# Employee Health Trends 2025



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### **Recording** Today's webinar is being

Today's webinar is being recorded and will be available on-demand following the event.



Submit your questions throughout the presentation and we will answer at the end during the Q+A.

# **Today's Speakers**

Janet Young, M.D. Clinical Analytics Advisor Chris Gagen Senior Director, Solution Management Nicole Belles Senior Vice President, Product

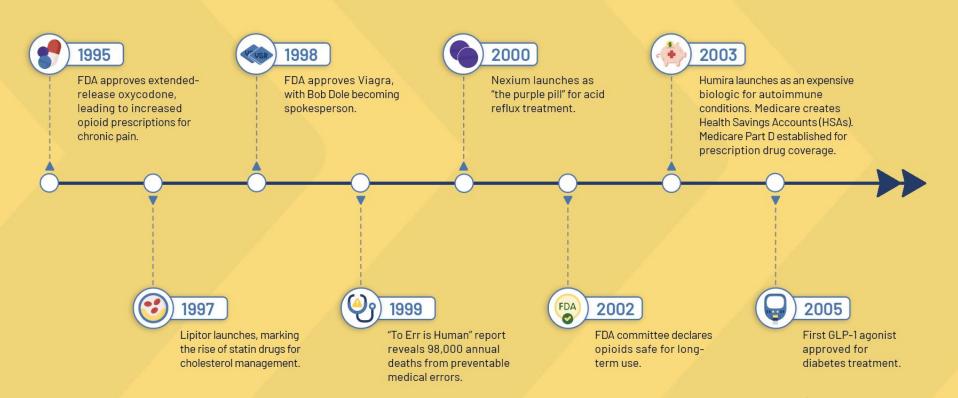
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# The Evolution of Benefits

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### Healthcare Timeline: Key Events & Developments 1990's - Early 2000's



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### Healthcare Timeline: Key Events & Developments 2010's - Present



#### HEALTHIEST EMPLOYERS<sup>®</sup>

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Districts Healthiest 100<sup>™</sup> Wellness Champions About ♥ Resources ♥

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#### EMPLOYER RECOGNITION

### Shining a Spotlight on Healthiest Employers

Healthiest Employers<sup>®</sup> is a trusted awards program that recognizes people-first organizations taking a more proactive approach to employee health. Our goal is to be a resource for organizations focused on improving their employees' health, creating a community invested in their populations' health and well-being.

View 2024 Healthiest 100

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Over the past decade, the Healthiest Employers® has celebrated the Healthiest 100™ Workplaces

**Healthiest Employers** 

**in America** as part of their national awards program, administered by Springbuk.

This program honors the "best of the best" in corporate health and wellness.

### Healthiest Employers - Key Trends

### Workplace Structure & Employee Support: The Hybrid Revolution

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#### ) The New Normal of Work

) 43.8% operate on hybrid schedules, reflecting a major shift in workplace culture

#### ) Family-Centric Benefits Expansion

) Family planning benefits reached 59% (up 6.6% from 2023), showing increased recognition of work-life integration

### Mental Health Investment: Beyond Basic Coverage

- ) Comprehensive Support Infrastructure
  - ) Near-universal EAP adoption at 97.8% shows mental health is no longer optional

#### ) Expanded Condition Coverage

) High coverage across common conditions: Stress (98.6%) and Anxiety (97.8%) nearly universal

### Financial Wellness: A Holistic Approach

 ) Professional Financial Guidance
) 92.2% provide financial advisor access, recognizing financial stress impacts

#### ) Tangible Financial Benefits

) HSA/HRA contributions increased to 81.4%, supporting healthcare cost management

### Healthiest Employers - Key Trends



### Data-Driven Decision Making: The Analytics Revolution

 ) Sophisticated Data Infrastructure
) 66% now use data warehouses, up 5.1% from 2023

#### ) Strategic Health Analytics

) 82% track total healthcare spending

### Disease Management & Innovation: Targeted Health Interventions

 ) Comprehensive Condition Management
) Diabetes management leads at 89%

) Revolutionary Weight Management Approaches

> ) First-time tracking of GLP-1 coverage shows industry evolution

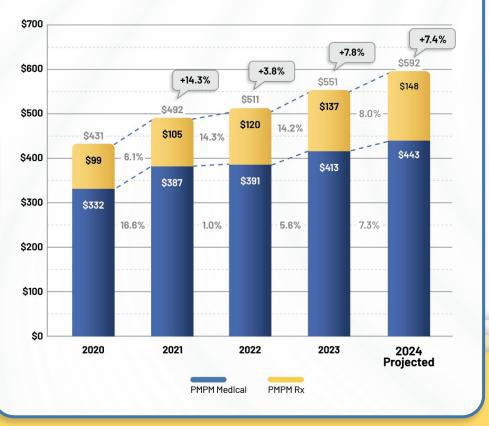
### Social Determinants of Health: Understanding the Whole Person

 ) Dramatic Shift in Health Assessment
) Healthcare resource evaluation jumped to 74.8% from 32.8% in 2020

) Expanded Evaluation Criteria
) Demographics tracking at 50%

# Healthcare Cost Drivers

### **Total Plan Paid PMPM Incurred Years**



# Annual Trends

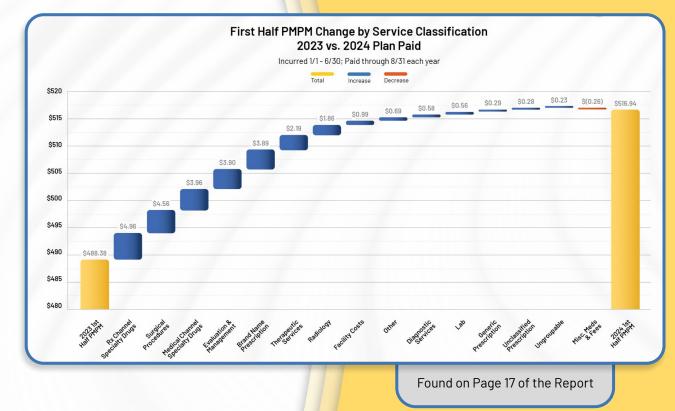
### 7.4% projected for year end 2024

- Pharmacy PMPM trend increasing but slowing down (8% vs. 14%)
- ) Medical trend highest since 2021(7.3%)

# Key Drivers of Annual Trend

# Top drivers include increases in:

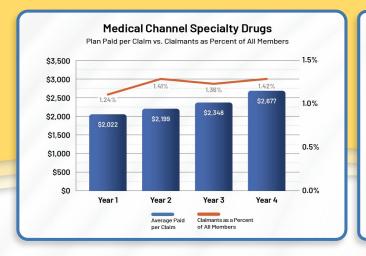
- ) Rx Channel Specialty Drugs
- ) Surgical Procedures
- ) Medical Channel Specialty Drugs

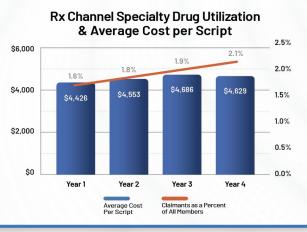


# Prescription for Clarity

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# What is Driving Increased Spend on Specialty Drugs?





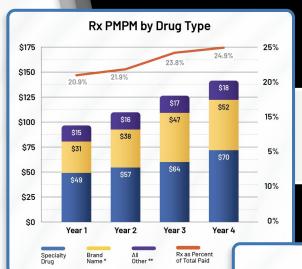
Year 1: July 2020 - June 2021 Year 2: July 2021 - June 2022 Year 3: July 2022 - June 2023 Year 4: July 2023 - June 2024

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- Medical channel specialty drug spend increased by 11.2% and Rx channel specialty drug spend increased by 8.2% in the last 2 years
- ) Increased medical channel specialty drug spend is being driven by increasing cost per claim, largely due to drugs used in cancer treatment
- Increased Rx channel specialty drug spend is being driven by more members using these drugs, due to increased prevalence of inflammatory conditions, impact of advertising, provider comfort prescribing and expanded uses of specialty drugs

### How are Brand Name Drugs Impacting Drug Spend?

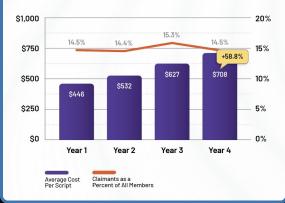
- Brand name drug spend increased over \$5 PMPM in the last two years, but rate of increase is slower than in prior years
- ) GLP-1 agonists are classified as brand name drugs in our analysis
- ) Most of the increased spend on brand name drugs is due to increase in average cost per script. This is largely due to change in mix of drugs - most notably increased use of GLP-1 agonists



\*Brand name drugs excluding vaccines. These are excluded due to their outsized impact on stats for utilization, cost per claimant, etc. \*\*Includes supplies, generic drugs and vaccines.

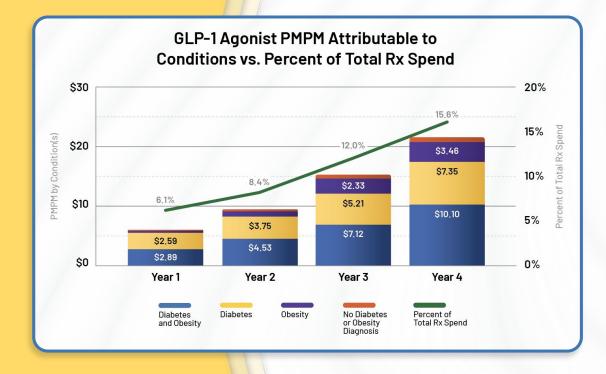
#### Brand Name Drug Utilization & Average Cost per Script

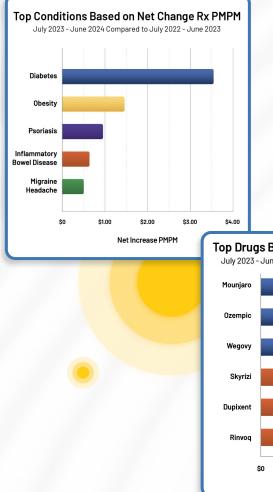
**Excluding Vaccines** 

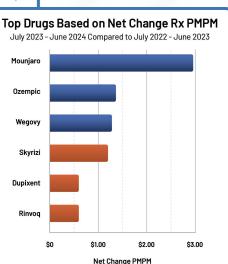


### GLP-1s are the Biggest Drivers of Increasing Brand Name Spend

- Year-over-year rate of increased spend on GLP-1 agonists is down slightly (42% between years 3 and 4 compared to 65% between years 2 and 3)
- In Springbuk BoB, GLP-1 agonists represent close to 16% of spend within pharmacy
- ) Most of the increase in spend is on members with diabetes, particularly those who are also obese



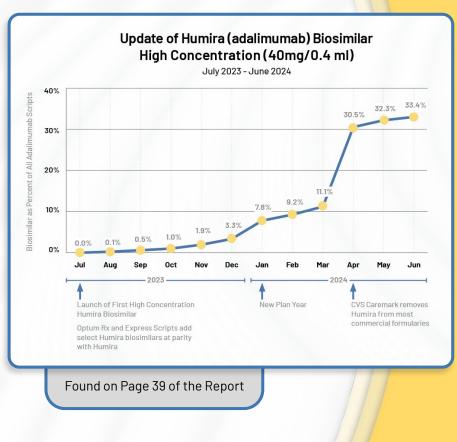




### What are the Top Conditions & Drugs Driving Increased Rx Spend?

- The top 5 conditions are responsible for  $\frac{2}{3}$  of the increase in Rx spend in the last 2 years.
- Diabetes and obesity are the top conditions driving increased Rx spend. This is due to a higher percentage of members with these conditions using GLP-1 agonists, including Mounjaro, Ozempic and Wegovy.
- ) Other top drugs driving cost include Skyrizi, Dupixent, and Rinvoq, resulting in increased spend on inflammatory conditions like psoriasis, inflammatory bowel disease, and eczema. Expansion of indications for these drugs is partially responsible for increased use.
- Migraine is also in the top 5 conditions driving increased Rx spend, largely due to increased use of drugs like Nurtec ODT, Ubrelvy and Qulipta.

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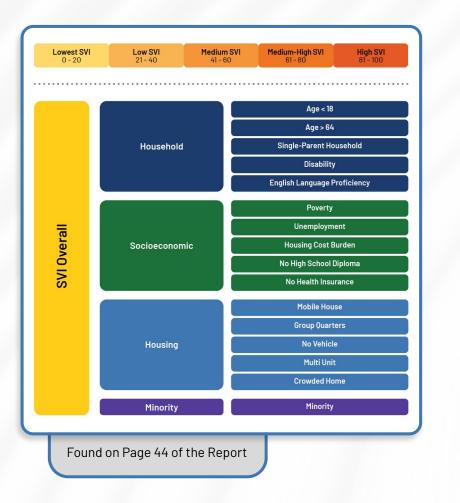
## Potential Impact of Biosimilars on Drug Costs

- ) Biosimilars are near copies of originator biologic drugs. They are as effective as the originator drugs, but typically cost less.
- ) Humira biosimilars introduced in 2023
- ) At least 7 Stelara biosimilars are being launched in the first half of 2025
  - Wezlana (Jan 1, 2025)
  - Selarsdi (Feb 21, 2025)
  - Pyzchiva (Feb 22, 2025)
  - ) Otulfi (Feb 22, 2025)
  - Imuldosa (Feb 22, 2025)
  - ) Steqeyma (Feb, 2025)
  - ) Yesintek (May 15, 2025)
- Large potential impact of Humira and Stelara biosimilars because Humira remains the #1 drug in terms of total drug spend, and Stelara ranks #3 in Springbuk BoB
- ) Lessons learned from Humira: Increased uptake of biosimilar occurs when use is incentivized by preferring drug over originator drug and by reducing member copays
- ) Expect greater uptake of Humira biosimilars this year as other major PBMs incentivize their use

# **Employer's Roadmap**

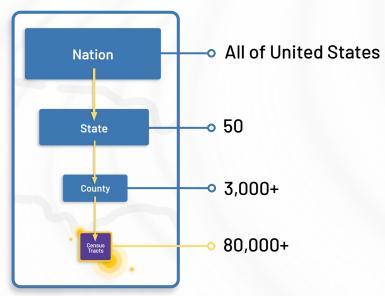
- We are likely to continue to see increased utilization of GLP-1 agonists
  - > Untreated members with qualifying conditions> New indications
- Newer specialty drugs will continue to drive up costs due to expansion of indications, unique characteristics of the drugs, patient demand, and increasing prevalence of inflammatory conditions
- Incentivizing use of biosimilars by preferring them over originator drugs and providing \$0 member copays can lead to cost savings

# Social Determinants of Health (SDoH)



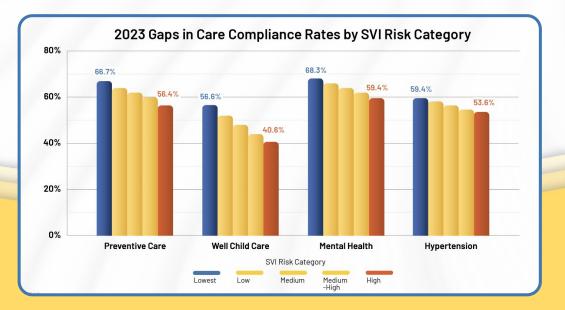
# **SVI Scoring**

The CDC Social Vulnerability Index (SVI) groups 16 census variables into four categories related to social vulnerability including: 1. Socioeconomic Status 2. Household Characteristics 3. Racial and Ethnic Minority Status 4. Housing Type and Transportation.

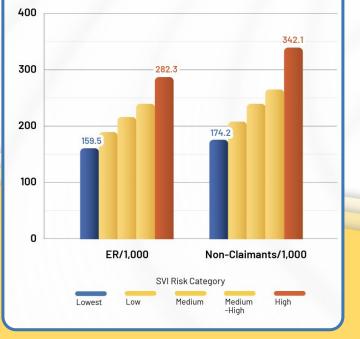


### **SVI** Impact

Where you live influences how you interact (or don't interact) with the healthcare system



2023 ER Utilization & Non-Claimant Rates by Overall SVI Risk Category

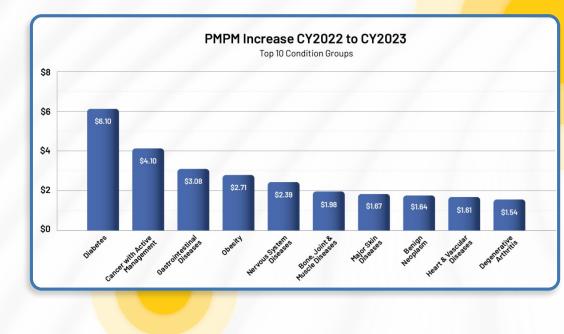


# **3** The Diabetes Dilemma

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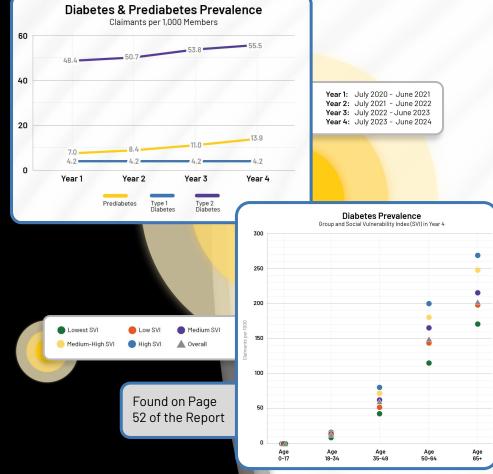
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### Why Did We Focus Analysis on Diabetes?

Although diabetes is not the top condition based on total spend, it is the condition where spend is increasing by the greatest amount.



### **Diabetes Prevalence**

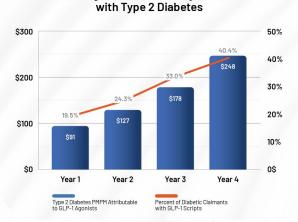
- Increasing prevalence of type 2 diabetes will add to overall costs
- Prevalence of prediabetes has nearly doubled over the last 4 years. Members with this condition are at high risk of developing type 2 diabetes.
- Prevalence is highly variable by age and social vulnerability
  - ) Prevalence increases with age
  - Prevalence increases with social vulnerability

### What is Driving Increasing Diabetes Treatment Costs?

- ) Most of the increased costs are due to increases in drug spend
- Close to 90% of the increased cost to treat diabetes over the last 4 years is due to increasing use of GLP-1 agonists
- Over 40% of type 2 diabetic members are receiving GLP-1 agonists in the current time period.
- ) GLP-1 agonists clinical impact:
  - ) Lowers A1C
  - ) Reduces cardiovascular and kidney complications
  - ) Useful where weight loss is a treatment goal

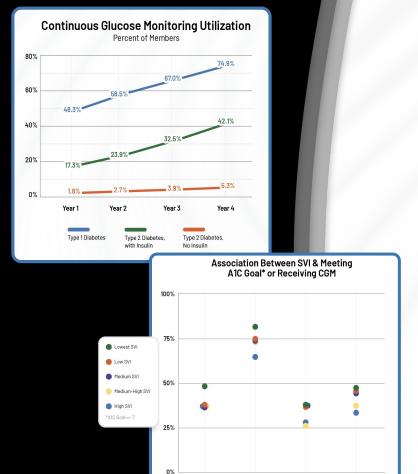
#### Diabetes Treatment: Paid per Type 2 Diabetic Claimant per Month





**GLP-1 Agonist Utilization by Members** 

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Type 1 Diabetes

Percent Meeting

A1C Goal

Type 1 Diabetes

Percent Using

CGN

Type 2 Diabete

with Insulin

Percent Meeting A1C Goal\* Type 2 Diabet

with Insulin

Percent Using

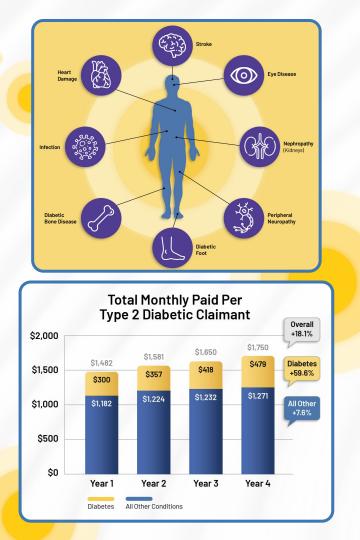
CGM

# Continuous Glucose Monitoring (CGM) Trends

A sensor under the skin provides real-time, ongoing monitoring of glucose levels that is transmitted to a wearable device or cell phone. Used mainly by members with type 1 diabetes or members with type 2 diabetes taking insulin

- ) Increasing CGM use by both type 1 diabetic claimants and type 2 diabetic claimants using insulin
- ) CGM less likely to be used by most socially vulnerable who also tend to be less likely to meet A1C goals
- CGM cost impact over last 4 years has been about a \$16 increase in monthly costs to treat all (type 1 and type 2) diabetic members, but monthly cost for treatment of members with type 1 diabetes has increased by over \$100

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## Overall Spend for Type 2 Diabetic Members

- Most of the cost of treating members with type 2 diabetes is due to treatment of complications and conditions that have overlapping risk factors (e.g. cancer)
- The cost of treating diabetes itself is going up at a much faster rate than cost of treating other conditions
- Within other conditions, decrease in spend on COVID has partially offset increases in spend for non-infectious conditions
- Promising cost trends within cardiovascular and kidney diseases

# **Employer's Roadmap**

Prepare for continued growth in GLP-1 agonist and CGM adoption in eligible diabetic members not yet using these medications/devices.

Determine whether there are gaps in treatment access due to social vulnerability, and take steps to address existing gaps

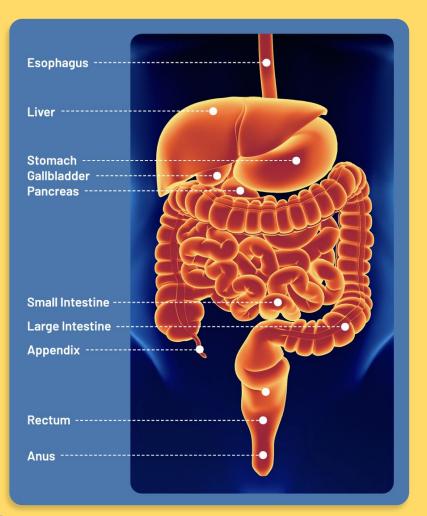
Balance the high near-terms costs of modern treatments against their potential to prevent costly complications

Consider investing in programs that can help decrease risk of disease progression in members with prediabetes and diabetes





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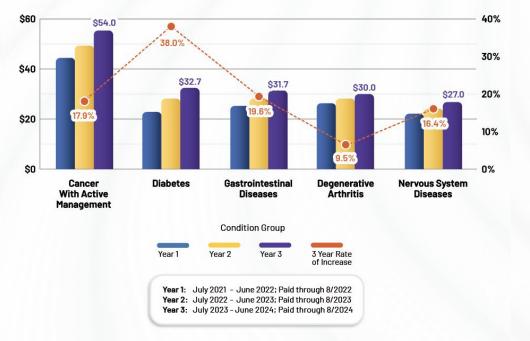
# Understanding the Rising Costs of GI Care

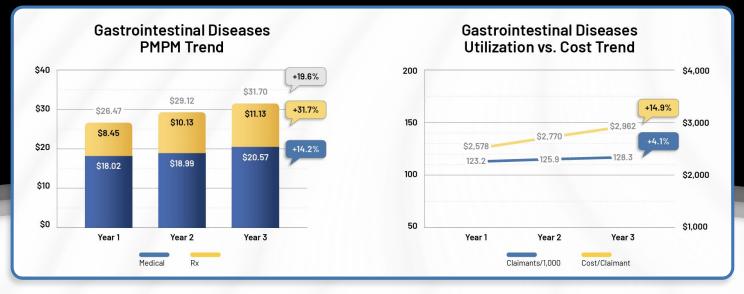
- ) Diseases involving the gastrointestinal tract
  - ) Esophagus
  - ) Stomach
  - Small and large intestine
  - ) Rectum
- Top conditions include:
  - ) Inflammation of esophagus (#)
  - ) IBD Inflammatory bowel disease (\$)
    - ) Crohn's disease
    - ) Ulcerative colitis
  - ) Hemorrhoids
  - ) Hernias
  - ) IBS Irritable bowel syndrome

#### Top 5 Condition Groups by PMPM Over Time with 3 Year Rate of Increase

# Why GI?

- ) 3rd highest spend
- ) 2nd highest trend
- ) Specialty drug driver
- ) High cost claimants
- ) Mental health connection

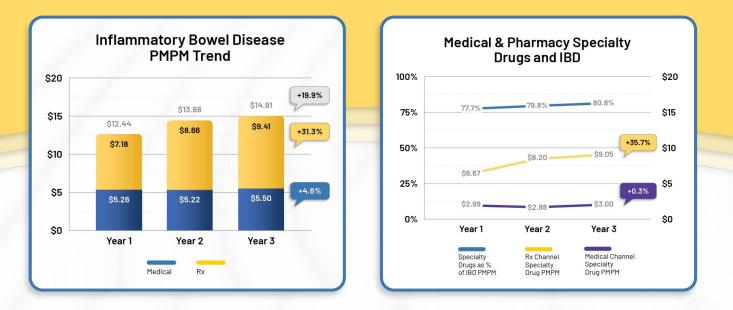




### Breaking Down the Rising Costs of GI Care

- ) Pharmacy accounts for 35% of GI spend and has increased 31.7% over last three years
- ) Cost of treatment impacting trend more than increase in patients
- ) Conditions driving increases: IBD, inflammation of esophagus, and hernias

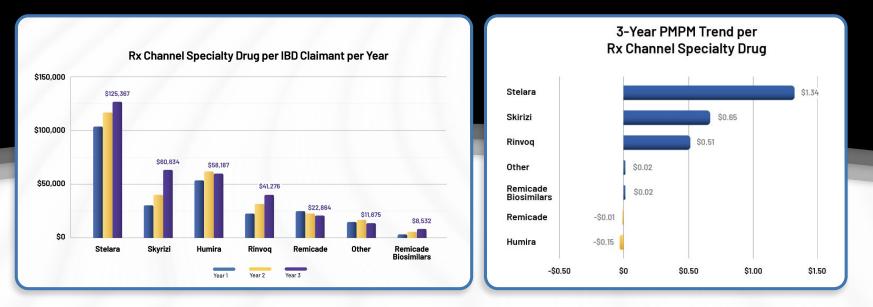
## Inflammatory Bowel Disease (IBD)



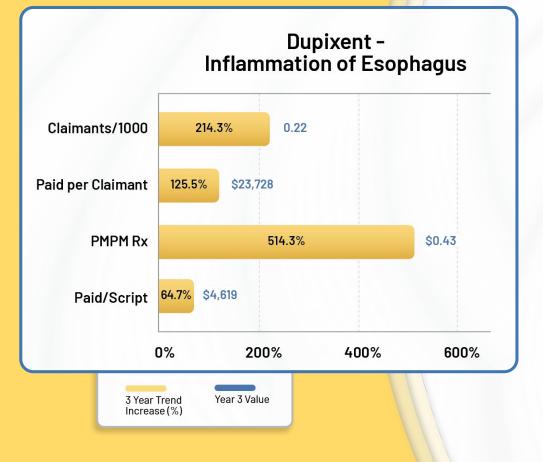
) IBD is the #1 cost driver within the GI category, making up nearly 50% of the total PMPM

- ) Specialty drugs make up ~80% of IBD spend
- 3 year trend driven by specialty drugs in from the pharmacy channel

## IBD - Specialty Rx



- ) Members taking specialty medications to treat IBD are very expensive
- Skyrizi and Rinvoq are having a significant impact on trend
- Biosimilars are helping and are expected to continue to offset increases (Stelara, Humira, Remicade)

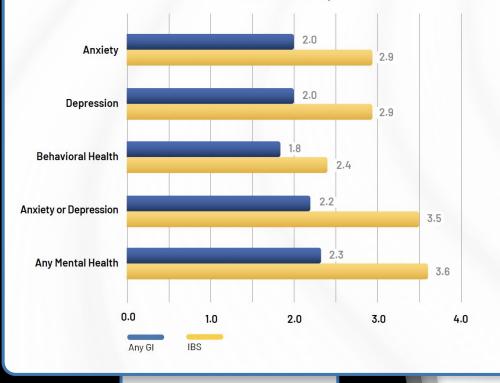


### Eosinophilic Esophagitis (EoE) & Dupixent

- ) Claimants have tripled
- ) Claimants are more expensive
- ) A relatively small spend overall but rapidly increasing

### **Risk of GI Condition Given a Mental Health Condition**

Year 3 - Adults Only



### Mental Health & GI

- ) Positive risk ratios between mental health and GI conditions
- Adults with anxiety or depression are 3.5x more likely to have IBS than adults that do not have these mental health conditions
- ) Wellness and stress management help with both conditions

# **Employer's Roadmap**

- Review strategies and education material to help members use biosimilars when possible, especially new patients
- Steer patients that are utilizing medical channel specialty drug infusions toward lower cost settings
- Consider plan design options and strategies to help support medication adherence
- Partner with vendors that can assist with managing members with complex needs

# Questions?



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