

Workers' share of annual premium for employer health plans nears \$6,000

November 11 2021



(HealthDay)—Health insurance has gotten slightly more expensive

during the pandemic: A new survey shows that annual family premiums for employer-sponsored health insurance rose 4%, to an average of \$22,221 this year.

Of that amount, employees paid an average of nearly \$6,000 toward the cost of coverage, while employers paid the remainder of the premium.

But there was some good news: The Kaiser Family Foundation (KFF) [survey](#) of nearly 1,700 small and large companies also showed that there was an increase in workplace [health](#) benefits such as mental health services and telemedicine during the COVID-19 pandemic.

"In a year when the pandemic continued to cause health and economic disruption, there were only modest changes in the cost of [employer](#)-provided health benefits," said Gary Claxton, KFF senior vice president and director of the Health Care Marketplace Project.

"Some employers adapted their plans to address mental health and other challenges facing their workers due to COVID-19," Claxton added in a KFF news release.

The 4% premium increase is close to the increase in workers' wages (5%) and inflation (1.9%) this year, but average [family](#) premiums have jumped 47% since 2011, outpacing increases in wages (31%) and inflation (19%), the survey found.

Meanwhile, the average single deductible is \$1,669 for workers who have one, which isn't much more than in 2020 (\$1,644) or 2019 (\$1,655), but significantly higher than in 2011 (\$991).

In 2021, 85% of covered workers had a deductible in their plan, compared with 74% a decade ago.

Overall, the burden of deductibles has increased by 92% among all covered workers over the past decade.

The journal *Health Affairs* is publishing an article with select survey findings online and in its December issue.

The brightest spot in the findings involved mental health coverage.

Among firms with at least 50 workers that offer health benefits, 39% said they made changes to their mental health and substance abuse benefits during the pandemic.

For example, 31% gave workers more ways to access mental health services—such as through telemedicine—and 16% offered new mental health resources, such as an employee assistance program.

Other changes included expansion of in-network mental health and substance abuse providers (6%), waiving or reducing cost-sharing for related services (4%), or increasing coverage for out-of-network services (3%).

Overall, 12% of employers with at least 50 workers that offer [health benefits](#) said there was an increase in their enrollees' use of [mental-health services](#). Among the largest employers (1,000 or more workers), 38% reported such an increase.

"The expansions of telemedicine and [mental health](#) benefits were important in meeting the needs of employees and their families in difficult times," Claxton and colleagues said. "These types of changes made sense not because employers want to spend more, but because employers want their employees to see their health benefit programs as 'benefits' and to value them as such."

More information: The American Academy of Family Physicians has more on [health insurance](#)

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Citation: Workers' share of annual premium for employer health plans nears \$6,000 (2021, November 11) retrieved 13 May 2024 from <https://medicalxpress.com/news/2021-11-workers-annual-premium-employer-health.html>

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