

supplement

## employee benefits

December 2015

# health & wellbeing





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# Editor's comment



Debbie Lovewell-Tuck | Editor  
Employee Benefits

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**November saw several events** that brought employers' healthcare and wellbeing strategies firmly back to the top of many corporate agendas.

National Stress Awareness Day on 4 November highlighted the ongoing issue facing many organisations of how best to support staff suffering from stress and other mental health issues.

This can be such a sensitive subject that it is perhaps no surprise that some employers prefer to shy away from addressing such issues in the workplace, perhaps for fear of saying or doing the wrong thing and potentially offending employees. Yet, employers can be ideally placed to provide the help and support that afflicted employees may need. And doing so can have significant business benefits in terms of enhanced staff loyalty and productivity. Read more about how employers can stay engaged with mental health issues in *Stepping up on mental health* on page six.

On 1 November, meanwhile, National Stress Awareness Day was preceded by the rise in insurance premium tax (IPT) from 6% to 9.5%. This has had significant implications for benefits such as private medical insurance (PMI), dental insurance and health cash plans, which have all seen price increases as a result.

This has posed a number of issues for providers in how to deal with the increase in cost, particularly where schemes are currently midway through their contract.

While some providers have initially absorbed this cost on behalf of employer clients, others have already passed the increase on to existing schemes. Understanding how this impacts their healthcare schemes, therefore, is vital for employers. Find out more in *Gauging the pressure on premiums* on page 13.

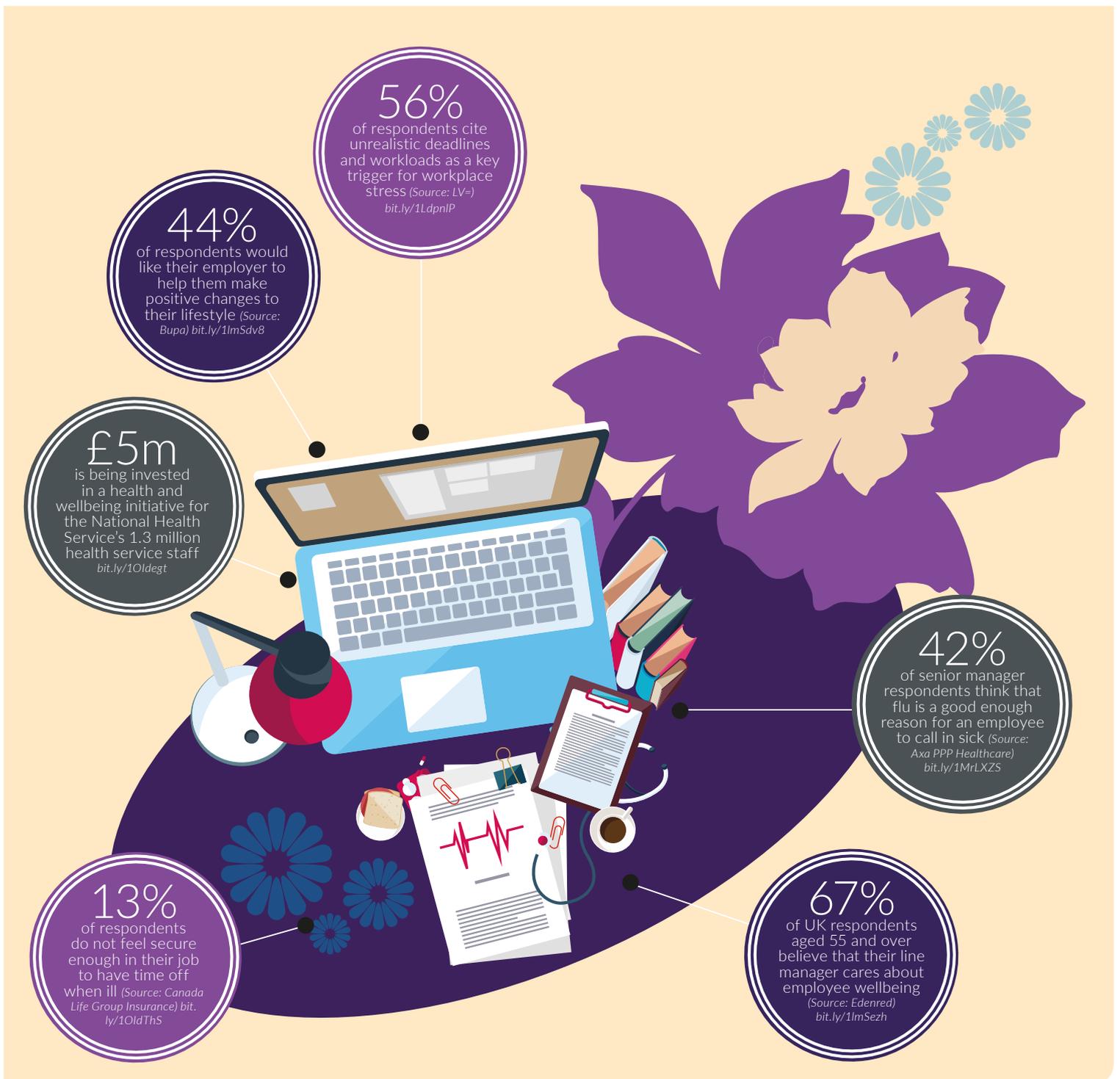
Healthcare trusts are just one option for organisations looking for alternative ways of funding medical cover. *Medical cover is a matter of trust* on page 11 explains more.

One of the buzzwords we have heard in relation to all areas of benefits over the past few years is data. In the health and wellbeing arena, data is being used to enable employers to target their benefits offering to meet the needs of their workforce. Absence management data is particularly relevant in this respect. Read more about how data sourced from absence management systems can be used to drive a health and wellbeing strategy in *Tap into a mine of information* on page 19.

Keeping up to date with the latest trends in health and wellbeing might seem like a never-ending task, but it's one that will ultimately pay dividends.

# Health and wellbeing in numbers

**Louise Fordham rounds up some of the stand-out facts and figures in workplace health and wellbeing**





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# Stepping up on mental health

## Cross-level support mechanisms are needed to address mental wellbeing in the workplace



Louise Fordham | Deputy editor  
Employee Benefits



### Need to know

- Managers have an important role to play in addressing mental health in the workplace, but this cannot be the only line of support.
- Making a visible commitment to mental wellbeing can help tackle the stigma surrounding mental ill health.
- Best-practice sharing, collaboration, and drawing on employee feedback can help employers develop an effective mental wellbeing strategy.



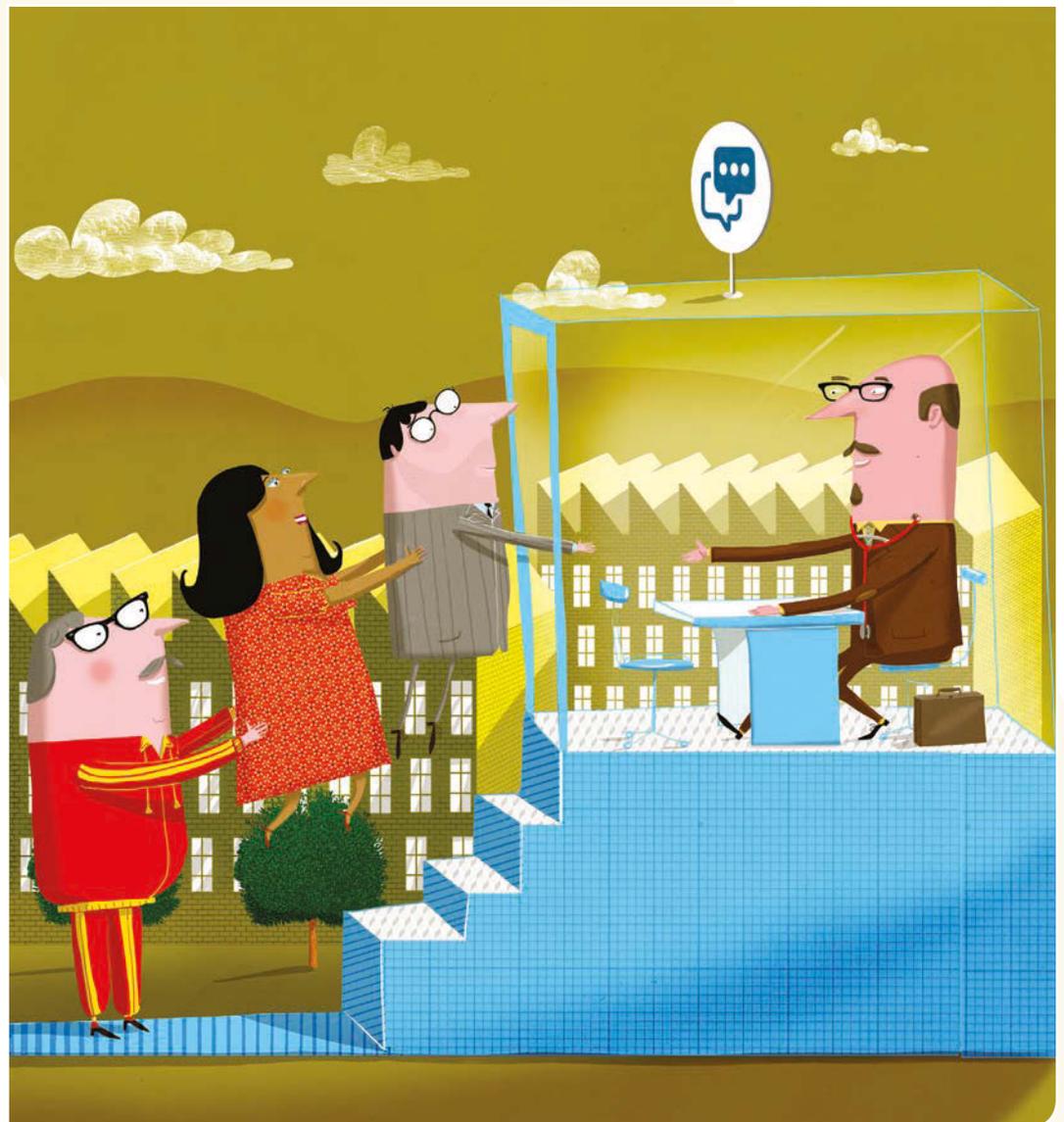
### Read also

How can group risk benefits support staff wellbeing?  
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**Mental health continues to** be a top-priority issue in the workplace, and employers are recognising the commitment they need to make to tackle it. Two-fifths (41%) of respondents to the Chartered Institute of Personnel and Development's (CIPD) *Absence management survey 2015*, published in partnership with Simplyhealth in October 2015, report an increase in stress-related absences over the last year. It is difficult to gauge whether this rise can be attributed to employees feeling more able to speak out about stress-related issues, which can be seen as a positive sign, whether it is down to a higher level of incidences of such issues, or, most likely, whether it is a combination of the two.

Yet, with just 39% of employees willing to disclose stress, anxiety or depression as the cause of their absence from work, according to research published by Axa PPP Healthcare in September 2015, there is still a long road ahead when it comes to addressing mental health in the workplace.

Encouragingly, the CIPD survey found that the number of employers providing training to managers to help them support staff coping with mental health issues increased from 23% in 2014 to 30% in 2015. In addition to managing workloads and day-to-day pressures within their teams, line managers are also well positioned to spot early signs of stress and other mental ill health issues, whether work-related or otherwise. Of course, this is not an easy task, particularly as the manner in which issues manifest themselves can vary between individuals and situations. Training programmes such as mental health first aid courses can equip managers with the skills, knowledge and language to help them more effectively approach mental



## Viewpoint



**Brian Dow is director of external affairs at Rethink Mental Illness**

Because mental illness affects people in very different ways, there is no one size fits all when supporting people at work.

As an employer myself overseeing a large team, there are a number of things I have done that anyone could do, which don't cost anything. It could be something as simple as seating someone with anxiety, for example, in a quieter part of the office. Or it could be a little more flexibility about someone coming in later to avoid rush hour, and then working later.

At Rethink Mental Illness we also have a wellbeing plan that all employees have the chance to fill in, where they can outline ways to keep themselves well, highlight any triggers that may

cause their mental health to deteriorate, and suggestions of what to do if they do become unwell. These are then shared with line managers, who can then make changes as necessary. It's a simple thing that could easily be included in any induction pack, and if it's made standard process, it can make it easier to start a conversation.

Training can also be really useful, and Rethink Metal Illness runs courses in things such as addressing negative attitudes to mental health, overcoming barriers to communication, and finding ways to manage difficult conversations. These courses aim to boost employers' confidence when it comes to mental health, because often people mean well, but just aren't equipped to deal with issues in the best way.

It's about reasonable adjustments, but also about creating an environment where people can talk about mental health without fear of being judged.



**"YOU CAN'T MANAGE WHAT YOU CAN'T TALK ABOUT, SO CREATING A CULTURE OF OPENNESS IS THE STARTING POINT"**

Louise Aston, BITC

These measures can also begin to tackle the stigma and myths that often surround mental ill health. Louise Aston, wellbeing campaign director at BITC, notes: "You can't manage what you can't talk about, so creating a culture of openness is the starting point."

Visibly establishing mental wellbeing as a core tenet for an organisation and an integral part of its approach to workplace wellbeing can also serve to break down this stigma. >>>

health issues with their reports and direct them to appropriate support services.

However, line managers will not only require support for their own mental health, but also for the support that they are expected to provide to others. John Binns, former partner at Deloitte and now independent adviser on mental health and wellbeing in business, explains: "Line managers are in an almost impossible situation if [responsibility for mental health is seen as] all down to them but the messaging from the top is not supporting them." He adds that senior leadership on the issue can ensure it remains on an organisation's agenda.

### Creating an open culture

Boards need to deliver clear messages around how they support employee wellbeing with a particular focus on mental health issues. "It helps if there are mental health champions at a senior level of the business and also particular individuals who people can go to who they know that they can talk to," says Ben Willmott, head of public policy at the CIPD.

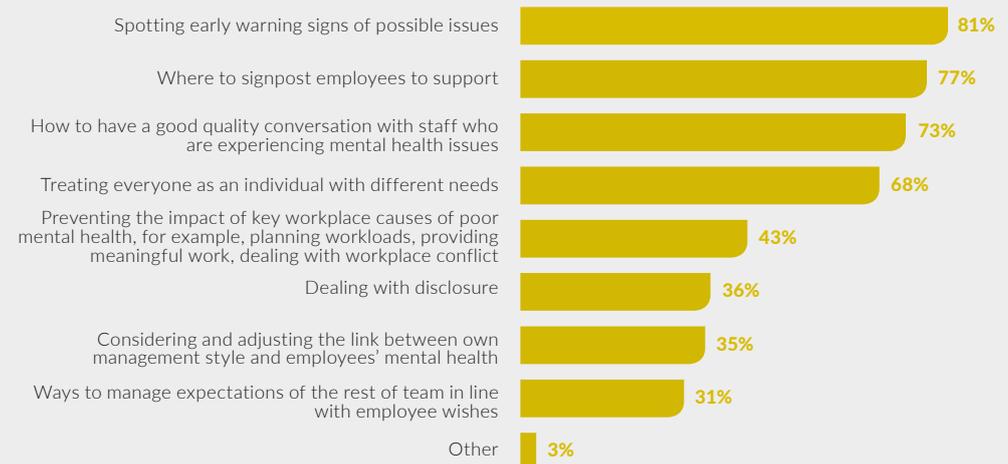
Making a public commitment to addressing mental health in the workplace, for example, by joining networks such as Business in the Community's (BITC) wellbeing at work campaign or the City Mental Health Alliance, or by signing up to the Time to Change pledge, can help to demonstrate to staff that mental health is a priority issue. Such networks and

collaborative relationships also give employers access to tools and educational resources, as well as an opportunity to share best practice and build on the strides that organisations have made.

## Statistics

### What does manager training related to mental health cover?

(Source: Chartered Institute of Personnel and Development's Absence management survey 2015, published in October 2015 in conjunction with Simplyhealth)





## Case study | Herbert Smith Freehills

### Herbert Smith Freehills supports mental wellbeing through mentor network

In May 2015, Herbert Smith Freehills launched a mental health mentor programme to support the 2,000 employees at its London office and the 250 members of staff based at its Belfast location. The law firm runs mentoring schemes in other areas of the business, and wanted to draw on this system to normalise conversations around mental health. David Shields, head of diversity and inclusion at Herbert Smith Freehills, explains: "Mentoring is quite relational and we thought bringing that relational aspect into it was a positive for mental health."

The programme has a network of more than 60 volunteers who occupy a range of roles in the firm. All of the mentors have taken part in a training course developed in partnership with consultant psychoanalyst Mary Bradbury.

"Part of the role of the mentors is to refer people on to the support services that we have in place; for example, they know which GPs have a specialism in mental health and they know how people would access the employee assistance programme," says Shields.

The firm announced the launch of the programme via its intranet site, as well as health and wellbeing booklet desk drops.



Of course, there is also a business case for supporting employee wellbeing, which can impact upon absence levels, presenteeism and the associated costs.

Employers can work with charities, specialists and providers to

develop a comprehensive mental wellbeing strategy suited to their organisation. "The best way [to progress with a strategy] is to ask employees so that whatever is built is relevant and is going to work," says Corinne Williams, head of human resources at Simplyhealth.

#### Critical channels

Preventative measures are becoming an increasingly valuable part of approaches to employee wellbeing, with both digital tools and onsite schemes allowing staff to focus on relaxation, mindfulness and resilience techniques, which could be complemented

by programmes and activities that foster a positive work-life balance.

Access to services that provide early intervention and recovery assistance to those experiencing mental ill health is an integral element of the support system employers can offer their staff. This might include employee assistance programmes (EAPs), support networks, confidential helplines, cognitive behavioural therapy, and occupational health services, among others. Responsive and flexible working policies can further facilitate support.

"Having a range of channels through which [staff] can get help is critical because not everybody sees the issue in the same way and not everybody wants to disclose in the same way," says Binns.

Building on calendar events such as World Mental Health Day offers opportunities to raise awareness of mental health issues and the support available. While such events shine a spotlight on the issue, they should form part of a wider approach. Bupa's Watt says: "This can't just be a 2015 or 2016 campaign; this has to be something that is embedded within the culture of an organisation to show that it is okay to talk about mental health." 

"THIS CAN'T JUST BE A 2015 CAMPAIGN; IT HAS TO BE EMBEDDED WITHIN THE CULTURE"

Patrick Watt,  
Bupa UK

Poppy Jaman, chief executive officer at Mental Health First Aid (MHFA) England, says: "I think the way we've got to go is to give mental health the same parity as physical health. So organisations that are building mental health explicitly into their general health and wellbeing strategies are doing a really good job because it means that they are mainstreaming it and they are normalising it."

Patrick Watt, corporate director at Bupa UK, adds: "I think the key is not seeing [support for mental health] as an HR initiative but actually seeing it as part of being a successful business."



# The importance of mental wellbeing in the workplace

## Providing the training and tools to support mental health can enhance staff wellbeing, motivation and engagement



Kirsty Jagielko | Head of marketing  
Cigna UK Healthcare Benefits

### Supporting employee mental health

is a growing challenge for many employers. Around 70 million working days were lost to mental illness in 2013 at a cost of £70-£100bn to the UK economy, according to the *Annual report of the chief medical officer*, published in September 2014. Issues like anxiety, depression and stress are leading to lost work days, high staff turnover and lower productivity. Many employers believe they do not have the skills or knowledge to identify when an employee is suffering from mental health issues.

A survey for anti-stigma campaign Time to Change, conducted in July-August 2009, found that 56% of organisations would not employ an individual who had depression even if they were the most suitable candidate. The same percentage also said they would like to do more to improve staff wellbeing but do not feel they have the right training or guidance, according to research by Mind. Although many employers understand the benefits of a healthy workforce, it is clear that more needs to be done to create awareness of mental health and promote a healthy business culture.

There is a range of mental health conditions that will affect many people at some time in their lives: the most common are anxiety, mood and stress disorders. Individuals with anxiety disorders react to certain situations with fear or dread, as well as physical signs of anxiety or panic such as rapid heartbeat or sweating. Common

“THERE IS A RANGE OF MENTAL HEALTH CONDITIONS THAT WILL AFFECT MANY PEOPLE AT SOME TIME IN THEIR LIVES”

mood disorders include bipolar and depression. Depression involves persistent feelings of sadness and bipolar is a combination of mania and depression, alternating in cycles. Common stress disorders involve distortion of awareness and thinking.

### Options for support

Thankfully, there are a number of options that can help support employees. Cognitive behavioural therapy (CBT) is a talking therapy that helps people manage their problems by changing the way they think and behave. CBT is most effective for conditions where anxiety or depression is the main problem. Cigna recently introduced a Healthy Mind pathway that allows members to bypass their GP and refer themselves directly to a cognitive behavioural therapist. Many employers now recognise the benefits of online self-help tools that are based on CBT techniques. These tools are suitable for those with mild to moderate stress, anxiety and depression. Other resources can include employee assistance programmes or helplines.

The UK is still in the aftermath of an economic recession and

with employees working longer hours than ever before, according to the *Labour market statistics*, published by the Office for National Statistics in October 2015, mental health issues among the workforce are prevalent. In the last five years, more than 13 million people within the UK have taken time off due to workplace stress.

### Driving force

Happy and healthy employees are the driving force behind every successful business. But if employers don't provide their staff with the right training, support and tools, absenteeism is likely to become a growing concern.

Although there is a range of solutions and therapies available, early intervention is best. Managers need appropriate training so they can spot the possible signs of mental illness. Some symptoms can include confused thinking or extreme worry. Not only should managers have an awareness of symptoms, they should also be able to empathise with their staff and refer them to available tools and resources.

Creating a culture of health is vital to an organisation's success. Employees who feel that the employer they work for cares about their overall health and wellbeing are more likely to be motivated, engaged and are less likely to leave. Educating employees to ensure they are comfortable accessing self-help tools or calling helplines is also vital.

There is still a stigma attached to mental illnesses and we need to tackle current attitudes. Mental illnesses can be addressed with the right treatment, support and education. Healthier people drive healthier businesses. Supporting and engaging employees with their mental and wider health is essential ■



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# Mitigating costs for the long term

## Healthcare trusts could help employers address the future challenges of corporate healthcare



Bruce Eaton | Managing director  
Healix Health Services

For over a decade employers have seen a steady increase in spend on healthcare with medical inflation varying between 6% to 12%, compounded. For many, this is an accepted cost to retaining a benefit. For others, the sustainability of funding such increases is being questioned.

Private medical insurance (PMI) has, in the main, innovated for market share and retention. Employers may not always have the option to redesign cover to suit their individual corporate needs, and the market has not always provided consultants with the tools to make a difference.

A lot of faith has been invested in bolt-on services, wearable technology,

“AGEING  
WORKFORCES  
AND MEDICAL  
ADVANCES  
ARE LIKELY  
TO LEAD  
TO MORE  
EXPENSIVE  
CLAIMS”

pathway development and so on, but with ageing workforces and advances in medical science likely to lead to more expensive claims in the future, the issue of high cost claims incidence needs to be addressed now.

Employers may subscribe to a ‘vanilla’ product and pricing based on the here and now and not the future. The absence of a high cost claim in the last two to three years, a malignancy for example, does not preclude occurrence. If anything, the odds may likely be stacked against the employer.

Over the same two- to three-year period, valued employees have also aged two to three years and in the last ten years, have become a decade older. No surprises! In short, just because a plan has not been subjected to a high cost claim does not mean it is not going to happen. All the while, the benefit design has not materially changed, if anything wordings may have become less clear and, in some instances, employers could be subscribing to over-inflated benefits.

In an attempt to lead the charge on market share, some plans may be designed without consideration for future demographic change. At best, wordings could be said to be woolly and with the clear rules of treating customers fairly (TCF), insurers may be left with little choice but to continue to pay, pay, pay. After all, the premium set is linked to claims performance so it is no wonder that medical inflation is running way above the average hospital inflation.

High cost benefit wordings for conditions such as cancer could have little relevance to an ‘acute condition/return to work quickly plan’ that employers subscribed to years ago.

### Moving towards sustainable spend

With the growing trend for employers to review spend, integrate benefits and subscribe to commercial requirements, the opportunity to review benefit design at its core, save for a rainy day, and gain confidence that they are moving towards sustainable spend is increasingly relevant.

Healthcare trusts are one way that employers could rip up the current rule book, start with a clean sheet and build a health benefit programme to suit their corporate needs by reviewing risk and cost tolerances and designing benefits to match this, and introducing clearly defined tiered benefit structures if their business model requires it. They can work with a third-party administrator (TPA) to agree clearly defined treatment pathways to meet absence targets and budget, and bespoke high-usage benefits to reduce diagnosis and treatment times and review rehab to ensure speedy return to work. Employers can also consider the long-term impact of cancer on their business in terms of ‘exposure’, absence and budget. They can then work with the TPA to define screening, diagnosis, treatment pathways and locations and end of life care to suit budget ■



# Medical cover is a matter of trust

## Healthcare trusts offer employers the control to design a bespoke schedule of benefits



Vicki Arnstein |  
Freelance journalist

### Private medical insurance (PMI)

is a premium product and recognised as such, but healthcare trusts can deliver access to the same care alongside some other potential benefits.

Under a healthcare trust, employers can provide a bespoke medical scheme, which, to all intents and purposes, operates like PMI. While employees experience the same type of service and access to the same or similar healthcare, the benefits schedule is defined by the employer rather than the insurer. This can sometimes leave the employer financially better off and with a scheme tailored to its needs.

### Rise in popularity

LaingBuisson's *Health cover UK market report 2014*, published in July 2014, suggests the popularity of healthcare trusts is growing. It found a rise of 37,000 policies on self-insured medical expenses schemes, which includes trusts, and a decline in employer-paid insurance policies of 21,000.

This is set to heighten with November's insurance premium tax (IPT) increase from 6% to 9.5% because, as a non-insured product, healthcare trusts do not attract IPT says Rachel Riley, managing director at WPA Protocol. Stop-loss insurance, however, which can be used to protect trusts against large claims, does attract IPT.

Michael O'Roarke, director of First Health Trusts, says: "I think a lot of businesses are slightly cautious of trusts, although as IPT increases they might become more attractive."

Besides administration and concern over large claims, another barrier can be concern around how employees will perceive a trust. Simon Chapman, operations manager at General and Medical incorporating

### "EMPLOYERS CAN BE QUITE CREATIVE WITH WHAT IS IN THE BENEFITS SCHEDULE"

Richard Saunders,  
Healix

ProAmica, says: "From an employee's point of view there is very little difference [to PMI]. Whether it is an insured benefit or not, the end result is the same: they will get access to treatment."

### Benefits integration

A trust can be used to make healthcare benefits more integrated. Richard Saunders, sales director at Healix, says: "Usually everything is tailored to the [employer], so the booklet would be branded and the telephone line would be answered with the [employer's] name."



### Need to know

- Healthcare trusts can provide an alternative to private medical insurance (PMI) where the employer is in control of the benefits schedule.
- A trust can be part of an overall health and wellbeing strategy, encompassing benefits such as employee assistance programmes (EAPs) and health screening.
- Healthcare trusts may become more attractive with the increase in insurance premium tax from 6% to 9.5%.



### Read also

How to track the impact  
of healthcare benefits  
[bit.ly/1HWBI2Y](http://bit.ly/1HWBI2Y)

WPA's Riley adds that because a trust can be branded, it can boost engagement among employees.

Employee assistance programmes (EAP) and health screening can also be brought within the trust as part of a health and wellbeing strategy. "[Employers] can be quite creative with what is in the benefits schedule," says Saunders. "With a healthcare trust [employers] can bespoke the provision; that could be putting chronic cover in the benefits schedule, it could be that [it] navigates certain claims into other provisions [such as] the EAP, so the trust

is the hub of where benefits come from," he adds.

Under a trust, employers can also cover dependants and spouses. They can also have different levels of benefit provision set out for various levels of employee.

Employers implementing a healthcare trust could ask their benefits broker to include a trust provider in its annual review, for example.

With these developments in mind, the role of healthcare trusts in wellbeing strategies could soon become more prominent 



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# Gauging the pressure on premiums

## Assessing the knock-on effects from the recent hike in insurance premium tax



Nic Paton |  
Freelance journalist



### Need to know

- Insurance premium tax (IPT) increased from 6% to 9.5% from 1 November 2015, although there is a transitional period until the end of February 2016.
- This will affect private medical insurance (PMI) premiums but there will also be a knock-on effect on NI contributions and benefit-in-kind tax.
- There are ways to mitigate this increase, including reviewing the existing policy and moving to non-IPT levied products.



### Read also

Is the fit for work service working for employers?  
[bit.ly/1kEsoXn](http://bit.ly/1kEsoXn)

In his **Summer Budget**, chancellor George Osborne ushered in a 9.5% rate of insurance premium tax (IPT), effective from 1 November 2015, with these words: "With these measures, I am putting in place an approach for taxing banks and insurers over this parliament which is sustainable, stable and fair."

Whatever the political merits of this increase, one thing becoming clear for employee benefits professionals is that by hiking IPT from 6% to 9.5%, Osborne has created a health insurance and benefits environment that could be said to be anything but "stable". As Nick Jeal, head of corporate marketing at Axa PPP healthcare, points out: "This IPT rise is not just about [private] medical insurance premiums. The government was more thinking about it in the context of big-ticket insurance items such as car or home insurance. IPT of 6% was lower than others within the EU so, in a sense, medical insurance has just been caught up in a bigger piece."

"However, given that in Germany, for example, the tax rate is 19%, it is worth being aware this may not be the last rise in IPT," he adds.

### Cost mitigation

So, what are the effects going to be, and what can employee benefits professionals do to mitigate any extra costs that result from these?

The bottom line, that IPT went up from 1 November, is straightforward enough. It will not only impact private medical insurance (PMI) premiums, but health cash plans and dental insurance will also be affected. However, with the government also putting in place a transitional period until 29 February 2016, how and when



"AT THE MOMENT IT IS A BIT OF A MIXED MARKET OUT THERE IN TERMS OF WHO IS DOING WHAT"

Nick Clayton,  
Towers Watson

insurers are pricing in this change appears to be anything but consistent.

In the main, most providers are increasing premiums on new business or upon a policy renewal from 1 November. With some, however, the IPT increase on changes or premiums invoiced after 1 November is being absorbed and written off until 1 March and then implemented. Others are holding the 6% rate until next renewal date and some are absorbing it for even longer, says Carol Porter, commercial manager for The Health Insurance Group. "I know of one health cash plan provider that has said it is going to absorb the increase until the end of 2016," she adds.

"It is not ideal and quite a confusing picture," says Nick Clayton, consultant at Towers Watson. "At the moment it is a bit of a mixed market out there in terms of who is doing what when."

The key is to be proactive, says Porter. Employers can talk to their insurer or an intermediary that may be able to help them through the maze. An intermediary will be able to look at cost-containment items that perhaps employers have not thought of.

It is worth being aware that this change will not affect things such as health screening, life insurance, employee assistance programmes (EAPs), group income protection (GIP) or critical illness ►►

 Viewpoint



**Stuart Scullion** is chairman of the Association of Medical Insurers and Intermediaries (AMII)

The Budget's 'unrealistic and unacceptable' increase in insurance premium tax (IPT) could represent the final straw for some employers that may now cancel their cover.

While I think many of us expected there to be an increase in the Budget, the size and scale of the increase is both surprising and disappointing, and it appears to have been announced without due consideration of the wider impact. The chancellor and his department have shown a distinct lack of consideration about the wider impact of the 'ill-conceived' decision.

At a time when the National Health Service (NHS) and NHS budgets are under extreme pressure, the increase in IPT, which is estimated will raise £177m in tax revenue, will prove to be an expensive folly. The net impact will be to drive patients to an already stretched NHS, adding further pressure both in terms of resource and cost. Cost is one of the single biggest considerations for employers and consumers as to whether they continue with their private medical insurance (PMI) cover.

[Employer] purchasers of PMI should consult with an independent intermediary that will be able to advise them of the steps they may take to mitigate the impact of the IPT increase.

There are three steps buyers of PMI should immediately consider. The first is to consider introducing or increasing a policy excess. A £100 excess applied to all plan members would typically reduce premiums by between 8-10%. Discounts vary from provider to provider based on individual circumstances.

Second, employer schemes with more than 100 staff covered should consider a non-insured/self-funded option under a health care trust that does not attract IPT. And finally, consider a corporate deductible product that will offset part of the IPT increase.

 Statistics

How benefit-in-kind (BIK) tax and national insurance contributions (NIC) are affected, assuming a premium of £1,000

6%	
Net premium	£1,000
IPT	£60
Total gross premium due (BIK value)	£1,060
Class 1A NICs (13.8%)	£146.28
9.5%	
Net premium	£1,000
IPT	£95
Total gross premium due (BIK value)	£1,095
Class 1A NICs (13.8%)	£151.11



**"IT IS ABOUT DIGGING MORE DEEPLY INTO THE OPTIONS"**

Rachel Riley, WPA

adjust what they offer to products that do not attract IPT.

A more radical solution is for an employer to change the format of its PMI provision, such as moving to a healthcare trust or master trust, or a corporate deductible or corporate excess scheme.

Healthcare trusts are not insurance contracts and so will not be affected by the rise in IPT, other than on a small element of stop-loss insurance. This means they may become a more attractive option in the future, says Jeal. "But understanding and setting one up can be daunting," he adds. "The employer has to set up a separate legal entity with a board of trustees and so on. An alternative option, therefore, is a master trust, essentially a turnkey or umbrella trust offered by the provider."

**State of excess**

In a corporate excess scheme, a corporate excess is set up as a percentage of the notional claims fund and is held in trust by the provider, with the rest becoming a claims reserve. Claims payments are taken from the excess. If this is used in full, any further payments are taken from the reserve. The main advantage from the IPT perspective is that employers only pay IPT on the claims reserve, administration and insurance risk charges, not on the excess amount.

A corporate deductible scheme is similar. It allows an employer to take out (deduct) a large corporate excess, with IPT only paid on the remaining premium. Rachel Riley, commercial director of the global brands division of WPA, says: "There are going to be many more [employers] interested in these sorts of arrangements, so I think we will see more spending more time understanding how these schemes work. It is just about digging more deeply into the options," she adds 

insurance, because these do not attract IPT. However, where IPT is levied, employers pay national insurance (NI) on the benefit-in-kind (BIK) value of the premium, so there will be a knock-on effect in these two areas (see example in table). More widely, with medical inflation estimated by Mercer in its *Medical trends around the world* report, published in October 2015, to be running globally at around 10% this year, this IPT rise is just one health insurance headache facing employers.

**Benefits restructure**

So, what can employers do about it? "It might be things such as re-cutting or restricting the benefits slightly, or looking at the level of excess or at whether [the employer] really wants or needs a particular benefits structure. It is also about providers working with employers to help them to understand the wider tax implications of this rise," says Soraya Chamberlain, head of healthcare and wellbeing consulting at Punter Southall Health and Protection.

Another option is for employers to look at whether it makes sense to weight or



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# On trend for the duty of care

## Health cash plans are being embellished to encompass a wider range of specialist therapies



Alison Coleman |  
Freelance journalist

### Boosting employee engagement and

productivity, and reducing sickness absence are among the key objectives for employers.

Many will be looking to achieve these goals by introducing low-cost benefits that have a perceived high value, such as health cash plans. These are used by employees to cover 'everyday' healthcare benefits, such as dental and optical check-ups.

For employers, cash plans are helping in their duty of care towards the health and wellbeing of their staff, says Carol Porter, commercial manager of The Health Insurance Group. "They can provide access to counselling support lines to help deal with stress-related problems, and preventative benefits such as health screening and early diagnosis with inclusion of specialist consultations and diagnostics. Online health risk assessments can also be included," she adds.

### Range of alternatives

This year has seen the introduction of a wider range of specialist therapies to the sector. Andy Wilkins, chief executive officer at Plutus Health, says: "Health cash plan providers are offering more alternative treatments, including things [such as] hypnotherapy, Reiki and Indian head massage."

Another new addition to health cash plans this year is the so-called GP on the phone. "Employers recognise that their staff can struggle to arrange GP appointments," says Porter. "Some have introduced virtual GP surgeries with access to 24-hour tele-doctors via telephone or online, which saves employees taking time off work for a basic GP consultation."

However, Paul Roberts, strategic director at employee health and wellbeing broker IHC,



"CASH PLAN PROVIDERS OFFER THINGS SUCH AS REIKI AND INDIAN HEAD MASSAGE"

Andy Wilkins,  
Plutus Health

believes it is still early days for the virtual GP. "It is a useful addition, although we are not sure the public is ready for it," he says.

An additional trend sees some health cash plans now offering 24-hour private GP consultations and covering private GP fees. So, if members cannot get an appointment with their own GP, having access to a private GP becomes a hugely competitive benefit.

This has certainly been the year of the health app, and smartphone users now have thousands of them at their fingertips,



### Need to know

- Providers are expanding the cash plan offering to provide a broader range of treatments and services.
- Cash plan design is becoming more flexible to help employers better manage their health budgets.
- Health cash plans could offer a cost-effective alternative to private medical insurance, following the insurance premium tax increase.



### Read also

How to get board level buy-in for workplace initiatives  
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but in the fast-paced and highly competitive world of app development, insurance providers can get lost in the shuffle. "Competing at this level, cash plans need to focus on customer interaction and engagement, something we're not seeing yet," Roberts says.

Other apps are proving effective, for example, by improving the claims process for employees. Using an app, staff can upload a photo of their receipt and submit their claim online within minutes, with payments made straight into their bank a few days later. This is an accessible way of managing routine healthcare costs.

### Design developments

The sector is also seeing more flexibility in plan design. "This enables employers to tailor the benefits for their staff by choosing particular benefit modules and increasing or decreasing benefit limits according to their budgets," says Porter.

While health cash plan providers are not necessarily increasing their cover limits, the sentiment felt across the sector is that overall cash plan prices are too low. This is the reason behind the introduction of a more diverse range of therapies to balance this out, and will allow providers to remain competitive, says Wilkins.

The full impact of the increase in insurance premium tax (IPT) on 1 November from 6% to 9.5% remains to be seen, although the cost implications for cash plans will be less than those for private medical insurance (PMI) schemes because of the relatively low premiums involved. "This could potentially see a trend toward more employers introducing a cash plan for their current uninsured population rather than considering traditional PMI benefits with a higher price point," says Porter **EB**

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# Tap into a mine of information

**Effective interpretation of data is vital in elaborating a business-wide strategy on absence**



Sam Barrett |  
Freelance journalist



## Need to know

- Employers can look for patterns in their data, including higher levels of absence in a particular department or spikes in certain types of absence.
- They can investigate instances where an employee has higher absence rates because this could be caused by illness or personal issues such as eldercare.
- An open, supportive culture can be created that enables employees to be honest about why they need time off.



## Read also

What are the latest trends in occupational health?  
[bit.ly/1WYzHdD](http://bit.ly/1WYzHdD)



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**Absence management systems can** help organisations adopt a consistent approach to tackling workplace absence.

As well as giving a view of the extent of the problem, the data from these systems can be used to shape wellbeing and absence strategies.

Doing this brings significant benefits, says Neil Pickering, marketing manager at Kronos Systems: “Data from absence management systems allows organisations to create fair and consistent policies that

**“DATA FROM ABSENCE SYSTEMS ALLOWS FIRMS TO CREATE FAIR POLICIES”**

Neil Pickering,  
Kronos Systems

support their staff. This leads to less absence and, more importantly, happier and more engaged employees.”

### Data range

All sorts of data can be sourced from these systems. As well as information about the number of days lost to absence, organisations can access details on the reason for absence; its duration; which areas of the business have the highest amount of time off; and an individual employee’s absence record.

Recording the right data is key. This could mean avoiding having too many categories for types of absence, says Beate O’Neil, head of wellness consulting at Punter Southall Health and Protection. “Be selective as this will make it easier to identify any spikes,” she says. “If [an employer] picks too many, [it] risks ending up with one or two of each, which is fairly meaningless,” she adds.

Organisations can also supercharge their insight by pulling in additional data. Simon Crew, consultant at Buck Consultants, ►►


**Viewpoint**


**David Webb,**  
guidance writer  
for Acas

Keeping accurate records of staff absence and managing those

absences are essential in running a successful organisation.

A small business should, as a minimum, log when individual staff are off ill or absent for an unauthorised reason, for example, because of an unforeseen family caring responsibility.

A larger employer should be able to do more with its data, such as collating the information to build a picture of how much time is lost through unauthorised absence; and how often employees are absent.

The analysis may show up patterns or matters that need investigating further. For example, why is a particular employee off on so many Mondays? Another employee is off a lot with stomach upsets; is there a factor the employer is unaware of, but should know about?

However, most managers recognise that facts and figures are only the start. Handling an absence with the employee can require a lot of skill, tact and sensitivity.

This is why the organisation's absence management policy is so important. It should make clear to employees what is expected of them if they are on unauthorised absence and the 'absence triggers' – the number of days' absence when managers consider warnings, and possibly dismissal, unless attendance at work improves.

The policy should also make clear to managers what is expected of them, and the rules they should follow in dealing with these issues in a fair and consistent way.

recommends factoring in claims information from health benefits such as private medical insurance (PMI) and group income protection, employee engagement surveys and details on demographics and seniority. "This will give a much better idea of what's going on," he adds.

Analysing the data can help to highlight issues across the workforce. "Look for trends," says Pickering. "Take overall


**Case study | Fleetmatics**

### Creating visibility around the issue of absence

The power of data is well understood by Fleetmatics, a global organisation specialising in developing fleet management software. But, when Michael Arkins joined as HR manager in 2012, the organisation was failing to take full advantage of its own data. "A mixture of spreadsheets and forms were being used to record absence," he explains. "This meant there was no visibility around absence so it just wasn't taken very seriously."

To address this, he introduced an automated absence management system from Activ Absence, for the 320 employees based across the six countries, including the UK and Ireland, for which he is responsible. This allows employees to log absence and holidays but also enables Arkins to gain insights. "We produce bi-monthly reports looking at a variety of different statistics, including the number of days and cost of absence, but we also look for any trends in departments, types of illness, an individual's record and so on," says Arkins.

On the back of data from the system, Arkins has introduced initiatives to support the organisation's wellbeing and absence strategies. These include a revised sick-pay policy, a healthcare plan that includes private medical insurance and cash plan benefits for its employees in Dublin, and flexible working options.



absence figures into account but also look by location, department, manager and so on to see if it shows higher rates or more of a particular type of absence."

For example, one employer found that workers in one of its warehouses were experiencing a high rate of musculoskeletal absence. Further investigation found that a new process was causing them to twist more, resulting in back problems.

Adrian Lewis, director at Activ Absence, has also seen the benefits of drilling down into data. "One client's sales team had absence levels that were higher than average," he explains. "When it looked into it, it found the targets were unachievable, which was leading to more stress."

Data on individual employees can also be worth exploring. Where someone is taking repeat absence it could be a health issue but it might also be due to a relationship problem or a family member needing care.

It can also highlight disciplinary issues. John Ritchie, chief executive at Ellipse,

"The data enables us to spot issues across our workforce and take steps to address them before they escalate," he adds.

says: "Repeat absence could indicate someone using sickness as an excuse for some extra days off. This can affect other employees so it's important to take appropriate action."

By identifying the absence issues affecting a workforce, it is possible for an employer to shape absence and wellbeing strategies to suit its needs. This could include training sessions to minimise musculoskeletal problems or help line managers identify stress.

Other healthcare benefits can also be integrated to help manage absence. "[Employers] can set trigger points within an absence system for when a particular type of absence is referred to a benefit such as an employee assistance programme, occupational health or income protection," says O'Neil. "Early intervention can reduce absence and keep employees well and in work."

But while data can bring healthcare strategies to life, its value is very much dependent on the culture of the organisation. "Employees need to feel they're able to tell [their employer] they have a problem otherwise they'll just call in sick anyway," says Crew. "Creating a culture where they feel supported is essential and will bring benefits to [the employer] and [its] employees." 

"REPEAT ABSENCE COULD INDICATE SOMEONE USING SICKNESS AS AN EXCUSE FOR SOME EXTRA DAYS OFF"

John Ritchie,  
Ellipse

"CREATING A CULTURE WHERE EMPLOYEES FEEL SUPPORTED IS ESSENTIAL"

Simon Crew,  
Buck Consultants

industry insight  
supplied by



# Engaging employees with eye care

## Eye checks can help identify signs of underlying medical conditions while supporting eye health and vision



Jeremy Chadwick | Managing director EMEA  
VSP Vision Care

### Aberdeen University scientists recently

announced that they have developed a new test that detects mental health disorders without using high tech MRI equipment or tracking brain waves. It is nearly 100% effective and is done completely through the eyes.

Although this test is still in the trial stages, it is becoming more apparent that the eyes are a remarkable pathway to



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“COST AND CASH FLOW CONCERNS ARE MAJOR REASONS WHY PEOPLE DON'T HAVE THEIR EYES EXAMINED MORE OFTEN”

diagnose and prevent chronic conditions. Regular comprehensive eye checks help to spot serious underlying medical conditions early on, like diabetes, hypertension and high cholesterol.

### Lacklustre attitude

In fact, signs can be seen up to seven years prior than typically found through other means, according to research by Harris *et al.* in *Diabetes Care* (vol. 15 no. 7). Yet, a study conducted by TNS on behalf of VSP, published in December 2014, found that 39% of UK adults do not have regular eye tests. Changing this lacklustre attitude can benefit both individuals and their employers.

Cost and cash flow concerns are major reasons why people don't have their eyes examined more often. For example, some things that may worry them are the wait periods and excesses that often come with benefits. A vision care benefit tends to work best when it does not come with these caveats. Employees also tend to respond much more positively if the optician bills the provider directly, rather than the employee paying and then claiming it back from the provider. This can encourage greater use and therefore better eye health engagement and awareness.

### Vision correction

The importance of eye care for employees cannot be underestimated. Not only are employees with healthy eyes who are supported with necessary vision correction

able to see well, healthy and corrected vision also means fewer headaches, less digital eye strain, and reduced dry eyes; all of which can negatively impact productivity.

The increased use of technology also causes an increased risk to our eyes. Blue light exposure from digital devices can impact the retina's cells and has the potential to cause macular degeneration, which raises questions about an employer's duty of care.

A vision care benefit gives employees access to regular screenings to monitor eye health, and can provide cover towards specialised lenses that can help absorb and deflect blue light.

### Actionable data

Access to actionable data about the health of the workforce, collected through confidential aggregated reporting, gives employers the ability to track chronic conditions over time and shape their wellness programme and benefits to better fit their employees' needs.

As new eye health technology continues to develop and the dangers of blue light become better known, employers serious about supporting eye care will be seen as employers of choice. Vision care is a valuable benefit that helps employees manage their health and save money on eyewear, as well as boost the firm's productivity.

Eye health is the next frontier for UK businesses who want to offer the best employee benefits and equally maximise the return on investment in their workforce ■

# Smooth a path to memory lane

## A quirky approach to communicating benefits can create memorable experiences



Marianne Calnan | Reporter  
Employee Benefits

### Employers are increasingly recognising

the importance of communicating health and wellbeing benefits to staff: in the Chartered Institute of Personnel and Development's (CIPD's) *Absence Management Survey 2015*, published in October in partnership with Simplyhealth, 48% of employers had improved communications to staff about the wellbeing benefits available to them in the past 12 months. Yet, when communication is delivered in abundance, messages can get lost or overlooked. In these cases, turning to more inventive and unusual forms of communication could help boost engagement and awareness levels.

This could mean stepping away from more traditional communication methods, says Jamie Mackenzie, marketing director at Sodexo: "Employers are no longer focusing on standard emails or brochures; [they are] moving onto experiential communications that create memories for employees."

### Memorable communication

To set themselves apart, organisations could create a memorable experience for employees. "I know one business that installed beds in its offices for a week to encourage staff to take naps and inform them that flexible working was available to them," says Mackenzie.

These could, for example, provide staff with a taster of the benefits available to them. "For employers offering gym memberships, installing gym equipment for a couple of weeks could be really memorable," adds Mackenzie.

When energy firm E.on held a roadshow across several of its offices in 2012 with the aim of reducing stigma around mental health issues and highlighting new occupational



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health benefits available to staff, the communications campaign centred around a 'Headshed'. This shed was placed in the grounds of the offices visited and filled with information about mental health issues and the benefits in place to support employees. Ant Donaldson, global product expert, benefits at E.on, says: "The most important thing is to flag employees to more information and explain exactly what the benefit is."

These experiences could also involve activities. For example, Westfield Health recently held a healthy eating week for its employees, which involved a smoothie bike in the office for a day. The bike featured a built-in blender, with riders adding fruits before pedalling to create a smoothie.

"Making a strategy fun, interesting and quirky means it will resonate more with staff and they will be more likely

"MAKING  
A STRATEGY  
FUN AND  
QUIRKY  
MEANS  
IT WILL  
RESONATE  
MORE"

Fiona Lowe,  
Westfield Health



### Need to know

- Creating memories for employees when introducing or revamping health benefits can encourage take-up and increase awareness.
- Encouraging a sense of competition can boost engagement with certain health and wellbeing benefits.
- Thinking outside the box to transform traditional communication can make a benefit stand out.



### Read also

Key strategies to avoid  
in benefits communication  
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to engage and use the benefits, which, in turn, will help the bottom line of the business," says Fiona Lowe, head of HR at Westfield Health.

### Competitive spirit

Employers could also highlight health and wellbeing schemes by offering ways for employees to compete with and encourage one another through various challenges. "Challenges to get employees competing can be great, and this sort of thing is becoming much more prominent in wellbeing," says Rachel Barber, key account manager at Incorporate.

When implementing a new or revamped health and wellbeing scheme, it is imperative that employers tailor their communication to best suit the organisation's culture and the demographic of the workforce. Dr Jill Miller, research adviser at the CIPD, says: "Different methods of communication may be most appropriate for different wellbeing offerings."

Employers could build on the knowledge of their target demographic to develop a creative approach that encompasses more traditional means of communication, such as leaflets and posters. Barber says: "[Posters] need to be eye-catching and engaging to get staff to take notice. Employers need to really consider who they're trying to target."

With 97% of HR decision makers identifying a link between employee wellbeing and organisational performance, according to Edred's *2015 Wellbeing barometer*, published in June 2015, engaging staff with health and wellbeing benefits is key. Using quirky communication methods can create memories, increase understanding and improve take-up **EB**

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