

# Administrator

Important news and updates from your benefits professionals

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## Trends In Today's World

### More than a Pretty Face

Artificial intelligence is now conducting "face age" tests to help determine a person's biological age. While physicians have long used medical tests and perceptions to assess a patient's ability to withstand a procedure or aggressive treatment, radiation oncologists say our faces often reflect the wear and tear of living. Even though trials are ongoing, face age test models currently enable us to upload a selfie and obtain an estimate of our biological age.

### Everyone Loves Meat Sticks

Estimates show that some 41 million households buy meat sticks every year. While some choose traditional brands for their flavor, others look closer at the amount of sodium and other additives. Serious afficianados buy their meat at butcher shops, then attach a small meat grinder to their mixer and make their own meat sticks. Whether store-bought or homemade, consumer analytics firm Circana confirms that meat sticks are America's fastest growing snack category.

### No End to the Spend

According to the Centers for Medicare and Medicaid, national healthcare

## Helping Employees Navigate a Complicated Maze

### 90 Degree Benefits CareConnect

From unbiased physician recommendations to information on cost and quality, 90 Degree Benefits CareConnect gives your members an unmatched level of customer service, insight and care coordination.

#### Care Navigation

As a care concierge program, CareConnect provides members with a dedicated Care Coordinator and one phone number to call. Rather than being left on their own, a Care Coordinator explains benefits, answers questions and researches procedures when needed.

#### Provider Contracting

To ensure easier access to high-quality healthcare providers, 90 Degree Benefits partners with centers of excellence, specialty care centers and practitioner and direct primary care networks. Cost-plus, fixed rate and Medicare derivative-based contracts help members and employer sponsored health plans avoid overpaying for care.

#### Legal Support/Indemnification

In the event your member needs legal representation for a balance bill, 90 Degree Benefits provides easy access to legal services and a consumer protection specialist. In addition, our Stop Loss partnerships protect your plan from having to pay excessive claims.

#### Patient Advocacy

With CareConnect, member support continues after care is received. Care Coordinators work proactively to help members understand their charges and monitor

potential balance bills. Should a balance bill occur, the Care Coordinator will work to defend the plan and resolve any disputes.

#### Pre-Pay Services

Seamlessly integrated with any 90 Degree Benefits health plan, CareConnect ensures that benefits administration and customer service are handled all in one place. This synergy helps everyone save on virtually all healthcare services, from Inpatient and Outpatient Surgery to Diagnostic Testing, Rehabilitation Therapy and more.

### CareConnect Negotiates the Unnegotiable

#### The Challenge

When a patient experienced a medical emergency requiring heart surgery, charges at a hospital known for refusing to negotiate totaled \$813,330. By establishing direct lines of communication with key stakeholders, CareConnect secured an agreement at 150% of Medicare rates, helping the plan sponsor and its members avoid excessive costs.

Total Charges ..... \$813,330

Negotiated Rate ..... \$90,915

Total Savings ..... \$722,718

**Navigating complex healthcare challenges?  
Let CareConnect advocate for you.**



# Eliminating Prior Authorization

A Republican in the House of Representatives has resurrected a bill that would end utilization and medical necessity review programs that most self-funded and fully insured health plans require. While provider groups and the AMA have been increasingly critical of these programs, health plan sponsors and administrators maintain that prior authorization protects patients from unnecessary or overly expensive medical treatment.

Even though few expect the Doctor Knows Best Act of 2025 to reach the floor of the House, nearly a dozen states have acted to simplify the requirements in order to improve transparency and minimize delays in treatment or issuance of needed prescriptions often caused by these programs. These state-based actions have been actively supported by the American Medical Association, which has vowed to continue challenging the requirements of prior authorization programs.

## How Is Obesity Impacting Health Plan Costs?

A report from United Healthcare and the Health Action Council states that 75% of adults in the U.S. are either overweight or obese, up from 50% in 1990. The greatest increase was among younger adults. How does this relate to medical spend?

- More than 200 participating employers who self-fund health benefits report that 26% of their plan members are diagnosed as obese.
- The obese group accounts for 46% of the employers' annual medical spend.
- Per member healthcare costs for obese employees averaged \$971 per month, more than twice the \$421 spent for non-obese members.

While conditions attributing to the added medical spend for obese individuals varied, the rate of diabetes was 2.5 times higher for obese adults in their 50's. Workers in their 40's reflected a hypertension rate 3 times higher than co-workers who were not obese and cholesterol rates 2.5 times greater.

Obesity is also linked to other conditions including cancers, heart disease and a far greater frequency of hip and knee replacements. Behavioral health concerns such as anxiety, substance abuse and depression within obese populations were also more prominent. While debate about coverage of GLP-1 medications intensifies, the data certainly supports those pushing to extend coverage beyond those with certain health conditions.

## Telemedicine Exception for HDHPs & HSAs

A Covid-19 relief measure enabling employers with High Deductible Health Plans (HDHPs) to provide benefits for telehealth before deductibles were met was finally extended for 6 months as part of the Continuing Resolution just passed by the House.

Had the measure not been included in the resolution, HDHPs that have not imposed a deductible on telehealth services would have needed to do so in order to preserve eligibility for HSA contributions made in 2025.

## Good News for Connecticut Employers

Thanks to those who rose up in support of self-funding, Senate Bill SB10 was passed with an amendment to strike section 10. By striking section 10, language detrimental to the use of stop loss insurance to limit an employer's liability, was removed.

Opposition had been voiced by insurance brokers and administrators throughout the State, warning elected officials that if passed, employers and covered employees would face cost increases of 20% or more.

## Trends continued

spending rose by 7.5% in 2023 to \$4.8 trillion or nearly \$15,000 per person. This increase was significantly higher than the 4.6% rise recorded in 2022. Data from the Labor Department also shows that employee's share of health insurance premiums and deductibles have also increased, following a trend that has plagued workers for more than a decade. Averaging \$26, in-network physician visit co-pays seem to be the only cost that has remained constant over the years.

### Rings Outsmart Watches

A smart ring manufactured by Oura of Finland is tracking health-related data in ways that many believe outrival more popular smart watches.

Sources say that in addition to being easier to wear consistently, rings gather data from an artery while watches capture data from veins. Users say this enables the ring to deliver data that is hard to gather from a smart watch, especially that related to heart health.

### No More Pink Slips

Even though face to face meetings often minimize the chance of future litigation, some employers, including the Federal government, are delivering termination news via social media, teleconferences or text messaging. While some see this trend as a natural result given the growth of remote work, HR consultants and

employment attorneys recommend sticking with a more personal face to face delivery.

### Young Women & Cancer

The American Cancer Society reports that cancer rates for women in the U.S. have risen during the past 5 decades, especially those under the age of 65. While breast cancer rates have continued to increase by about 1% annually during the past decade, the incidence of lung cancer among women outpaced men for the first time since 2021. ACS scientists say this is likely due to women giving up the smoking habit later than men, even though they often also start smoking later in life.

## More Offer Fertility Benefits



A recent survey by the International Foundation of Employee Benefit Plans (IFEBP) showed that 42% of U.S. employer sponsored health plans offered fertility-related coverage in 2024. This is up from just 30% in 2020. IFEBP representatives say the push may be tied to a growing need for employers to attract and retain talent and support overall employee well-being.

Within the large increase in overall fertility benefits, fertility medications, invitro fertilization and non-IVF treatments showed bigger gains than genetic testing and egg harvesting or freezing services.

Interestingly, a recent Mercer report showed that 35% of employers offer men's fertility testing while 20% cover sperm freezing and 13% are considering offering men's sexual health benefits. Overall, there is no doubt that helping employees address infertility and family planning needs has become increasingly important to employers.

## Weighing GLP-1 Coverage



As GLP-1 medications become more widespread, more employers are forced to wrestle with the opportunities and challenges they present. While these medications can have a rapid and dramatic impact on employee well-being, sustaining weight loss over the long term comes at tremendous expense.

While some large employers are limiting GLP-1 coverage to employees with certain health conditions, other more health-conscious companies are viewing GLP-1 coverage as one more important part of their ongoing commitment to promote good health by providing high-quality health benefits.



## Prioritizing Primary Care

At a time when healthcare is getting not only difficult to afford but harder to find, focusing on access to primary care makes dollars and sense. As a first point of contact in a complex system, primary care can keep people healthy and help health plans avoid high-dollar claims.

### Access Must Be Improved

Studies of physician appointment wait times recently showed that in many large U.S. metropolitan areas, getting an appointment can often take a full month or more. To attack this problem, some large employers are turning to onsite or shared wellness centers to help employees establish a relationship with a primary care physician.

### Making Care More Affordable

90 Degree Benefits offers a variety of options to help workers and their families obtain the care they need. One innovative option is **Access2day Health**, a proven clinic membership model providing employees and covered dependents with easy, convenient access to high quality primary and urgent care services with no co-pays, no out-of-pocket expenses, short wait times and no appointments needed. To learn more, visit [www.access2dayhealth.com](http://www.access2dayhealth.com).

## The Latest on RTO Mandates

Just because the Trump administration and some states are pushing hard for increased in-office presence doesn't mean everyone is pleased with the trend. In fact, the MyPerfectResume organization found that only 2% of workers prefer full-time on-site work and more than a third say nothing could convince them to return to the office. Other research shows that in the past two years, a vast majority of survey participants have witnessed negative consequences for resisters, including strict formal demands and firing.

Cautioning that mandates can put a major strain on employee relations, many HR leaders say a more employee-focused approach will maintain more positive morale and promote work-life balance. Failing to seek input from workers will lower morale, making it more difficult to retain valued employees and hire needed talent.



# Did You Know? New Ideas for Healthy Consumers

## FSA's and Oral Health

A new house bill could let FSA and HSA account holders use these accounts to cover the cost of oral health products, including toothpaste and various types of toothbrushes. While a similar bill had bipartisan support when proposed in 2024, it never made it out of committee. In an interesting sidebar on dental health, research released by the International Stroke Conference recently showed that flossing one or more times per week can reduce the risk of stroke by anywhere from 22% to 44%, especially among adults age 55 and older.

## Alcohol and Cancer

Doctors say that too many people are unaware that alcohol increases the risk of certain types of cancer including liver, colorectal and breast cancer. A 2021 study by the Preventive Medicine journal showed that some 70% of people in the U.S. have no idea of the connection between alcohol use and cancer. Breast cancer oncologists generally emphasize that minimizing alcohol consumption will lower the risk of breast cancer in women. While science is split on the issue, many recommend that women limit their consumption to two drinks per week.

Some studies show that alcohol directly contributes to approximately 100,000 cancer cases per year in the U.S. and some 20,000 deaths. While the jury is still out, the connection between alcohol and cancer has attracted so much attention that the U.S. Surgeon General has asked that warning labels be required on alcoholic beverages.

## Attacking Runaway Large Claims

One factor contributing to rising benefit costs is the increasing frequency of big claims by individual members. With cancer, diabetes and other chronic conditions often at the root of the problem, employers and advisors need to rethink their approach.

**Being Proactive** - When a chronic condition isn't apparent, preventive screenings and other technologies can help identify serious risks early on. With preventive care or an early treatment plan, cost drivers like unnecessary tests, drug interventions and costly hospital stays can sometimes be avoided. While new treatments and technologies can improve outcomes, they often come at great cost. Gene therapies, currently being used to treat cancer and other genetic diseases, are one example. To lower the cost of these therapies, some health plans use carve-outs with discounted network contracts or payment structures tied to outcome quality. In some instances,

separate stop loss policies are secured specifically for these expensive therapies.

**Manage Care & Data** - Today, data has the power to help members connect with providers highly qualified to address their unique needs. Patient steering and high-performance provider networks can also direct patients to providers and facilities known for achieving lower costs, higher quality outcomes and fewer costly readmissions.

While new technology, including AI, will continue to impact our healthcare system, traditional programs like disease management, condition management and utilization management can help monitor how medical services are utilized, promote medication adherence and encourage healthier lifestyles. In the fight against large claims, no cost management stone can be left unturned.

**Note:** This newsletter is not intended as a substitute for personal medical or employee benefits advice. Please consult your physician before making decisions that may impact your personal health. Talk to your benefits administrator before implementing strategies that may impact your organization's employee benefit objectives.



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Let's Talk