



The Benefit Newsletter Pro

“**Newsletter Teasers**” are a key part of the Advent Newsletter System. The teasers, provided in plain text format, may be displayed on any page on the agency web site of Advent customers, preferably in a prominent place. Our newsletter teasers are designed to help your business grow in 2 ways.

- By providing fresh content to your web site each month the teasers help to improve your web site ranking with internet search engines, such as Google and Yahoo. This should help to increase the number of visitors to your agency web site.
- A visitor to your web site, who takes the time to read the teasers, is probably a good prospect.
 - The teasers prompt those visitors to contact you to receive your newsletter.
 - Once that contact is established, whether via email or a phone call, which is your opportunity to find out about their business and the benefits they provide to their employees.

NOTE: Advent newsletters may not be made accessible via any publicly accessible web page.

2010 - The Benefit Plan Watch Newsletter Teasers

JANUARY 2010

Consumer-Driven Health Plan Participants Display Cost-Conscious Behavior, Utilize Wellness Programs

Individuals in consumer-driven health plans (CDHPs) are more likely than those with traditional coverage to exhibit a number of cost-conscious behaviors, to be more engaged in wellness programs, and to be more inclined to think that financial incentives matter in holding down costs.

Employers Can't Afford Not to Have Health and Productivity Programs

Uncertain employment conditions may contribute to greater lifestyle-related health risks among employed persons, according to new data. Employees are more likely to engage in hazardous health behaviors when employment conditions are uncertain and risky health-related behaviors reduce employee productivity. Now more than ever, employers stand to benefit from encouraging healthy lifestyle choices for workers.

First National Study Examines U.S. Buyers Of Critical Illness Insurance

Nearly half of individuals purchasing critical illness insurance protection were under age 45 according to the first national study of buyers. The study examined sales data for over 130,000 individual and voluntary worksite policies and certificates issued.

Costs for Long-Term Care Insurance Rise Slightly

Costs for long-term care insurance have risen slightly, about two percent, compared to the prior year according to the just-concluded study, Long-Term Care Insurance Price Index.

*To read the full articles, contact us to receive our **Benefit Plan Watch** newsletter.*

FEBRUARY 2010

EBSA Issues Additional Guidance on Extension of COBRA Premium Subsidy

The U.S. Department of Labor's Employee Benefits Security Administration (EBSA) recently released additional guidance to help individuals, employers and plan administrators understand the eligibility requirements of the extension of premium subsidy under the Consolidated Omnibus Reconciliation Act (COBRA).

The Department of Defense Appropriations Act of 2010 amended the Recovery Act's COBRA premium reduction provisions extending the eligibility period for two additional months and the duration from nine to 15 months.

Study Reveals Risk of Having A Critical Illness Before Age 65

A 25-year-old male non-smoker has a 24 percent chance of having a critical illness (cancer, heart attack or stroke) prior to turning age 65. The same-aged male who smokes has a 49 percent chance according to the first National Critical Illness Risk Assessment Study. "Survival comes with a high cost even for those with health insurance which often is accompanied by co-pays, high deductibles and exclusions for various new treatments."

U.S. Businesses Consider Health & Productivity Programs Critical to Maintaining Employee Health and Containing Costs

According to recent research findings, health and productivity programs are critical to U.S. businesses burdened with the declining health of their employees, growing pressures of lost work time, increasing health care costs and global competition, and the uncertainty of health care reform. The survey of nearly 500 employers details the employers' perspective on health and productivity management (HPM) programs being implemented, their plans over the next two years, and measurement of key outcomes.

New Study Finds Most Employers Spend Nearly 2% of Health Care Claims Budget on Wellness Programs

Most mid- to large-size companies in the United States are strongly committed to continuing to invest in health improvement programs for their employees in 2010, according to a new employer survey. Survey results showed that employers overwhelmingly (91%) agree that their willingness to invest in these programs will remain regardless of any health care reform changes in Washington.

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MARCH 2010

Experts Agree a Tax on Health Plans Likely to Cut Benefits

Since the vast majority of Americans who have health coverage get it through their jobs, one obvious question raised by the health reform legislation pending in Congress is: How might it affect the U.S. employment-based health benefits system?

Survey Finds Both Employers and Employees Focusing on Health Costs

New research indicates some employees, motivated by financial concerns and job security, are getting their financial houses in order while participating in wellness and disease management programs more frequently. Simultaneously, the research indicates employers, faced with annual rising health care costs, are increasing emphasis on disease management and wellness programs designed to reduce costs. This is the strongest alignment of employer-employee interests to date, demonstrating a shared focus on health, responsibility and cost reduction that could be mutually beneficial in the long-term.

Company Realized \$30 million in Avoidable Expenses by Focusing on Preventive Care

Last month Lafarge North America Inc., was honored with the Healthy Workforce Productivity Award which recognizes leadership in the area of health and productivity and honors an employer that has worked with its employees to develop, implement and measure an innovative health and productivity initiative.

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APRIL 2010

Health Care Reform – What Do We Know?

After more than a year the United States Congress passed extensive health care reform legislation, which President Obama signed into law. In the process there has been much confusion on just what is contained in the 2,000+ pages of the legislation, which actually required passage of multiple bills.

Six Questions to Prepare for Critical Illness

According to the American Heart Association, about 1.2 million Americans suffered a first or recurrent coronary attack in 2007. Survival rates for heart attacks are 67% today. A new report shows 61% of those that have experienced, or had a spouse experience, a critical illness such as a heart attack encountered significant unanticipated expenses.

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MAY 2010

Voluntary Benefits Play Vital Role in Health Care Reform Era

Voluntary benefits — insurance coverage available through employers and usually paid for by employees — will continue to be an important part of employees' benefits packages as health care reform measures are implemented. Typical voluntary benefits include short-term disability, life, accident, hospital confinement, cancer and critical illness insurance. Most voluntary coverage won't be affected by health care reform.

Public Employers Find Wellness, Disease Management and Voluntary Benefits Enrich Overall Benefit Packages

A new survey examines how public employers are addressing rising health care costs and how they foresee reacting to health care challenges in the future. Survey findings show that half of public employer health plans have been able to avoid double-digit premium rate increases in 2010, and that the majority of employers are stepping up health care cost control and quality care efforts using wellness initiatives

Study Finds Income Protection Important During Disability

Three in five individuals who were out of work for at least six months because of a disability did not have disability income protection, according to findings from a new study. In general, people with disability income protection coverage return to work three months sooner than the people without coverage.

Small Business Health Care Tax Credit

Many small businesses and tax-exempt organizations that provide health insurance coverage to their employees now qualify for a special tax credit, according to the Internal Revenue Service. The credit is designed to encourage small employers to offer health insurance coverage for the first time or maintain coverage they already have. In general, the credit is available to small employers that pay at least half the cost of single coverage for their employees.

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JUNE 2010

New Regulations Issued on Dependent Care Coverage

The Affordable Care Act requires plans and issuers that offer dependent coverage to make the coverage available until a child reaches the age of 26. The law says that the extension of dependent coverage for children is effective for plan years beginning on or after 6 months after the enactment of the law - that means plan years beginning on or after September 23, 2010.

Over One-in-Three Employers Expect Health Reform's 2011 Requirements to Add 3% or More to Next Year's Cost

Many employers are bracing for higher health care costs resulting from compliance with health reform mandates that take effect with the 2011 plan year. According to a new survey of nearly 800 employers, the cost impact will range from moderate to severe, depending on the employer's circumstances.

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JULY 2010

Government Agencies Issue Regulations on "Grandfathered" Health Plans Under the Affordable Care Act

The U.S. Departments of Health and Human Services, Labor and Treasury last month issued a new regulation that claims to make good on President Obama's promise that Americans who like their health plan can keep it.

Proponents claim grandfathered health plans will be able to make routine changes to their policies and maintain their status. These routine changes include cost adjustments to keep pace with medical inflation, adding new benefits, making modest adjustments to existing benefits, voluntarily adopting new consumer protections under the new law, or making changes to comply with State or other Federal laws. Premium changes are not taken into account when determining whether or not a plan is grandfathered.

The Affordable Care Act's New Patient's Bill of Rights

Last month, the Departments of Health and Human Services (HHS), Labor, and Treasury issued regulations to implement a new Patient's Bill of Rights under the Affordable Care Act. These new protections apply to nearly all health insurance plans.

Insured Consumers Satisfied With Current Health Plan — Concerned About Changes Reform May Bring

Of the 82 percent of consumers surveyed who consider themselves “well” or “adequately” insured, nearly all (96 percent) are somewhat or very satisfied with their health plans overall. Many are concerned the new health reform law will bring about significant changes to their current coverage.

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AUGUST 2010

Reform Regulations Require New Health Insurance Plans to Provide Free Preventive Care

The Departments of Health and Human Services (HHS), Labor, and the Treasury issued new regulations last month, requiring new private health plans to cover evidence-based preventive services and eliminate cost sharing requirements for such services.

New Affordable Care Act Regulations to Establish Appeals Process

Last month the Obama Administration announced new regulations, issued by the Departments of Health and Human Services, Labor, and the Treasury, to standardize both an internal process and an external process that patients can use to appeal decisions made by their health plan.

U.S. Businesses Say Health and Productivity Management Programs Work

A leading non-profit research group released its analysis of the health and productivity management (HPM) practices of 450 U.S. employers. The study shows that HPM has a positive impact on their health and productivity goals.

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SEPTEMBER 2010

Health Care Reform to Drive Increase in Health Care Consumption

While financial uncertainties drove many Americans to rein in their consumption of health care services during the recession, the Patient Protection and Affordable Care Act will remove patient out-of-pocket costs for preventive care services under many plans beginning in 2011 and drive an increase in the use of these services, according to a new study.

Nine of Ten U.S. Companies Anticipate Losing Grandfather Status Under Health Care Reform

While many U.S. companies hoped to preserve much of their existing group health plans under the new grandfather provision, a new survey shows that almost all now believe they will not. Ninety percent of companies said they anticipate losing grandfathered status by 2014, with the majority expecting to do so in the next two years.

New Preventive Care Benefits Survey Reveals Increased Popularity with Employers

Last month the results of a recent employer survey on preventive care benefits was released. The study was conducted to determine the extent to which employers are adopting approaches that support the use of screenings, vaccinations, and education. The findings are timely because the White House recently announced the Affordable Care Act, which goes into effect on September 23, requires new insurance plans to provide preventive care without cost-sharing.

Typical First Year Income Loss for a Critical Illness is More Than \$12,000

Two companion studies released last month found that experiencing a critical illness, such as cancer, a heart attack or stroke, can reduce a family's income by more than \$12,000 in the first year alone – even with medical coverage in place – primarily due to the inability to work. In addition, these families experience out-of-pocket medical costs of about \$3,000 in the first year after diagnosis.

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OCTOBER 2010

75% of Employers Plan to Address Health Care Reform in Open Enrollment Materials

The results of a recent annual survey of FORTUNE 1000 companies reveals key trends in employee communication and employer compliance with Health Care Reform and other recent legislation, including data that 75% of employers plan to address the impact of Health Care Reform in their open enrollment materials.

National Dialogue on Health Care Spurs More to Review Their Benefits More Closely

Nearly two-thirds of Americans say the national dialogue on health care has encouraged them to review their health benefits more closely during this year's open-enrollment period. Survey respondents said that in the past they only spent an hour or less reviewing their benefit options, which affect some of their most important health care needs.

Employee Benefits Season Offers Chance to Boost Engagement

As employee benefits enrollment season approaches, there's some good news for employers seeking cost-effective ways to help boost engagement in the workplace. Understanding benefits can offer a key to employee satisfaction.

IRS: Affordable Care Act Tax Provisions

The Affordable Care Act was enacted on March 23, 2010. It contains some tax provisions that take effect this year and more that will be implemented during the next several years. The following is a list of provisions now in effect.

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NOVEMBER 2010

46% of Employers Plan to Enhance Preventive Care Benefits

A new survey of larger employers has identified trends in preventive care benefits in response to new health care reform regulations. Under the new health reform law, "non-grandfathered" health plans will be required to cover preventive services without charging co-pay, co-insurance or a deductible. Plans that existed on or before March 23, 2010 are considered "grandfathered" if certain requirements are met and are exempt from some of health care reform's regulations prior to 2014.

Health Care Cost Increases to Continue in 2011: Survey

As a number of health care reform provisions go into effect for employer plans in 2011, costs for the most popular types of plans are projected to increase by more than 10 percent. A national survey of more than 120 insurers and administrators measured the projected average annual increase in employer-provided health care benefit costs. Insurers providing medical trends for the survey cover a total of approximately 150 million people.

Study Finds People Enrolled in CDH Plans More Active in Improving Their Health and Reducing Costs

When Americans engage in health-smart habits such as participating in health coaching and disease management programs, substituting generic medications for brand name drugs and avoiding unnecessary trips to the emergency room, their total medical costs went down 15 percent -- an average \$358 per person in the first year -- according to a new multi-year study.

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DECEMBER 2010

Amendment to Regulation on “Grandfathered” Health Plans Under the Affordable Care Act

On June 17, 2010, the Department of Health and Human Services, Department of Labor, and the Department of Treasury (the Departments) issued the “grandfather” regulation which detailed how health plans can retain a “grandfathered” exemption from certain new requirements. This amendment modifies one aspect of the original regulation.

Tips for Employers to Help Employees Better Prepare for the Potential Cost of a Serious Illness

A new white paper examines the awareness of critical illness insurance (CII) among employees and the financial impact that a critical illness can have on a typical U.S. household. It exposes the gaps in personal financial safety nets that a health situation may create despite having medical and disability income coverage and outlines steps employers can take to help employees obtain the right amount of protection.

Employees Struggle to Cope With Growing Health Care Affordability Gap

As health care costs continue to significantly outpace the rate of inflation and increases in compensation, an affordability gap is placing increasing pressure on employees and eroding satisfaction with their health plans. The growing health care affordability gap is a very real problem that employers must consider as they rethink their total rewards program and approach to health care subsidies

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