Building a Better Benefits Enrollment:
Using Consumer Behavior to Create a More Effective Enrollment
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Executive summary

Insurance, by its very design, isn’t something we are well-equipped to think about rationally. Purchasing insurance products requires consumers to pay today in preparation for events that may or may not happen in the future. Those events — including death, disability or a serious illness — are not pleasant thoughts to entertain. And the sheer amount and complexity of information an insurance choice involves creates an uphill battle for employees’ minds. The end result is many employees put off benefits decisions or make less-than-optimal choices about vital financial protection for themselves and their families.

Employees — like all consumers — are not purely rational thinkers who spend their time and energy to weigh all their options before making a decision. Instead, they rely on a number of mental shortcuts when making their choices. These shortcuts can include a consumer’s “gut” feeling about a product, the opinions or actions of a trusted friend or coworker, or a rushed decision without proper information.

This means traditional benefits enrollment solutions — such as simply providing information-rich product details and a mechanism to sign up — may not be the most effective path to a successful enrollment.

Enter the science of behavioral economics used by retailers for decades to influence purchasing decisions by providing better access to and better information about their products.

Today’s employers have an unprecedented opportunity to use the science of behavioral economics to create a more effective enrollment strategy that leads workers to a better understanding of financial protection options and better purchasing decisions.

This white paper explores ways employers can rethink their employee benefits enrollment strategy as a consumer purchasing decision. By better understanding how consumers make their decisions and then offering a range of technologies and communication strategies — including expert guidance and enough time to evaluate and make wise decisions — employers can maximize their benefits investment and better protect their most important asset: their people.

Financial protection benefits are more important than ever for America’s workers — and the way they are purchasing those benefits is rapidly changing. Employers can adapt to these changes and help their employees obtain the protection they and their families need by better understanding how consumers make their decisions.
Continued financial uncertainty has driven home the vital importance of financial protection benefits for employees — many of whom continue to live paycheck to paycheck years after the “end” of the economic recession.

Meanwhile, cost-containment pressure has led employers to pass more of the burden for benefits decision-making to their employees. And health care reform legislation has caused a shift in the benefits employers must — and can afford to — offer.

When taken together, these changes leave today’s employees with a completely different set of benefits decisions than they were making just a few years ago.

At the same time, other economic, political, social and technological changes are dramatically affecting the way employers communicate about and enroll benefits:

- The biggest generation in history — Generation Y or the Millennials — is taking over the workforce while Baby Boomers retire in record numbers. Gen X is sandwiched in between, and Gen Z is not far behind. Each of these generations has its own benefits needs and communication preferences.

- Record numbers of minorities are entering the American workforce, with language and cultural differences that often bring different coverage and decision-making needs.

- Rapid changes in technology have created more options — and more complexity — for benefits education and enrollment.
Workplace diversity on the rise

Communicating about benefits and enrolling employees in benefits plans can be even more challenging given the rising diversity in the workplace. This diversity includes age, race and language preferences that can create barriers through differing social norms, communication preferences and insurance needs.

The next two decades will require employers to handle the diverse needs of as many as four workplace generations — each with different communication, learning and decision-making preferences.

- **Baby Boomers** demand the cost and risk information that fits their unique life situation, but they don’t want much help in making benefit selections. Baby Boomers seeking bottom-line benefits information tend to go straight to the source — employer-distributed brochures and packages mailed to their homes or insurance broker websites — and then independently make their benefits selections without much outside help.

- Workers in **Generation X** — those born between 1965 and 1979 — lack the life experience of Boomers and therefore need more help to understand how their benefits work, how different options may meet their life needs, and how to plan for the future. They tend to be more skeptical and isolated in their approach to making choices than their idealistic elders.

- **Generation Y**, or Millennials (born between 1980 and 1999) is the newest generation to enter the workforce and was born practically wired into a connected, technically advanced world. Despite their familiarity with the Internet, smartphones and instant access to information, they tend to be more relational than Gen Xers and are just as apt to ask a peer for information about benefits as they are to look up information on a website.

- And now **Generation Z**, the Post-Millennials (those born after 1995), is just beginning to enter the workforce. Although it’s very early to cite workforce characteristics of this group, early indications are they tend to prioritize financial security more than Millennials, valuing home ownership as the central cornerstone for achieving the American dream.¹

Age isn’t the only demographic creating divisions in today’s workforce. Growth in minority populations — especially Asians and Hispanics — is far outpacing that of whites in nearly every pocket of the country.

The percentage of Americans who belong to a minority group will top 50 percent by mid-century, according to the U.S. Census Bureau. The number of Americans who describe themselves as black is expected to increase by 20 million by 2060. The Asian population is projected to double to more than 34 million over the same time period. And the Hispanic population is expected to grow by 75 million to represent nearly one in three U.S. residents.

Language differences can raise additional barriers to effective benefits education and enrollment, as can cultural differences involving family decision-making. Employers need to educate themselves on these needs to manage an effective benefits enrollment program.²
Workers want personalized benefits

Employees understand they are being asked to shoulder more of the burden of benefits decision-making and cost, and they are not shying away from making those decisions. In fact, many are demanding that their employers provide them with personalized benefits that can be structured to meet their individual needs.

Giving employees the opportunity to customize benefits to fit their needs also benefits employers: 65 percent of employees say having customized benefits would increase their loyalty to their employer.¹

One way employers can create more options without increasing costs is by offering a range of voluntary benefits employees can select from and fund themselves — essentially allowing employees to create a customized benefits package. This approach aligns with the reality of an employee population that values personalized choice and control.

The value of choice in benefits selection becomes a factor when examining the differences between age cohorts and other demographics currently comprising the workforce. Although one size does not fit all even within a generation, benefits choices that acknowledge the different needs and desires of employees across ages and cultures are more likely to produce the range of options and benefits education channels that appeal to most workers.

However, increased personalization brings with it increased complexity. Employers may be interacting with multiple carriers for different types of benefits and multiple enrollment systems to administer them. Employees, meanwhile, will need more education and decision-making support to understand their available options and choose those that best fill their financial protection gaps. Employers must evaluate benefits partners carefully to ensure choice can be incorporated into the benefits plan without adding confusion or cost.

Increased personalization brings with it increased complexity. Employers must evaluate benefits partners carefully to ensure choice can be incorporated into the benefits plan without adding confusion or cost.
Effective enrollment requires choice design

Traditional benefits communication and enrollment solutions assume people will always make full use of the available information and respond rationally to incentives presented to them. Unfortunately, this is often untrue.

Many times people fail to follow through on their diet, procrastinate until the last day to file their taxes, neglect to get a flu shot, or fail to save enough for retirement. This is not due to a lack of incentives or information — their financial and physical well-being is at stake and there is plenty of information and resources at their disposal. Yet they still fail to follow through.

Decades of behavioral research have made clear the traditional economic assumptions about the “rational” consumer are flawed. More often than not, psychological biases and mental shortcuts drive employees’ decisions about whether or not to enroll in or maintain their insurance coverage.

Traditional enrollment strategies are not keeping pace with the rapidly changing ways today’s consumers make purchasing decisions. However, employers can learn from behavioral economics research to create a more effective enrollment experience for their employees through subtle changes in the context and framing of benefits choices.

A central finding of behavioral economics is people tend to put too much emphasis on present outcomes relative to future outcomes. This natural “present bias” causes people to undervalue their future concerns and needs when making choices where the implications span across time periods. People also believe they are less likely to get into a car accident and less prone to health risks than the average person. They avoid uncomfortable conversations, and if they must think about unpleasant events, they tend to underestimate the probability that they could happen to them.

Employees strongly indicate they want choice in their benefits, but offering an overwhelming number of options can have a negative impact on decision-making. Insurance carriers, especially those offering voluntary benefits, can easily overwhelm consumers with choices and products that aren’t well understood. And the carriers themselves have traditionally done a poor job of understanding consumers and how to present data and information in an effective and meaningful way.

A famous study by Sheena Iyengar at Columbia University in 1995 involved working with a gourmet market to learn how the number of choices in jams affected decision-making. Displays that carried the most choices (24) pulled in 60 percent of customers — but only 3 percent made a purchase. At displays with fewer choices (6), only 40 percent of customers engaged with the display, but nearly one-third of those consumers made a purchase.4
Choice overload affects consumers even in very consequential decisions, Iyengar said in a 2011 TedTalk. “We choose not to choose, even when it goes against our best self-interests. We have observed negative consequences to offering people more and more choices. They’re more likely to delay choosing — procrastinate even when it goes against their best self-interest,” said Iyengar.

The most effective benefits package will offer enough flexibility and choice to meet employees’ needs, combined with simplicity in options that encourage the decision-making process. Then, those options must be presented with the right decision aids, convey the value of insurance benefits without requiring employees to invest significant time and energy reading content, aid the conversation between employees and their significant others, and make the perceived process of enrolling more manageable.

Strong benefits communication and effective enrollment processes are essential in driving participation in the programs employers are investing in. Navigating the preferences among a widely diverse workforce may seem to be a complex effort, but employers can follow a blueprint of best practices to a successful destination.

In a Jam: Choice overload deters decision-making

Employers can learn from behavioral economics research to create a more effective enrollment experience for their employee benefits through subtle changes in the context and framing of benefits choices.

Step 1: Get employees’ attention

The first hurdle to an effective benefits enrollment is getting employees’ attention. Many employers believe all they need to do is send a weekly email communication, hang a few posters around the office, and post something on the intranet site. But this is not enough to get the valuable attention of employees and convince them to enroll in the benefits programs they need. The majority of consumers spend an average of 15 seconds or less viewing business-to-consumer communications.\(^5\)

Effective benefits education and communication are critical to the success of the enrollment — and the long-term health of the organization. Employees who say their benefits communication is effective are more than twice as apt to say they are very loyal to their company.\(^6\) And employees who rate their benefits education highly were also likely to rate their workplace as very good/excellent (81 percent).\(^7\)

Employers understand the critical nature of strong benefits communication: 81 percent of large companies agree it’s important for employees to fully understand their benefits. Yet only 58 percent of employees say they actually understand their benefits well.\(^8\) And one recent national poll found 7 percent of employees admit they don’t understand their benefits at all.\(^9\) It is a gap too large to ignore.

One way to encourage participation and limit procrastination is to inform employees of what their coworkers are doing. By posting statistics such as “XX percent of our employees have enrolled in their benefits plans for next year,” employers can encourage more employees to take the next step.

Employers also can drive participation rates upward using auto-enrollment, which automatically enrolls employees into benefits plans unless they opt out. This tends to work well for employer-sponsored health benefits — especially if employers want to steer workers to a particular plan.

More than 70 percent of employees favor or do not object to employers auto-enrolling new employees.\(^10\)

Another choice is to “nudge” employees by forcing them to make an active choice at the benefit level for each available benefit, saying “Yes” or “No” to each program after they’ve paused to consider whether it’s right for them. An active choice design helps overcome human inertia and a tendency to underestimate our true risks. Forcing employees to make a decision may encourage them to become better educated about their risks and the products that can help them mitigate those risks.

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Understanding my benefits is important \(98\%\)

Receiving regular updates from my employer about benefits is important \(95\%\)

Convenient access to a benefits expert for face-to-face consultation is important \(90\%\)

My employer’s benefits communication efforts are effective \(60\%\)

I understand my benefits well \(58\%\)

I don’t understand my benefits at all \(7\%\)

Employees agree benefits communication matters — but often misses the mark

Source: Colonial Life-Harris Interactive Quick Query, February 2013; Beyond the Usual Benefits, Unum, 2014.
Find the right technology partner

To be effective, benefits communication must have the flexibility to accommodate a broad employee audience that can include varying facilities, shifts and generations.

The technology used in the enrollment process needs to be flexible as well. Human resources professionals should seek out benefits partners who offer enrollment technology that meets the needs of the business and its employees — not the dictates of the technology system. Flexible enrollment technology should work for companies of all sizes, from three employees to thousands. And it should work to enhance — not replace — one-to-one sessions in situations where employees can meet with a benefits counselor.

Many insurance brokers and benefits carriers offer their own proprietary enrollment systems, in addition to systems some employers have adopted themselves. However, employers can still create a seamless enrollment experience for workers by seeking out a benefits provider with the capability to integrate multiple systems through third-party connections.

This seamless integration allows employees to effectively make benefits decisions for their health care and voluntary benefits needs in one sitting, without realizing they were choosing benefits from a variety of vendors.

Step 2: Emphasize communication quality over quantity

Some employers try to capture their employees’ minds through over-communication. When it comes to the enrollment process itself there are a number of arenas where information overload is at play. Research has shown a point where providing more information results in diminishing returns on comprehension.

Many employees choose not to engage with their benefits communication material or benefits information websites, or rely on less “fact-checked” sources, such as conversations around the water cooler with colleagues, with their spouse, or on the web.

The way communications are presented, and the content within them, can play a large role in motivating consumers to enroll once the opportunity arises. Too often, the communication vehicles used by employers are too difficult to understand and digest. Employees can be overwhelmed with cumbersome, repetitive and tiring messages that fail to encourage the behavior their employers are looking for. The quantity of the communication is not the answer — it’s the quality of the information.

Benefits learning preferences vary by age

Younger employees — online chat sessions, message boards, mobile apps

Middle generations — independent research, online sources, peers

Older employees — Written materials from employer
Too often, communication about insurance products and benefits stress cost-benefit analyses. But these are not the way to capture the hearts and minds of consumers. The benefits of financial protection and other insurance products should be explained in a simpler way that consumers can understand and make the best decisions for them and their families. Once they are engaged on an emotional level, they are more likely to dedicate some serious thought to making purchasing decisions.

**Use a variety of communication vehicles to maximize effectiveness**

Although the majority of employees are comfortable making benefits selections online via a web portal, the decision-making process is another matter altogether. This benefits education can take a variety of forms. Research shows older employees maintain higher trust in their employers and value written materials from them. But later generations prefer to do their own research from independent sources, or even seek opinions from peers or online. Younger employees (ages 18 to 34) prefer using electronic tools, such as online chat sessions, message boards and mobile apps, more than their older colleagues.

Employers have little time and few resources to analyze what communication vehicles may work best within their population, and overwhelmingly (81 percent) they say they use the same communication strategies for all employees. A recent LIMRA survey found email was the most frequent method used, with information delivered to home or work, and mandatory group meetings rounding out the top three. Most employers use only one or two approaches for benefits communication. But when firms ignore the habits and preferences of diverse workers, they lose the opportunity to demonstrate the value of the benefits relationship and to build loyalty with talented workers.

**Step 3: Allow enough decision-making time**

When decisions are made under time constraints, people often make less-than-optimal choices. Employees may inaccurately make assumptions about the amount of time it takes to enroll in voluntary benefits.

Wise benefits decision-making requires consideration of values, priorities and finances. Yet the average time employees devote to benefits enrollment is only 20 minutes — slightly longer than the average coffee break.

Five years of employee education and enrollment research show employees need three weeks to adequately review benefits and make wise decisions. This period offers employees ample time to take materials home and review them with a spouse or partner, evaluate personal solutions, attend employer-sponsored meetings, and do some additional research on their own. Employees with two weeks or less to review benefits information were significantly more likely to say they did not have enough time to make good benefits decisions.
The number of employers providing an enrollment period of at least three weeks declined from 2009 (55 percent of employers) to 2012 (47 percent). But the extra time can make a huge difference: employees are more satisfied with their benefits education and overall benefits package with more time. Only 7 percent of employees who were given less than two weeks to decide rated their benefits education as excellent or very good, and only 8 percent gave strong ratings to their benefits package. In contrast, among employees who had three or more weeks to review their benefits, 53 percent rated their overall benefits package highly and 57 percent rated their benefits education as very good or excellent.

Step 4: Provide a firm foundation with decision support tools

But just providing more time for employees to make those purchasing decisions may not be enough. Employers may also want to communicate more about what others in their company are doing. Information about the behaviors of others can be a powerful tool to change employee behavior. If consumers believe it is socially or interpersonally desirable to perform a behavior, they are more likely to perform it. Many employees make their benefits decisions based on what their friends at work, significant others, parents or coworkers recommend. But it may be hard for employers to know if employees are getting enough of the right information or too much of the wrong.

When there is a lack of social information, people are more likely to avoid action or make false assumptions about what the majority of people are doing. Social proof can be used to motivate action. An example would be: “XX percent of your coworkers chose this option.”

The optimal time frame for employees to adequately review materials and make good decisions for enrollment is three weeks.

Extra time for benefits decisions drives stronger employee satisfaction

Percentage of employees giving excellent or very good ratings:

<table>
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<th>Benefits education</th>
<th>3 weeks or more to decide</th>
<th>57%</th>
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<tr>
<td>Less than 2 weeks to decide</td>
<td>7%</td>
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</table>

<table>
<thead>
<tr>
<th>Benefits package</th>
<th>3 weeks or more to decide</th>
<th>53%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 2 weeks to decide</td>
<td>8%</td>
<td></td>
</tr>
</tbody>
</table>

Source: Beyond the Usual Benefits, Unum, 2014
A qualified benefits vendor partner can provide a range of technology tools to help individuals select the type of benefits they need for their age and circumstances. Colonial Life's Youville® tool, for example, takes just seconds to ask users seven questions to pinpoint the right voluntary benefit plans they should consider.

This level of information isn’t just useful to help employees make their decisions. It can also be a powerful tool to make benefits enrollment as successful as possible.

In larger organizations, especially those with many supervisors, employers may see different levels of engagement in the benefits education and enrollment process — significantly impacting program participation.

Human resources professionals should expect to see daily updates on the progress of their workplace’s enrollment, including who scheduled one-to-one benefits counseling sessions, what benefits employees are choosing, and areas of the company where participation may be proceeding slower than planned. Customized daily reporting not only allows human resources professionals to collect, parse and analyze information according to their needs, but also allows them to make adjustments midstream during enrollment.

This can also lead to greater employee satisfaction with the benefits program if underwriting guidelines for certain benefits require a minimum participation for the coverage to be issued. Ensuring participation is adequate throughout the enrollment period avoids disappointment if coverage later cannot be provided.

**Step 5: Contract an expert builder**

The fear of making a mistake or regretting a decision is higher when the number of options is greater or if the options are too similar and difficult to differentiate. In these cases, people become more likely to doubt their decisions and avoid making a purchase.

The reason enrolling with benefits counselors is so effective is they can automatically remove unnecessary options or make suggestions based on employees’ income or lifestyle. These elements have not yet been built into most online self-enrollment portals.

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When there is a lack of social information, people are more likely to avoid action or make false assumptions about what the majority of people are doing.

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**1-to-1 benefits counseling works best — yet is underutilized**

- Employees who prefer them: 70%
- Employers who agree they’re effective: 94%
- Employers who provide them: 43%

Some employees may make benefits decisions on their own, but it's natural to seek input from family members and significant others when considering what's best for voluntary health and financial benefits. Among Millennials, 69 percent say they prefer time at home to review benefits. Because younger generations are accustomed to looking to peer opinions when making purchasing decisions — think Angie’s List and Amazon reviews for services and products — it’s likely they will look for advice beyond their employer or the benefits provider.

Often, however, it takes more expertise and personalization for employees to feel satisfied about benefit selection, because it is a highly personal decision.

Technology is one way to address the need for personalization. At least half of Millennials surveyed say they find mobile apps and online tools helpful when selecting and enrolling in company benefits — more so than any of the preceding generations. They are also more likely to use live chat and social media when making benefit choices.

But a large majority of employees (70 percent) prefer one-to-one meetings with benefits experts to inform the decision-making process. An overwhelming 94 percent of employers agree this is an effective tactic, yet only 43 percent of firms with fewer than 500 employees provide it. Many employers overlook this option because they don’t realize a benefits partner with communication capabilities can make their job easier by managing all or part of the benefits enrollment process.

A benefits counselor can help employees understand the core benefits offered by their employer, and highlight how individual policies fill in the gaps not covered by core benefits.

In selecting a product, employees are required to have answers to such questions as how much coverage they need, how the benefit fits with their lifestyle, what their guaranteed issue amount is and why it matters, and what is not covered by the benefit they’re purchasing. Through this process, a benefits counselor acts as a human interface between the enrollment portal and the employee, answering questions not easily answered by journeying through the portal alone.

What’s more, a professional benefits counselor has the knowledge to understand a range of benefits that a company may offer, and is able to handle the breadth of the benefits information, education and individual enrollment process. Qualified partners can even help verify employee and dependent information and update eligibility records in real time.

More than half of employees say they need more help understanding how their benefits work or how benefits meet their needs. A professional benefits counselor has the knowledge to understand a range of benefits a company may offer and is able to handle the education and individual enrollment process.
Conclusion

In today's reality of shifting the financial responsibility for benefits from employer to employee, and employees who may be cutting corners wherever they can to preserve their lifestyles, it's critical to remember the increasing need for strong and effective benefits communication, education and enrollment. Employers who want to maximize their considerable benefits investment should keep these concepts in mind for an effective enrollment:

- Get employees' attention by “nudging” them toward an enrollment decision by sharing how many of their coworkers have enrolled and by forcing them to make an “active choice.”
- Don’t over-communicate with messages that don’t connect emotionally with employees.
- Don’t ignore the differences within the workplace — between older and younger workers and among those with racially, socially and ethnically diverse backgrounds — with a one-size-fits-all strategy.
- Give employees the time they need to make the best decisions for them and their families — and monitor their participation by facility, department and product on a daily basis.
- Use data about enrollment choices of others within the organization to encourage employees to consider certain benefits and offerings.
- Today's technology allows for employees to educate themselves through online tools, but it’s certainly not the only way to communicate — and possibly not the most effective. The technology-savvy Gen X and Gen Y both enjoy validation of their choices through their social networks and online research, but they prefer face-to-face communication with an informed, knowledgeable benefits counselor to inform their benefits selection.
- Take advantage of expertise available — often at no expense to the company — from knowledgeable, experienced benefits partners. They can bring the employer enrollment technology and other solutions to make the employer’s job easier and more cost-effective.

Following a blueprint for a successful enrollment season leads to employees who truly understand their benefits and own the financial protection coverage they need. The final destination finds employees who are highly satisfied with their benefits — and their employers.

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About Colonial Life

Colonial Life & Accident Insurance Company is a market leader in providing financial protection benefits through the workplace, including disability, life, accident, cancer, critical illness and hospital confinement indemnity insurance. The company's individual benefits education, innovative enrollment technology and personal service support more than 80,000 businesses and organizations, representing more than 3 million working Americans and their families.

We help our customers design benefit programs to address their business needs. In 1-to-1 counseling sessions with employees, we offer simple, straightforward advice about the benefits they have and those they may need to fit their individual lifestyles and budgets.

Colonial Life’s 10,000 career agents work in one of the fastest-growing segments of the insurance industry. The company has received national recognition for excellent training programs, and annually receives top recognition in a national awards program as brokers’ partner of choice in the workplace benefits market.

Colonial Life & Accident Insurance Company is a business unit of Unum Group, a world leader in employee benefits, which has been recognized as one of Forbes’ 150 Most Reputable Companies, the Best Place to Work in Insurance, Best Employers for Healthy Lifestyles and Newsweek’s Green Company listing. Colonial Life has been named one of the Best Places to Work in South Carolina. Its national headquarters building in Columbia, S.C., has earned the Environmental Protection Agency’s ENERGY STAR® certification.