An Employer's Guide to Selecting a Group Health Plan



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Choosing a group health plan is one of the most critical business decisions you can make, particularly in uncertain times like these. You want a partner to help you manage costs, invest in your employees' wellness, and build a healthy business.

But finding the right partner can be challenging and time-consuming. That's why we created our *Guide to Selecting a Group Health Plan*. Use it as a checklist to ask all the right questions of the insurers you're considering and weigh the best options for you and your employees.

Sections

Plans

How do your health plans support my business goals?

Start with the basics. Does the insurer have a reputation for quality and a commitment to its members? Will they help you and your employees manage health care costs? Attract and retain talent? Support a remote workforce? How have other businesses benefited from working with them?

What plan options are available to help my employees offset costs?

Does the insurer offer incentives that motivate my employees to stay healthy? What about health funding accounts so employees can set aside pre-tax dollars for qualified medical expenses?

What's the best way to compare group health plans?

Don't focus on cost alone. Instead, evaluate each plan's benefits based on the needs of your workforce, premium and copay structures, deductibles, and cost-saving benefits like free preventive care and other health perks. All these options impact the bottom line.

Benefits

What are the key benefits across your group health plans?

Savings on prescription drugs? Vision and dental coverage? Free preventive care, including mental health? Low-cost prescriptions, including preventive drugs?

What unique benefits do your plans offer?

Nearly all health plans provide cost-saving benefits and conveniences in addition to the standard coverage. Ideally, you should be on the lookout for services that encourage your workforce to stay healthy and supported—whether it's free routine checkups, personal health coaching, or even visiting you in the hospital when you're sick.



How far-reaching is their network of doctors?

Does the insurer partner with best-in-class care doctors and hospitals, not only locally but across the country? Will it be able to support employees who are traveling for work or on vacation? Do plans include emergency coverage anywhere in the world?

How do you ensure the quality of your provider network?

What kind of relationship does the insurer have with its providers? Are they compensated based on the number of patients they see, or the quality of care they provide? Also, do the plans make it easy for employees to connect with top-performing doctors and hospitals locally? What about nationally and internationally?

Are my employees' doctors covered under the plan?

Check to make sure the plans you're researching have a strong local network. After all, your employees will want to know that their preferred providers are covered, particularly their primary care physicians, preferred specialists and area hospitals.



How do your plans keep my employees healthy and productive?

Plans should focus on comprehensive wellness programming—things like preventive care, weight management, mental health care, smoking cessation, pregnancy support, preventive drugs, and even reimbursement for gym memberships.

Do you offer incentives for employees to achieve their best health?

The best plans reward your employees for staying healthy—with personalized programs that allow them to earn perks for accomplishing their specific health goals.

What about integrated workplace wellness options?

Plans that offer on-site and online wellness programs are custom designed to give you another way to support your employees' health while saving money. Based on the unique needs of your workforce, they can include everything from employee weight management challenges, to smoking cessation campaigns, to flu shot clinics and more.

Telehealth

What kind of telehealth options are available for medical services?

Telehealth services are essential if you have a growing number of remote or mobile workers. Do the plans offer live video doctor visits? If so, are the providers licensed? Are they local and national? Are they able to write prescriptions? Do they include mental health doctors? Is virtual ER care an option, too?

What about telehealth for virtual wellness?

Beyond medical, how do the plans extend wellness to employees traveling or working from home? Do they offer telenutrition options to help them eat better? Do they also support fitness and behavioral health options via phone or computer?

Service

How comprehensive is your customer service?

Do live, local representatives answer the phone, and how fast? What about email? Does the insurer offer convenient locations for employees who seek in-person support? What's the word on the street? (Tip: the best way to gauge an insurance carrier's customer service quality is to ask about their member satisfaction rates and ratings from independent organizations like NCQA.)

Do your plans offer one-on-one support?

Sometimes your employees need someone to talk to about their health concerns, mind and body. Is there a dedicated care team to help coordinate appointments, discuss chronic ailments, or provide on-the-ground support when you or your employees are in the hospital?

What about online tools and resources?

Make sure the insurer offers secure employer and member websites for managing your accounts. It should also offer mobile apps to keep you connected on the go—whether to review claims benefits or find an emergent care facility.

How are you supporting businesses during COVID?

Is the insurer doing everything in its power to support your business during the pandemic? Does it offer a mental health hotline? What about a prescription drug mail order for people who are quarantining?

Important Resources

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