well as cost-sharing with our workforce." – Survey respondent

Other employers expressed frustration with external factors, including geographic location and federal policies:

"We are in Indiana (8th most expensive state), geographically held hostage to the second most expensive healthcare network in the state." – Survey respondent

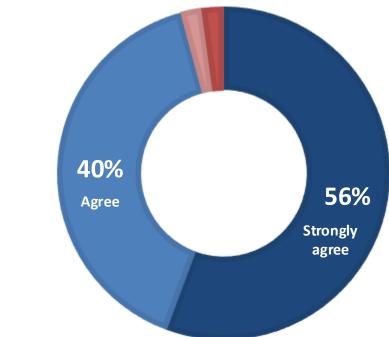
#### **Purchaser Perspectives on Managing Costs**



Amid rising costs, over 9 out of 10 employers prioritize employee attraction and retention and the role of health and wellbeing benefits

**98%** of employers agree attracting and retaining employees is a top priority 25% Agree 73% Strongly agree

**96%** of employers agree health and wellbeing benefits play a crucial role in our employee attraction and retention efforts



The percentage of employers strongly agreeing that rising healthcare costs impact their competitiveness has steadily increased year over year

"Rising healthcare costs are not just a budgetary issue; they're an existential threat to our workforce strategies." – Survey respondent Healthcare cost increases often lead to trade-offs with salary or wage increases



Higher healthcare costs will result in further cost-shifting to employees



Strongly Agree

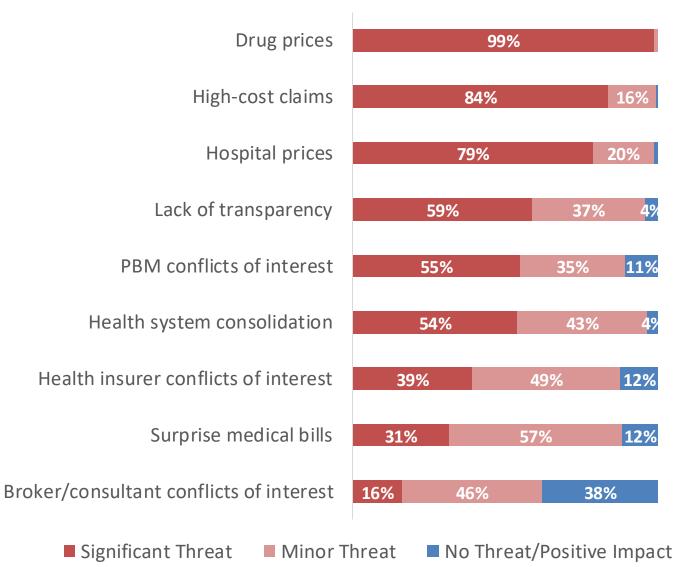
## "It's not just about cost control anymore; it's about survival."

Survey respondent

**74%** of employers believe that increases in healthcare costs often lead to trade-offs with salary or wage increases, with **38% strongly agreeing** 

**74% of employers** agree that rising healthcare costs will lead to cost-shifting to employees, with **38% strongly agreeing** 

#### Three biggest threats to affordability are drug prices, high-cost claims, and hospital prices



**Consistent with the past four years, nearly 8 out of 10** employers consider drug prices, high-cost claims, and hospital prices a significant threat to affordability

99% of employers believe that drug prices are a significant threat

"Prescription costs are a joke." – Survey respondent

#### **Employer health equity strategies are continuing to trend upwards**

Engaging various departments to discuss company strategy (e.g., diversity & inclusion, HR, benefits, wellbeing)

Surveying employees about perceived access to care, quality, and patient experience

Collecting qualitative data through focus groups

Placing and measuring accountability for health equity in service provider contracts

Currently Doing Considering Next 1-3 Years Not Considering

Trending up:

Employers continue to engage various departments to discuss company strategy

- up 15% from 2023 (59%)
- up 22% from 2022 (52%)

	74%	15% 12%
30%	38%	31%
23%	30%	47%
21%	33%	46%

### How employers are analyzing health equity data

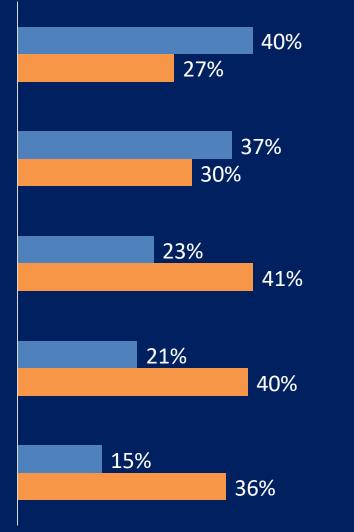
Analyzing health claims/outcomes data based on gender

Analyzing health claims/outcomes data based on geographic location

Analyzing health claims/outcomes data based on income levels

Analyzing health claims/outcomes data based on race/ethnicity

Stratifying employee survey results on perceived access, quality, and patient experience by sub-populations



Currently Doing Considering Next 1-3 Years

Over 3 out of 5 employers are currently or considering analyzing their health claims based on gender, geographic location, income levels, and race/ethnicity



Women's health benefits employers are currently offering:



8%	offer maternity	
sup	port services	



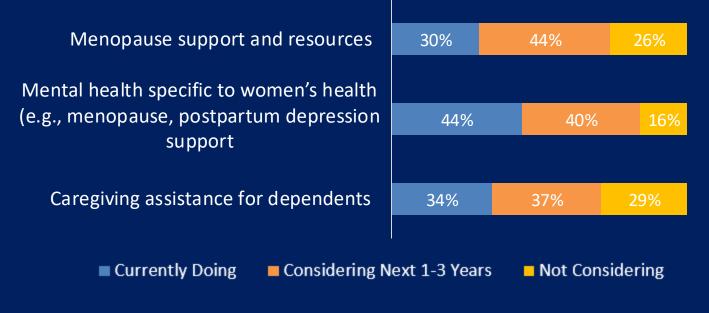
75% offer parental leave



63% offer coverage on gynecological issues (e.g., endometriosis, cervical cancer)



55% offer reproductive healthcare and fertility services The fastest-growing women's health areas include menopause support, mental health support, and caregiving assistance



#### Trending up:

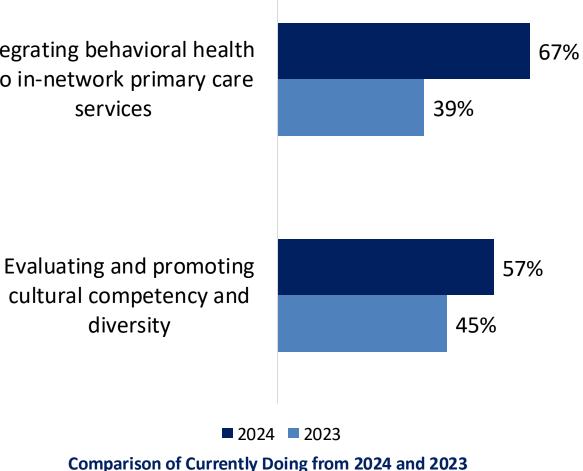
Employers interest in implementing the following maternal health strategies has **continued to increase**:

- Menopause support and resources up 14% from 2023 (16%)
- Maternity support services up 9% from 2022 (69%)
- Reproductive healthcare and fertility services up 6% from 2023 (49%)

#### **Purchaser Perspectives on Mental Health**

**Employers expand mental health efforts;** uptake grows by 28% and 12% from 2023 on the following strategies:

Integrating behavioral health into in-network primary care services





48% have established vendor accountability (e.g., performance metrics)

**74%** currently offer programs that educate on mental health stigma/bias

#### **Trending up:**

Employers interest in implementing the following mental health strategies has **continued to increase**:

Integrating behavioral health into in-network primary care services up 28% from 2023 (39%)

Evaluating and promoting cultural competency and diversity up 8% from 2022 (45%)

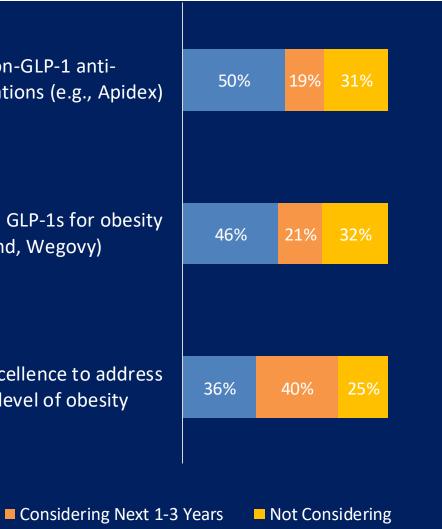
### Addressing obesity in the workplace: current trends and future plans

Coverage of non-GLP-1 antiobesity medications (e.g., Apidex)

Coverage of branded GLP-1s for obesity (e.g., Zepbound, Wegovy)

Use of centers of excellence to address those with high level of obesity

Currently Doing



#### Obesity benefits employers are **currently offering**:



**84%** Lifestyle programs (e.g., exercise and nutrition programs)



72% Coverage of bariatric surgery



54% Reduce bias and stigma through communications, messaging in programs

#### Trending up:

Employers continue to lean in on strategies they are familiar with. The following currently available obesity strategies continue to rise:



Reducing bias and stigma through communications, and messaging in programs up 12% from 2023

Lifestyle programs (e.g., exercise and nutrition programs) up 6% from 2023

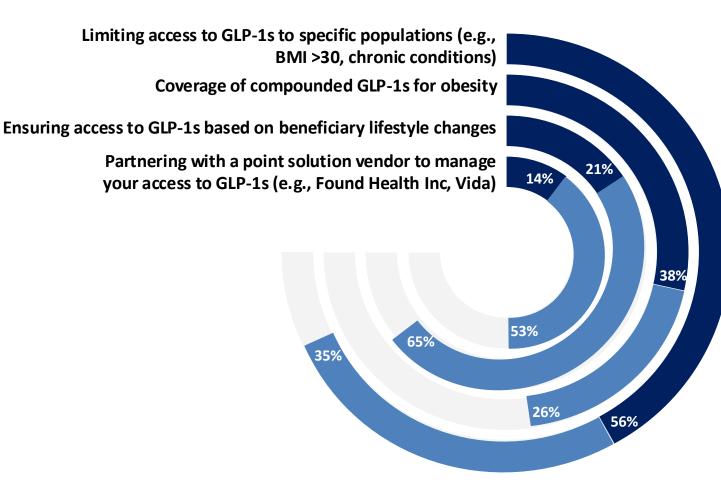
#### **Purchaser Perspectives on Obesity**

#### Trends in GLP-1 coverage: Current adoption and future considerations among employers

Of the 67% of employers currently offering or considering GLP-1 coverage in the next 1-3 years, many are considering the following solutions to mitigate their costs:

Nearly 2 out 3 of employers currently offering or considering GLP-1 coverage are adopting the following strategies:

- Limiting access to GLP-1s to specific populations (91% currently/considering)
- Ensuring access to GLP-1s based on lifestyle changes (86% currently/considering)
- Partnering with point solution vendor to manage access (67% currently/considering)
- Coverage of compounded GLP-1s (64% currently/considering)



# Employers' primary PBM contracts are with:

**16%** Other PBM

12%

Transparent PBM 72%

One of the "Big Three"

- CVS Caremark
- Express Scripts
- OptumRx

#### **Over half of employers plan PBM changes in the next 1-3 years:**



52% of employers are considering changing their PBM in the next 1-3 years while 48% are not planning on changing

#### Why employers are rethinking their PBM choices Comments from employers:

- More transparent contract and pricing
- Take more control over the formulary and add more customized options, based on our population
- Reduce conflicts of interest
- Strong belief that we need to be more involved in the day-to-day management of Rx utilization, access, and claims
- Lack of transparency makes it impossible to tell whether our PBM is making the right choices for our organization
- To comply with fiduciary requirements, we will be re-evaluating our PBM contract

PBM strategies employers are **currently doing or considering in the next 1-3 years:** 



Promotion and inclusion of biosimilars on formulary

## 94% 🖉 🖉 🖉 🖉 🖉 🖉 🦉 🦉

Confirmation that advisors do not receive any direct or indirect compensation from PBM or related third-party



Full and independent audit rights of PBM contract and rebate agreements

94% 🕫 🗗 🗗 🗗 🗗 🗗 🗊 👘

Ownership of all data generated by the health plan

The fastest-growing PBM strategies include: confirming transparent revenue disclosure, comprehensive rebate definition, and flexibility to customize formulary

25%

30%

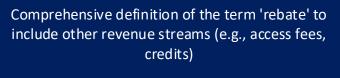
33%

33%

41%

45%

Full disclosure of all revenue streams with affiliated pharmacy-related entities



Flexibility to customize formulary without financial penalties

Use of a value-based formulary versus a rebatedriven formulary

Inclusion of cell and gene therapies

Removal of low-value drugs

Currently Doing

Considering Next 1-3 Years

Not Considering

25%

15%

12%

61%

58%

50%

47%

41%

29%

#### **Purchaser Perspectives on PBMs**

#### Unlocking cost savings: employers using PBM strategies to control premiums

Comparison of employers currently doing the following PBM strategies by annual premium

62% 58% Promotion and inclusion of biosimilars on formulary 56% Ownership of all data generated by the health plan 47% Full and independent audit rights of PBM contract and rebate 55% 44% agreements Confirmation that advisors do not receive any direct or indirect 45% 37% compensation from PBM or related third-party 41% Use of a value-based formulary versus a rebate-driven formulary 14% 39% 33% Removal of low-value drugs 36% Inclusion of cell and gene therapies 28% Comprehensive definition of the term 'rebate' to include other 33% 9% revenue streams (e.g., access fees, credits) 33% Flexibility to customize formulary without financial penalties 19% Full disclosure of all revenue streams with affiliated pharmacy-22% 7% related entities 17% Complete transparency regarding net/ingredient cost by drug 9%

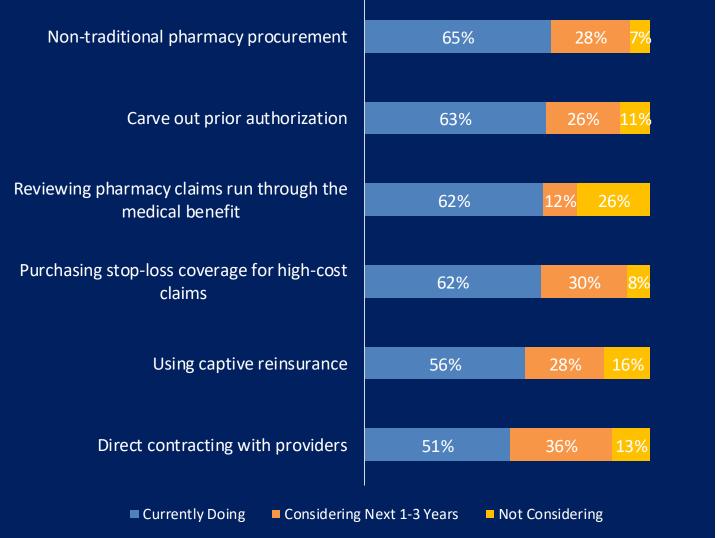
Lower than average annual premium

Higher than average annual premium

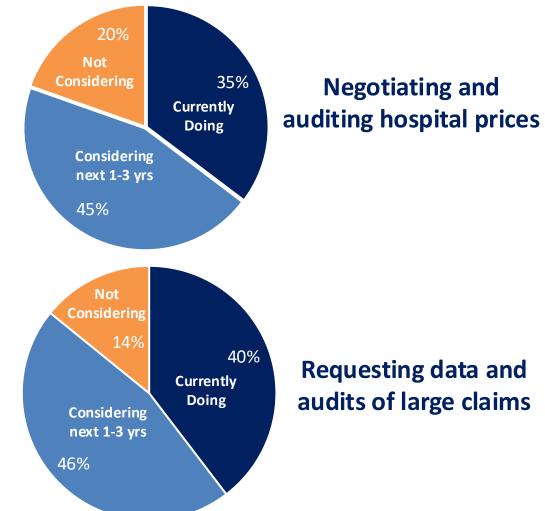
Employers implementing these healthcare strategies saw the greatest reductions in premiums for the following strategies:

- Value-based formulary versus rebate-driven formulary: +27% net for lower premiums (41% lower vs. 14% higher).
- Comprehensive definition of the term "rebate" to include other revenue streams (e.g., access fees, credits): +24% net favoring lower premiums (33% lower vs. 9% higher).
- Full disclosure of all revenue streams with affiliated pharmacy-related entities: +15% net toward lower premiums (22% lower vs. 7% higher).
- Flexibility to customize formulary without financial penalties: +14% net with lower premiums (33% lower vs. 19% higher).

## More than half of employers are currently implementing the following high-cost claims strategies:



**Employers driving efficiency: Auditing hospital prices and large claims for better negotiations** 



#### How employers are strategizing to mitigate high-cost claims

Site of care redirection (e.g., home infusion)

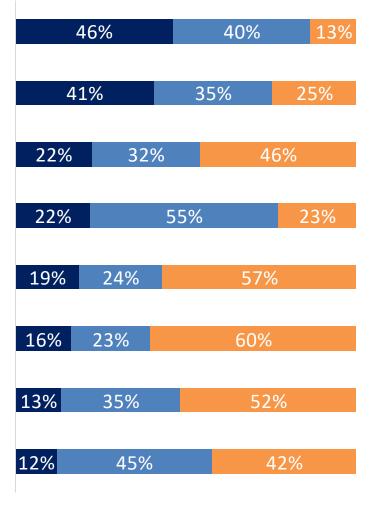
- Promoting precision medicine for cancer treatment
- Confirming diagnosis with expert medical opinion
- Reducing risk of neonatal ICU claims (e.g., managed maternity, fertility benefits)

Centers of excellence/bundles

Disease-specific vendor(s) (e.g., diabetes management, cancer)

Navigator/enhanced case management

Enhanced screening/early detection



Top strategies employers are considering next 1-3 years

## 55%

Reducing risk of neonatal ICU claims (e.g., managed maternity, fertility benefits)

45% Enhanced screening/early detection

**40%** Site of care redirection (e.g., home infusion)

Currently Doing

Considering Next 1-3 Years

Not Considering

## **Top concerns for employers as fiduciaries**:

Combined employer responses who selected concerned and somewhat concerned

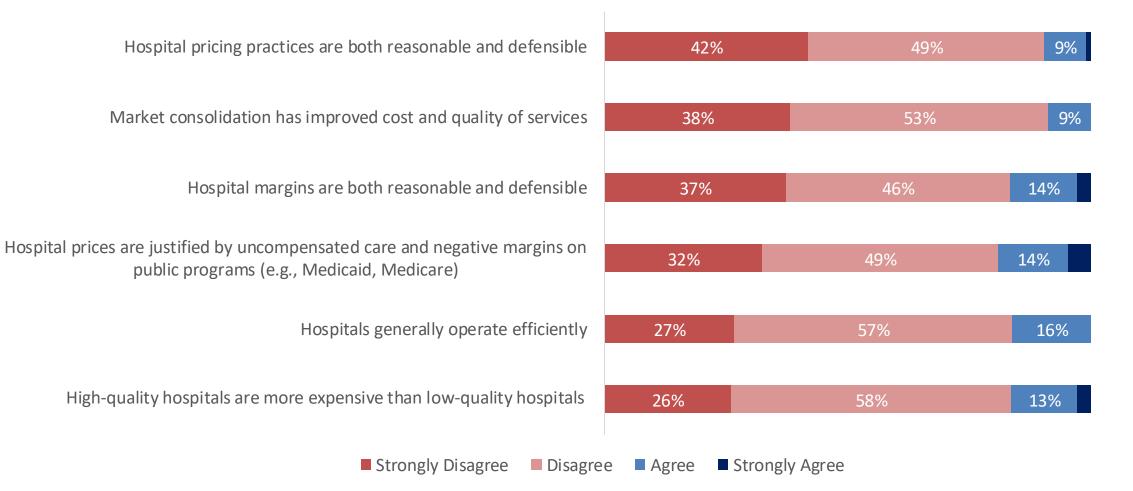


## 59% More than the services provided

### 

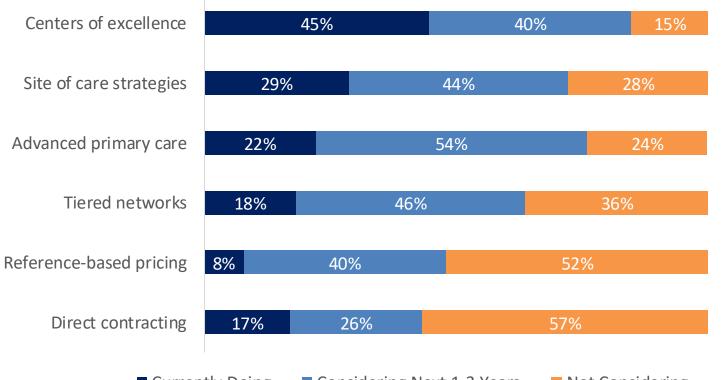
## 47% à à à à à à à à à à à à à à à a

# Over 8 out of 10 plan sponsors doubt hospital efficiency, pricing, and benefit of consolidation



"Hospital pricing is absolutely out of line and considered gouging." – Survey respondent

## Fastest-growing hospital pricing strategies include advanced primary care, tiered networks, site of care strategies



Currently Doing

Considering Next 1-3 Years

Not Considering

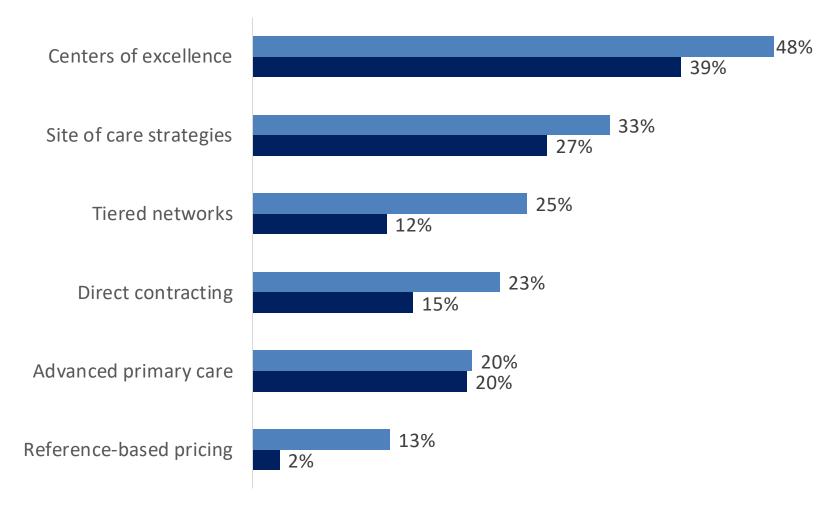
Employers share the difficulties they face when attempting direct contracting, leading to less uptake and interest, "We have been talking to the local hospitals for over a year. We would like a direct contract, but they are not willing to discuss."

Over 7 out of 10 are currently offering or considering in the next 1-3 years:

- Centers of excellence (85%)
- Advanced primary care (76%)
- Site of care strategies (72%)

#### **Purchaser Perspectives on Payment Strategies**

#### Unlocking cost savings: Employers using payment strategies to control premiums Comparison of employers currently doing the following light of hospital pricing practices by annual premium amount

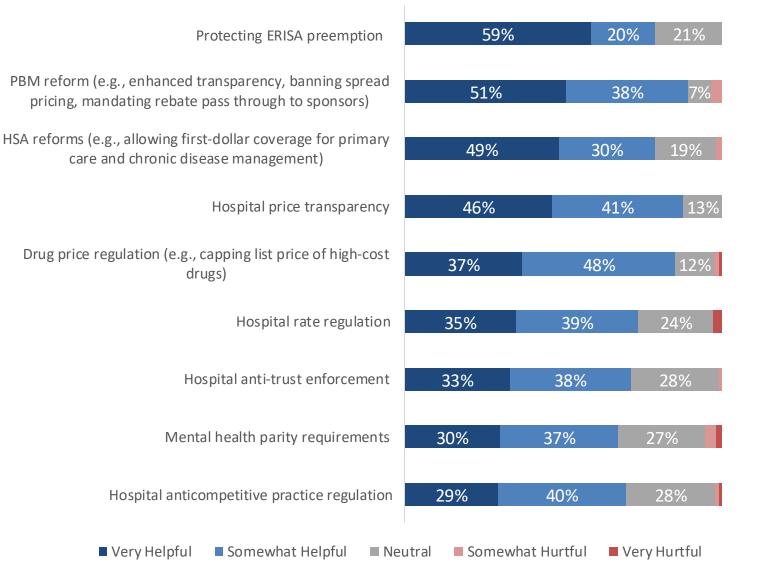


Lower than average annual premium
Higher than average annual premium

Employers implementing these healthcare strategies saw the greatest reductions in premiums for the following strategies:

- Tiered networks: +13% net favoring lower premiums (25% lower vs. 12% higher)
- Reference-based pricing: +11% net toward lower premiums (13% lower vs. 2% higher)
- Centers of excellence: +9% net for lower premiums (48% lower vs. 39% higher)
- Direct contracting: +8% net with lower premiums (23% lower vs. 15% higher)
- Site of care strategies: +6% net favoring lower premiums (33% lower vs. 27% higher)

### Employers are increasingly supportive of policy reforms that can improve transparency and fair pricing



#### Trending up:

Employers interest in PBM and HSA policy reforms has **increased substantially from 2023 to 2024**:

HSA Reform (up 20%) (29% 2023)
PBM Reform (up 13%) (38% 2023)

#### **Opportunity for education:**

Almost half of the employers would benefit from "more information" on the following policy reforms:

- Shrinking the size of the 340B Program
   (50% need more info)
- Healthcare global budgets
   (47% need more info)

### **About the National Alliance Purchaser Coalitions**

The National Alliance of Healthcare Purchaser Coalitions (National Alliance) is the only nonprofit, purchaser-aligned organization with a national and regional structure dedicated to driving health and healthcare value across the country. Its members represent private and public sector, nonprofit, and union and Taft-Hartley organizations, and more than 45 million Americans, spending over \$400 billion annually on healthcare. To learn more, visit nationalalliancehealth.org and connect on LinkedIn.

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