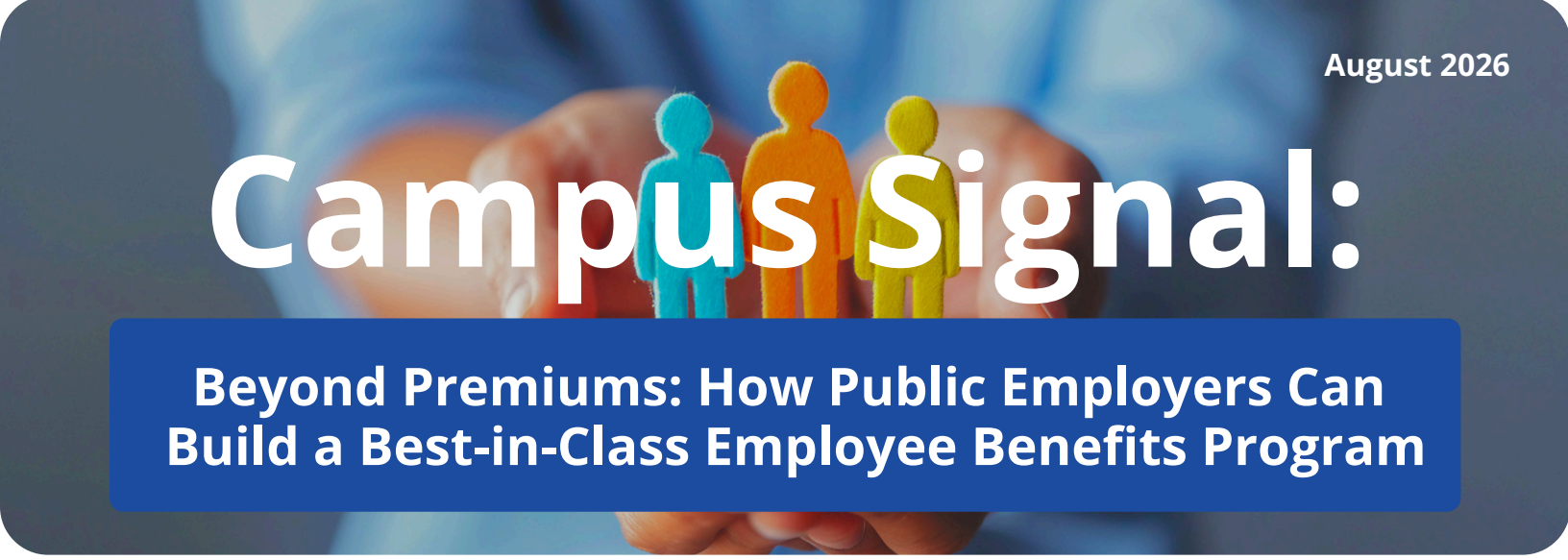

Campus Signal:

Beyond Premiums: How Public Employers Can Build a Best-in-Class Employee Benefits Program

A Strategic Guide for School Systems, Cities, and County Governments

More Than Benefits - A Competitive Advantage

Across the country, school systems, city and county governments are competing for talent in an increasingly challenging labor market. While salaries often receive the most attention, today's employees evaluate far more than their paycheck when deciding where to work or whether to stay.

Benefits have become one of the most powerful tools for attracting, retaining, and supporting employees. Yet many organizations continue to evaluate their benefits package using only one metric: "**How much did our premiums increase?"**

While controlling costs is important, premium is only one piece of the equation. A best-in-class benefits program balances affordability, employee protection, accessibility, education, and long-term sustainability. It provides meaningful financial security for employees while helping employers manage healthcare costs, improve productivity, and strengthen recruitment and retention.

The strongest public employers don't simply renew benefits each year; they continuously evaluate whether their plans are meeting the evolving needs of their workforce.

As you prepare for your next renewal, every benefit should answer three important questions:

- Does this benefit solve a real employee need?
- Is it easy for employees to understand and use?
- Does it provide meaningful financial protection when employees need it most?
- Is it easy for employees to file claims and access the benefits?

If the answer is "no" to any of these questions, it may be time to rethink your strategy.

What Does "Best-in-Class" Really Mean?

Many employers assume offering the richest plan automatically creates the best benefits package. Successful public employers focus on value, not simply cost or generosity.
A best-in-class program should:

- Provide comprehensive financial protection
- Encourage preventive healthcare
- Offer broad provider access
- Be easy for employees to understand
- Include benefits that employees use
- Support recruitment and retention
- Remain financially sustainable for the employer

When these elements work together, benefits become a strategic investment—not simply an annual expense.

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Medical Benefits: The Foundation of Your Benefits Strategy

Medical insurance is typically the largest investment an employer makes in its workforce. Choosing the right medical plan requires looking far beyond premium rates.

Provider Networks Matter
Employees should have convenient access to physicians, specialists, hospitals, urgent care centers, and pharmacies close to where they live and work. A lower-cost plan provides little value if employees must routinely travel long distances or receive unexpected out-of-network bills.

Evaluating Total Employee Cost
Instead of focusing only on premiums, evaluate:

- Deductibles
- Copays
- Coinsurance
- Prescription drug costs
- Out-of-pocket maximums
- Family cost-sharing

Sometimes a plan with a slightly higher premium saves employees thousands of dollars over the course of a year.

Invest in Prevention
The best medical plans encourage employees to receive preventive care through annual physicals, health screenings, vaccinations, and wellness programs. Healthy employees generally experience:

- Lower absenteeism
- Higher productivity
- Lower long-term healthcare costs
- Better management of chronic conditions

Look Beyond Traditional Healthcare
Many medical carriers now include services such as:

- Telemedicine
- Behavioral health counseling
- Diabetes management
- Weight management
- Nurse advocacy
- Virtual primary care

These resources improve access while helping reduce unnecessary emergency room visits.

School Systems with State-Sponsored Medical Plans
For school systems participating in a state-sponsored medical plan, opportunities to modify plan design or carrier offerings may be limited. However, that does not mean your organization cannot improve the overall employee benefits experience.

One of the greatest opportunities lies in education and engagement. Even when plan options are fixed, employers can significantly enhance the value employees receive by helping them better understand and utilize their benefits.

Consider asking the following questions:

- Do employees understand the differences between the available plan options?
- Are they selecting the plan that best fits their healthcare needs and financial situation?
- Are they aware of wellness programs, telehealth services, care management programs, employee assistance programs (EAPs), or other resources included with their medical coverage?
- Do employees know how to locate in-network providers, estimate healthcare costs, or access digital tools and mobile apps?
- Are new hires receiving the education they need to make informed benefit decisions from day one?

For employers with limited flexibility over plan design, employee education becomes one of the most valuable benefits you can offer. Helping employees understand and maximize the resources already available to them can improve satisfaction, increase utilization of preventive services, reduce confusion, and create a more positive healthcare experience. Ultimately, even if you cannot change the medical plan itself, you can still improve how employees experience and appreciate their healthcare benefits.

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Dental & Vision Benefits: Protecting More Than Teeth and Eyes

While often viewed as merely supplemental, dental and vision benefits play a crucial role in overall health by serving as early warning systems for serious medical conditions. Routine dental and annual eye exams can frequently detect severe underlying health issues such as diabetes, cardiovascular disease, high blood pressure and neurological disorders, long before other symptoms appear.

When evaluating these benefit plans, employers must look beyond basic coverage to ensure the plans provide meaningful value. Key considerations include verifying that provider networks are accessible in employees' local communities, ensuring annual benefit maximums are updated to reflect today's rising treatment costs, and selecting plans that actively encourage and remove barriers to preventive care so employees can avoid more expensive treatments later.

Life and Disability Benefits: Protecting Income and Families

Life and disability insurance provide essential financial security, protecting employees' families and their most important asset—their paycheck. While employer-paid life insurance remains a highly appreciated benefit, many organizations provide outdated baseline coverage, such as a minimal amount that fails to offer meaningful protection. Employers must evaluate whether their current life insurance offerings genuinely support families by assessing the affordability of optional coverage, competitive guaranteed issue amounts, provisions for spouses and children, and whether employees can continue their coverage if they leave the company.

Similarly, disability insurance addresses one of the greatest financial risks employees face; the loss of income following an illness or injury. Constructing a robust disability program requires a careful review of both short-term and long-term policies. For short-term disability, organizations should evaluate waiting periods, benefit percentages, maternity provisions and sick leave coordination. For long-term disability, employers must carefully review the income replacement percentage, the policy's definition of disability, benefit durations and how the plan coordinates with Social Security or retirement benefits. Both should eliminate barriers to enrollment that prevent employees from electing these valuable benefits.

Ultimately, these income protection benefits should deliver true peace of mind rather than simply satisfying a minimum requirement. By updating coverage limits and ensuring plan designs meet modern financial realities, employers can protect their workforce against life's most challenging unexpected events.

Voluntary Benefits: Closing the Financial Gaps

Even excellent medical insurance can leave employees responsible for significant out-of-pocket expenses, including deductibles, coinsurance, travel costs, and everyday household bills. Voluntary benefits are designed to help bridge these financial gaps by providing direct support when it is needed most. For instance, accident insurance offers cash benefits for unexpected injuries, covering costs associated with emergency room visits, ambulance transportation, broken bones, physical therapy, and follow-up care. Similarly, hospital indemnity insurance provides fixed cash benefits for hospital admissions, daily confinement, intensive care unit (ICU) stays and observation stays.

The funds from these plans become a lifeline for recovering employees, helping them pay for regular living expenses like mortgages, utilities, groceries, or childcare while they are out of work. Additionally, critical illness insurance provides lump-sum payments following severe covered diagnoses such as cancer, heart attacks, strokes, or organ transplants. Because employees have complete control over how to spend this money, the coverage offers vital flexibility and peace of mind during highly stressful financial and medical situations. Ultimately, the most effective voluntary benefits programs are carefully structured to complement—rather than duplicate—an organization's core medical coverage.

Similar to life and disability programs, the key to voluntary benefits is education, eliminating barriers to enrollment, and making them easy to understand.

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Benefits Education Is Part of the Benefit

Even the most meticulously designed benefits package delivers little value if employees don't understand how to use it. Unfortunately, many organizations spend months negotiating their coverage plans, only dedicating a few short days to explaining them to their workforce.

Best-in-class employers recognize that communication is critical and provides benefits for education year-round. To ensure employees fully grasp their options, organizations should offer a multi-channel approach that includes:

- Personalized Support: One-on-one enrollment assistance and access to dedicated benefit counselors
- Accessible Resources: Easy-to-read benefit guides, educational videos, and interactive decision-support tools
- Consistent Communication: Comprehensive new hire education, mid-year reminders, and ongoing engagement well beyond the standard Open Enrollment period
- Require Homework: Employees are just like students in a classroom. If you don't make some requirement to review the benefits or information provided, they may not look at it because of the demands of work and life.

When employees truly understand their benefits, they make smarter healthcare decisions, gain a deeper appreciation for their total compensation, and are much more likely to participate in valuable programs. Ultimately, successful communication benefits mean meeting your employees where they are, delivering clear, accessible information in the formats that work best for their unique learning styles and needs.

Closing Insight & Lessons Learned

The most effective benefits programs aren't necessarily the most expensive; they are the most intentional. Public employers who routinely benchmark their plans, prioritize hands-on employee education, evaluate utilization data, and challenge their advisors for proactive strategic guidance consistently build healthier organizations. This intentional approach not only improves employee retention, but also maximizes the return on every benefit dollar invested. Ultimately, when benefits are treated as a long-term workforce strategy rather than a routine annual expense, everyone wins; your employees, your leadership, and the communities you proudly serve.

If your organization struggles with recruitment, fields frequent employee complaints about provider networks, or limits benefits communication solely to Open Enrollment, your benefits package may fall behind. Stagnant limits on dental, life, and disability coverage, coupled with a narrow focus on renewal premiums rather than strategic benchmarking, are strong indicators that a comprehensive review is needed. In contrast, leading public employers avoid these pitfalls by adopting a proactive, continuous approach to their benefits strategy.

10 Questions Every Employer Should Ask Their Broker at renewal

Your annual renewal should be a strategy meeting—not simply a pricing discussion.

1. How does our benefits package compare with similar school systems or local governments?
2. What trends are you seeing in the public sector benefits market?
3. Which benefits are employees actually using—and which are underutilized?
4. Where are employees experiencing the greatest out-of-pocket expenses?
5. Are our provider networks still meeting employee needs in every geographic area?
6. What plan design improvements could increase employee value without significantly increasing costs?
7. What legislative or compliance changes should we prepare for over the next year?
8. How are we measuring employee satisfaction with our benefits program?
9. What communication strategies could improve employee understanding and participation?
10. If this were your organization, what changes would you recommend and why?

A strategic broker should answer these questions with data, benchmarking, and practical recommendations, not simply renewal spreadsheets.

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BENEFITS SCORECARD

Use this checklist during each renewal to evaluate whether your program is keeping pace with today's workforce and providing the level of service your organization deserves.

Evaluation Area	✓
Core Medical & Preventive Health	
Strong medical provider network with broad local access	☐
Competitive deductibles and out-of-pocket limits	☐
Plan explicitly encourages and removes barriers to preventive care	☐
Specialty & Specialty Care	
Strong dental and vision provider networks	☐
Meaningful dental annual maximums that reflect current treatment costs	☐
Income & Family Protection	
Employer-paid life insurance provides adequate financial protection	☐
Affordable supplemental life insurance options available for families	☐
Short- and Long-Term Disability plans adequately replace income	☐
Voluntary benefits (accident, hospital, critical illness) fill financial gaps	☐
Strategic Management & Industry Benchmarking	
Benefits are benchmarked against similar employers and industry trends	☐
Programs are continuously evaluated and updated proactively as trends shift	☐
Employee utilization and satisfaction are formally reviewed annually	☐
Hands-On Education & Support (The Gold Standard)	
Employees receive hands-on education year-round (in-person, online, and by phone)	☐
Benefits materials are provided in both high-quality print and digital formats	☐
Employees have direct access to claims experts to help file and escalate complex disputes	☐
Broker acts as a true strategic partner, offering regular compliance and legislative updates	☐