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# global inclusive benefits

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Workforce Turnover Around the World



Worldwide Benefit & Employment Guidelines

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# Introduction

## Health and benefits equity to achieve a more sustainable world

Although diversity, equity and inclusion (DEI) has largely become non-negotiable, inclusive benefits that address the needs of a diverse workforce are becoming more relevant and will continue to in the coming years. The growing relevance is in part due to the pandemic that has exacerbated disparities as well as racial injustice which has prompted organizations to rethink their approach to DEI, and the increased focus on environmental, social and governance (ESG) or sustainability policies.

How can people thrive on and off the job if their work environment is not inclusive? With benefits a key component of the employee experience, the way health, risk protection and well-being benefits are designed and delivered can play a key part in enabling the desired workplace culture and employer brand. Organizations must adapt to attract and retain a workforce and customer-base that expects them to become accountable for equity and equality both internally and externally.

## Are your health and well-being approaches inclusive?

Many traditional benefit plans assume a linear life pattern, where an “average” employee gets married, buys a home, raises a family and retires. Health and well-being benefits often fail to take into account race, ethnicity, sexual orientation, gender identity, income, or country of origin, among other dimensions. Health, risk protection and well-being benefits offered to employees — including provisions for areas like mental health, paid time off and caregiving — are far behind the reality of a diverse multifaceted workforce. Organizations should adapt their benefit plans and introduce benefits that are designed to support all employees, including people of color, women, LGBTQIA+ individuals, veterans, immigrants (including refugees and migrant workers) and people with disabilities.

As a first step, it is important to start understanding the baseline situation in each country, as well as the regulatory framework and socio-cultural constraints.

The combination of market practice employer-sponsored benefit plans and government provisions may not meet employee needs. Existing coverage under medical, risk, leave and retirement plans should be checked to ensure it is still fit for purpose, and also investigate government programs in the relevant locations. This exercise can ensure access and quality of care, while optimally allocating costs and resources where they are needed most.

## An inclusive approach is a business imperative

An inclusive benefits strategy supports a multitude of business objectives. Businesses that fail to acknowledge the increasing diversity of the workforce risk perpetuating the inequality of outcomes for their employees and their families. By ignoring the issues and opportunities that exist, not only will firms miss the benefits of a diverse and inclusive workforce, but they also face increased risks in areas such as talent management, reputation and benefit cost escalation stemming from downstream impacts of unmet needs. It is important to ensure that all employees have access to benefits that truly benefit.



## Next steps

Although 81% of employers are focused on improving diversity, equity and inclusion, only 38% of businesses actually have a multi-year strategy in place to achieve this. For employers wanting to lead the way on inclusive benefits, Mercer Marsh Benefits suggests the following approach:

- **Assess gaps in current benefits:** Identify priority segments of the employee population (e.g., LGBTQIA+ individuals and people with disabilities), themes (e.g., mental health and caregiving) and geographies as well as assessing gaps under their current benefit plans taking into account public provisions.
- **Define and uphold minimum standards:** Set a clear internal bar across the organization aligned to a DEI strategy that considers employee needs, legal risk tolerance, cost and operational resources by defining global guiding principles and minimum standards. Guiding principles provide a framework for deploying benefits locally. Minimum standards outline the minimum benefits to be provided globally based on best practices and evidence-based clinical information.
- **Design a universal strategy:** Develop a plan for deploying minimum standards consistently across the organization including developing a roadmap and engaging senior leadership as well as other key stakeholders.
- **Challenge the status quo:** To avoid waiting too long to close gaps, encourage internal decision-makers as well as external advisors, vendors and insurers to be creative in addressing disparities as traditional insurance approaches are insufficient.

# Report structure

The **2021 Global Inclusive Benefits: Global Findings** report provides insights into the development and structure of health and wellness benefits in 30 markets, with a key focus on how this impacts minority and underrepresented groups.

This report captures data on employer-sponsored supplemental benefits, public provisions and feasibility of implementing or enhancing inclusive benefits:

**Supplemental benefits:** Market data on employer-sponsored supplemental inclusive benefits based on survey responses including prevalence of providing inclusive benefits, employer reasons for not providing inclusive benefits (cost, lack of knowledge of how to implement, lack of vendors or carriers with capabilities to deliver or other reason) and assessment on level of gaps/disparities.

**Public provisions:** Coverage, access and quality of care under the public healthcare system or government schemes based on qualitative analysis conducted by Mercer leveraging proprietary Mercer research; local Mercer/Mercer Marsh Benefits expertise; government information; publicly available data; and research and analysis published by leading academic, intra-governmental and nongovernmental institutions such as the World Economic Forum, OECD, the World Bank, the United Nations and others.

**Feasibility:** Feasibility of implementing or enhancing inclusive benefits under supplemental benefit plans based on market capabilities (e.g., providers, innovative solutions, etc.), potential costs, availability of various financial vehicles, legal and tax regulatory framework.

The report is divided into two sections:

- **Detailed overview:** This section covers supplemental benefits based on survey responses from Mercer's 2020/2021 Global Inclusive Benefits survey, public provisions and feasibility to implement inclusive benefits in the profiled markets.
- **Summary overview:** This section covers supplemental benefits based on Mercer experience, public provisions and feasibility to implement inclusive benefits in the profiled markets. It includes insights on the level of coverage under supplemental benefits plans based on Mercer experience and additional details on the public healthcare system, social provisions as well as the legal and socio-cultural context of each country.

# Global overview

## Scoring key: Inclusive benefits gaps/disparities

The analysis of the benefits included in this report are categorized based on the following rating system.

Rating	
● <b>Low gap/no gap</b>	<ul style="list-style-type: none"><li>• Inclusive benefits are fully covered or are adequately covered.</li><li>• Benefits provided through the public healthcare system or government schemes with a perception of good access, quality of care and affordability.</li></ul>
● <b>Medium gaps</b>	<ul style="list-style-type: none"><li>• Inclusive benefits are partly covered.</li><li>• Benefits are partly covered under the public healthcare system or government schemes, however there may be some gaps in terms of out-of-pocket costs, quality of care, facilities that provide treatment and waiting times impacting access to care.</li></ul>
● <b>High gaps</b>	<ul style="list-style-type: none"><li>• Inclusive benefits are not covered or provided with very limited cover.</li><li>• Benefits not provided through the public healthcare system or government schemes or provided with very limited coverage.</li><li>• There are significant barriers for accessing care including very long waiting times, low quality of care, limited to no facilities that provide treatment/care, limited specialists, no supply of treatment, etc.</li></ul>
● <b>Information not available</b>	<ul style="list-style-type: none"><li>• Benefit information not provided/available.</li></ul>

# Summary: Inclusive benefits global landscape

## Detailed overview

Market	Supplemental benefits	Public provisions	Feasibility*	Overall rating
Market	●	●	●	●
Market	●	● ●	● ●	●
Market	●	●	●	● ●
Market	●	● ●	●	●
Market	●	●	● ●	●
Market	●	●	●	●
Market	●	● ●	● ●	●
Market	● ●	● ●	● ●	● ●
Market	● ●	● ●	●	● ●
Market	●	●	● ●	● ●
Market	●	●	●	● ●
Market	●	●	● ●	● ●
Market	●	●	●	● ●
Market	●	●	●	● ●
Market	●	●	●	● ●

Rating

●

High gap

●

Medium gap

●

Low gap/no gap

\*Feasibility of enhancing/implementing inclusive benefits



## Summary overview (based on Mercer experience)

Market	Supplemental benefits	Public provisions	Feasibility*
Market	●	● ●	●
Market	● ●	●	●
Market	● ●	●	●
Market	●	●	● ●
Market	●	●	●
Market	●	●	●
Market	●	● ●	● ●
Market	●	●	●
Market	●	●	●
Market	● ●	● ●	●
Market	●	● ●	● ●
Market	●	●	●
Market	●	●	● ●
Market	●	● ●	●
Market	● ●	● ●	● ●

\*Feasibility of enhancing/implementing inclusive benefits

**Rating**

- High gap
- Medium gap
- Low gap/no gap

# Market overview

# Market

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Benefit	Employer provision	Main reason for not providing
Preventative healthcare	Very common	Cost
Pregnancy-related care	Very common	Cost
Chronic conditions	Very common	Data not available
Transgender care	Somewhat common	Covered by social security/do not know how to implement
Cover for HIV/AIDS	Common	Covered by social security
Services for physical disability	Common	Covered by social security
Cover for sensory disability	Common	Covered by social security
Cover for mental health	Common	Covered by social security/cost
Cover for autism	Common	Covered by social security/cost
Inclusive family planning	Somewhat common	Cost

\*Feasibility of enhancing/implementing inclusive benefits



Overall rating



Supplemental benefits



Public provisions



Feasibility\*

Benefit rating



# Market

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**Supplemental benefits**



**Public provisions**



**Feasibility\***

\*Feasibility of enhancing/  
implementing inclusive  
benefits



about this

# report

# Methodology

This section provides information on the methods of collecting, collating, and analyzing data for this publication.

## Data collection

Data contributions for this publication were made by Mercer/MMB D&I consulting teams with local expertise. In addition, data were collected from the following primary data sources:

- Mercer's Global Inclusive Benefits Survey
- Mercer's Worldwide Benefit & Employment Guidelines
- Mercer's Global Talent Trends Survey

## Data analysis

### Scoring key ratings system

The following ratings system was used to identify the level and quality of benefits provision relating to each market.

Rating	
<div></div> <b>Low gap/no gap</b>	<ul style="list-style-type: none"><li>• Inclusive benefits are fully covered or are adequately covered.</li><li>• Benefits provided through the public healthcare system or government schemes with a perception of good access, quality of care and affordability.</li></ul>
<div></div> <b>Medium gaps</b>	<ul style="list-style-type: none"><li>• Inclusive benefits are partly covered.</li><li>• Benefits are partly covered under the public healthcare system or government schemes, however there may be some gaps in terms of out-of-pocket costs, quality of care, facilities that provide treatment and waiting times impacting access to care.</li></ul>
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<div></div> <b>Information not available</b>	<ul style="list-style-type: none"><li>• Benefit information not provided/available</li></ul>

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