

## How can professional service firms build a high-performing benefits program?

In September 2020, our article entitled **Addressing the Challenge of Affordability in 2021 and Beyond** discussed the cost and affordability challenges facing many professional service firms and their participants. For professional service firms looking to improve the participant experience while containing costs, engaging with an alternative approach can enable firms to build high-performing and integrated benefits programs.

For several years now, large employers have been building custom ecosystems with best-in-class vendors to address challenges specific to their own populations. This often involved moving away from the traditional health plan model and using a third-party administrator for claims administration and certain utilization management functions. An independent “navigation” vendor would often sit atop all the other vendors and serve as the single entry-point for participants.

While such an arrangement is undoubtedly complex to administer, professional service firms with fewer than two-thousand employees need not be discouraged. It is possible to introduce helpful, clinically-minded programs to your benefits plan without straining resources.

- The first step is to assess claims data from your health plan to determine which chronic conditions are driving your claims. High-cost conditions typically include diabetes, heart disease, or musculoskeletal issues.
- Next, identify specialized solutions with proven outcomes aimed at those conditions. Your health plan might even have preferred vendors that can be implemented quickly and easily.
- Finally, ensure the solutions are presented in a way that participants can understand and easily access. For example, if you have different benefits with different vendors plus some independent programs, implementing a digital or wrap-around navigation solution can help participants see your benefit program holistically and take full advantage of your firm’s investment.

After launching your custom program, it is important to continually measure its impact on cost, utilization, outcomes and overall participant satisfaction. Having clear goals for individual vendors and overall shared goals across your vendor ecosystem creates accountability for everyone — and ensures you’re getting the results you need.

Ultimately, your benefits program should be based on your data and a comprehensive strategy focused on objectives and goals. The design, construction and ongoing maintenance of your ecosystem must support your broader commercial objectives, not the other way around.

If you’d like to discuss any of the issues raised in this article, please contact **Mark Scarafone**.