

HEALTH & PROTECTION

HOUSE OF LORDS ROUNDTABLE REPORT

July 2024

healthcareandprotection.com



INTERNATIONAL PRIVATE MEDICAL INSURANCE: COLLECTIVE RESPONSIBILITY

IN ASSOCIATION WITH



INTRODUCING OUR PANEL



John Kaye,
group sales director,
UnitedHealthcare Global



Joe Thomas,
managing director,
April International UK



Linda Beavis,
global leader - mobility health
solutions for multinationals, Aon



Jonathan Hill,
UK manager,
Pacific Prime



Dave Hilton,
multinational global mobility solutions
leader UK, Mercer Marsh Benefits



Richard Leadon,
senior international consultant, Howden
Employee Benefits & Wellbeing



Chantal Leprêtre,
client adviser,
SIP Medical Family Office



Vera Mira,
vice president for global benefits at
Globally Mobile Employee Centre of
Excellence (Americas), Aon



Kshama Patel,
director,
Goldstar Healthcare



Penny Pemberton,
head of international benefits,
Engage Health Group



Matthew Shaw,
international sales consultant,
NFP International



LEADING THE WAY THROUGH COLLABORATION

The nation's leaders may have been out of Parliament due to the impending general election, but those at the forefront of international private medical insurance (IPMI) were present for Health & Protection's first roundtable at the prestigious House of Lords.

The event brought together leaders from the market to discuss the key issues and how they are impacting the sector.

Our panel of industry experts also reflected on Health & Protection's latest IPMI Report and Service Ratings published two weeks earlier giving a data-led examination of the market.

The discussion that ensued was worthy of the setting with a detailed exploration of what is making advisers, insurers and most importantly clients' lives tick.

It is clear the demands of globally mobile populations have shifted significantly over the last few years – among individuals and employers alike.

Markets, operations and client needs have become increasingly complex as the historic tradition of the medium-to-long-term expatriate placement, while not extinct, has become far rarer.

This growing complexity however brings with it a rising need for expert support, indeed the panel argued that quality advice has never been so necessary in the sector.

No longer is it purely for health-related issues that intermediaries must support their clients, with risk and protection benefits becoming more important as part of an all-encompassing system.

Complexity is also driving the need to work collaboratively to find solutions, with open communication between providers, advisers and clients an ever-increasing necessity.

Ultimately, it is those firms and their teams which can be dedicated and flexible enough to address the complex and evolving requirements with speed and skill that will likely meet the service levels demanded in the industry today.

Owain Thomas, editor of Health & Protection

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One of the most notable trends from Health & Protection's annual international private medical insurance (IPMI) report was the overwhelming level of positivity around the market.

This was one of the key subjects tackled by our roundtable panel who agreed there was lots to be positive about, particularly in some industry sectors and locations, but also questioned the source of some growth seen by intermediaries.

And the panel recognised demands placed on intermediaries and insurers were becoming increasingly complex with the need for advice and timely service never being so great.

"I'm slightly sceptical as to how much growth is actually just from premium growth," said Mercer Marsh Benefits multinational global mobility solutions leader UK Dave Hilton.

"We'll talk about costs and inflation and how much of it is actual growth and expat numbers, and that is very different when you speak about different industry verticals.

"On the flip side, post-pandemic it's more challenging, people expect more, people are more reluctant to go overseas, so while the expat group probably isn't as large as we want it to be in all areas, the demand for our support is more than it ever has been," he added.

Hilton noted due to these changes advisers were seeing a much different risk presented by clients and were having to adapt.

"We're not seeing quite as much expat growth, but we're seeing remote workers, hybrids, people who want local-plus cover, which means we have to work a little bit harder, we have to innovate a little bit more," he added.



ADVISERS AND INSURERS IN THE SPOTLIGHT AS MOBILITY SHIFT DRIVES IPMI COMPLEXITY

Growth in the IPMI market may not be coming from pure expat numbers, but it is driving insurers and advisers to find the right answers for increasingly complex questions **Owain Thomas hears**



Aon global leader - mobility health solutions for multinationals Linda Beavis agreed there were a variety of reasons for growth coming into the market.

"I don't think every industry is still growing their expats and obviously the costs restrict some industries on sending people overseas," she said.

"But where you've got certain industries where they need to send people overseas like engineers, where you've got a mass influx into somewhere like Saudi Arabia, then you're going to have growth in the market.

"We're also all going to see growth in premium just because costs are going up



Linda Beavis

as well, so that is driving growth in the market."

EQUITY OF BENEFITS

Beavis recognised and expanded on reasons for the increasingly complex advice process, highlighting the growing role of local nationals.

"One area is around health equity and the demand we're getting from companies where they've got key local nationals that are asking for higher benefits," she continued.

"They are asking why they are sat next to this person doing the same job who's got more benefits than them just because one's an expat and one isn't.

"So that is causing requests for more advice and innovative solutions."

Despite being more than four years since the initial outbreak and two years since it eased significantly, the shadow of the Covid-19 pandemic is still impacting the industry.

For some employers and employees and in many parts of the world Covid's impact remains very much front-of-mind.

There are also many national healthcare systems which are feeling significant strains with long waiting lists and restrictions on treatments, causing a greater appraisal of private options for expats.

Engage Health Group head of international benefits Penny Pemberton highlighted this as being a key concern for clients.

"You've got the local healthcare systems

in many parts of the world failing so obviously people are therefore looking for more top-up solutions, better equity of benefits across the world, and more simplicity as well," she said.

"HR teams don't have a lot of time on their hands so they desperately need to get some sort of simple solution covering multiple locations as much as possible, and that moves away from traditional expats."

LOCAL SOLUTIONS

This approach and growing demand for more local-national solutions was echoed by several members of the panel, bringing their experiences from around the world.

Goldstar Healthcare director Kshama Patel highlighted that local demands and solutions were becoming more important for her clients too.

"In Africa, for example, after Covid a lot more local companies are interested in buying top-ups or better-quality care because quality care is not available locally," she said.

"As a result, they want to make sure their workforce is looked after and they don't want to send them abroad for treatment.

"They want to make sure they're treated locally and they want better quality, higher-priced products."

Vera Mira, Aon vice president for global benefits at Globally Mobile Employee Centre of Excellence (Americas) has witnessed the same trends developing.

"We've been seeing a decrease in headcount on the IPMI schemes on our book of business," Mira explained. ►



Kshama Patel



Vera Mira
(centre)



Chantal
Leprêtre

“What we’ve been seeing is a lot of the local employers, if there was a huge population in the Middle East, for example, they’ll look at the local plans there and implement one because it’s more cost effective to them as opposed to IPMI.”

Likewise, Matthew Shaw, international sales consultant at NFP International, noted that most of the growth his team witnessed was not from increasing numbers of expats but changing client requirements.

“Again, it’s what we talked about having a more comprehensive local solution and definitely piggybacking on that side of things,” he said.

“Businesses that want to try and differentiate themselves post-pandemic, that are looking to recruit and retain staff.

“There’s a mixture of businesses that are moving purely to an IPMI solution away

from a local one, or they’re moving to a position where they offer IPMI for senior employees and then perhaps a buyer option for everybody else.”

POCKETS OF GROWTH

Regulation as always remains a key influence on the IPMI market, driving changes in mobile populations, employers, insurers and healthcare providers around the world.

One of the most high-profile changes in the last five years has been the UK’s departure from the European Union.

While Brexit has been recognised as significantly harming the UK economy as a whole, there have been pockets of industries still seeing activity growing, explains SIP Medical Family Office client adviser Chantal Leprêtre.

“My experience is predominantly with the French and London; pre-Brexit and even post-Brexit I’ve seen that is still growing,” she said.

“A lot of people, especially bankers and the finance sector, have been moved elsewhere in Europe.

“But in my clients there is still a large number of French people, especially in the finance and technology industries, coming to the UK.

“That’s really where I’ve seen the growth has continued; even if there’s been a bit of movement in both directions, it hasn’t slowed the influx of French people to the UK.”

These pockets of growth in particular industries were highlighted by Pacific Prime UK manager Jonathan Hill, who also cited

engineering as being one excellent example, with the same applying to locations.

“There’s still a lot of key hubs around the world which seem to be going through a bit of a resurgence too,” he said.

“China is finally starting to pick up again following the pandemic - that was a really slow recovery.

“Dubai also continues to go from strength-to-strength, perhaps with those remote nomadic workers because it’s that desirable location with lots of sunshine.

“But certainly from these locations we’ve seen an increase.”



Matthew
Shaw



SUPPORTING REWARD TEAMS

However, Hill added that the need for good advice was as important as ever, if not more so.

"I would say these time-poor reward teams are doing a lot more research into how their benefits are set up at the moment," he continued.

"Traditional IPMI clients want to understand what it looks like on the other side of the fence, so they're exploring it as well in a cost-contained world."

These increasing demands on intermediaries were also recognised by Howden Employee Benefits & Wellbeing senior international consultant Richard Leadon, who noted giving the right advice was "getting tougher and tougher".

"We're finding there isn't an insurer that can be in every single country that works for all the expats," he said.

"So that's a challenge in itself, the biggest challenge we're seeing really is around regulation and the different countries.

"It just makes it more difficult to do the business we want to do with clients and give them the right advice."

INSURTECH BLURRING MARKETS

For insurers, the challenges are coming on many different fronts – in designing products to meet the changing waves of globally mobile populations, serving people in different ways, and tackling new entrants to the market looking to make their own mark with technology at the fore.

As April International UK managing



John Kaye and Joe Thomas (right)



Richard Leadon

director Joe Thomas explained: "We're being challenged more on cost and we're seeing a lot more insurtech startups coming, where it's almost a hybrid between a travel and IPMI product.

"So we have to almost justify the traditional IPMI position when you're double the price of an online digital solution that looks to tick the boxes.

"It's not until you delve into the fine print that you find there are limitations, but on price alone, it becomes very attractive.

"That's probably one of our challenges on the individual side particularly, where traditional expats are not relocating on a permanent basis, they are thinking that for 12 to 18 months it will be okay, and the challenge we're facing is to almost justify the traditional IPMI product."

SERVICE DELIVERY

These developments are not solely

restricted to the individual IPMI market however.

UnitedHealthcare Global group sales director John Kaye agreed that some of these newer insurtech solutions may not satisfy everyone's requirements, but might have a niche.

"If they're going in with an expectation of utilisation rates for travellers of around 15% to 20%, and then all of a sudden you've got expats which is probably 75% to 85% of people claiming, and multiple times a year, the service delivery doesn't work," he said.

"It works for certain, more transient, more temporary of these new populations, but we still need all those things for your true expat, and do we need to bake all of those in for all the populations?"

"That's the challenge and who's best at serving that – is it travel insurance moving upwards or is it us downwards.

"And that's where even within populations you probably got some that are probably fine, those three-to-six month people."

The panel also suggested data was beginning to show temporary remote workers may have peaked, as employers were aware arrangements were more difficult than perhaps they were originally prepared for.

Rights to work, visas and the ability to have employees within their duty of care are all critical issues to address before even considering benefits and healthcare.

Many organisations woke up after the pandemic with employees in double the countries and after finding a computer and a phone for them then started addressing their other needs.

As a result it is now a work in progress for many employers, learning as they go, which adds to complexity for advisers and providers. ■

Jonathan Hill
(second from left)



Relationships are at the heart of keeping an industry such as the IPMI sector working smoothly where the end result is ensuring people's health is being taken care of.

Advisers and providers alike at Health & Protection's House of Lords roundtable agreed that collaboration supported by putting quality service and the personal touch together can make all the difference for clients and working relationships.

When asked what worked well in their experience to create and maintain strong business relationships between advisers and providers there were several elements.

Goldstar Healthcare director Kshama Patel highlighted the need for all firms to be treated equally.

"A level platform with providers giving all brokers the same sort of treatment is important," she said.

Howden Employee Benefits & Wellbeing senior international consultant Richard Leadon added: "For me it's speed of response; clients in a digital world expect answers straightaway.

"If you're working with an insurer that's very responsive and you can then relay that back to the client that's brilliant for us and it's brilliant for the client.

"So that communication speed is important."

And having spent almost 25 years working for insurers before joining Howden at the start of the year, Leadon reflected that his experience from both positions was a benefit shared across the industry.

"I think a lot of us will work on each side



Kshama Patel

FINDING THE RIGHT BLEND CRUCIAL FOR RELATIONSHIPS AND SERVICE LEVELS

Open, collaborative cross-industry conversations help keep the IPMI market running but there are still lessons for insurers and advisers to learn, **Owain Thomas**



of the fence, which goes a long way," he continued.

"We know what the other person's feeling, what they're going through, and then you can work together to get a solution."

COLLABORATION AND COMMUNICATION

This willingness to collaborate and work together to solve problems and reach a satisfactory solution was widely recognised as a vital part to smooth operations.

A regular cadence of communications, talking to each other regularly and understanding propositions all go a long way to building bridges.

As part of this, Engage Health Group head of international benefits Penny Pemberton highlighted that inviting everybody to the party was a vital factor - insurer, client and adviser.

"Then everyone can understand what needs to be done," she said.

"I know it's not always practical and there's sometimes the adviser-insurer only relationship or advisor-client only relationship is the solution, but getting everybody around the table and discussing the issues has worked for me in the past."

That tripartite relationship can help advisers to understand insurer underwriting challenges or issues and considerations they are facing with healthcare pricing which can then be relayed back to the client.

Likewise it works in reverse where intermediaries can explain what clients are looking for, how they are wanting to address their situation and the pressure advisers can be under to find solutions quickly.

Regular visits between teams were also cited as being able to bring all those issues to life a little more, improve understanding and create better outcomes for clients.

UnitedHealthcare Global group sales director John Kaye emphasised the importance of the collaborative approach for providers too.

"It's better when it's collaborative because when the context behind some of those requests is understood, it's not sometimes as easy as thinking providers should just do more," he said.

"Whether it's a price increase or a decline or we've excluded some people or even a complaint about a claim that didn't get paid, it just needs dialogue and transparency."

COMPLEX CHAIN OF COMMAND

And these elements also showed through into Health & Protection's IPMI Service Ratings as the panel discussed what the key elements they were looking for when comparing and rating provider service.

There was agreement that service and different factors could vary a lot depending on the provider but in general members tend to be well looked after and their claims processed efficiently.

However, as Engage Health Group's Pemberton explained: "Sometimes it falls down on the corporate level speed of response.

"Clients do seem to expect turnaround time very quickly and there can be a chain of command that especially some of the larger insurers have to go through to provide information, which can take a lot of time and cause delays.

"But generally from the claims side it's been very positive, unless I've just been



Dave
Hilton

lucky?"

Mercer Marsh Benefits multinational global mobility solutions leader UK Dave Hilton suggested insurers went through cycles in their service performance.

"Some of those cycles probably depend on where they are in their growth trajectory as a business," he said.

"Those probably on a higher growth phase dip at times it's fair to say, I think that's just business, but I agree generally it's good and insurers are supportive.

"Having a market where we know people are quite open, we're having conversations and that helps a lot, and access to senior stakeholders which we probably wouldn't have so much of in a bigger saturated domestic market, is useful.

"Managing expectations helps a lot with this and actually a lot of the processes there are very good."

TAKE RESPONSIBILITY

However, Hilton argued that advisers and clients needed to take some responsibility for helping to reduce provider workloads and therefore improve overall service levels.

"A lot of clients just don't listen or are poorly educated by us or by their HR team and if they don't know where to go, sometimes that translates to poor service, where actually there isn't," he continued.

"There is something of a big role for both sides to play, to educate in the right place, to run enablement sessions, to keep as many touch points as we can together, and that naturally will improve and maintain the service levels where they should be."

Grounding clients at the start of their relationships, particularly for high net worth customers can also be an important point for intermediaries to focus on, particularly where they may have exaggerated ►



expectations.

"It may be very easy to just say 'yes you'll get everything' and they probably will from a benefits perspective, but I think they need to understand from the outset there are some things that they have to do, particularly with some insurers, otherwise it just all spirals out of out of control," Hilton added.

The value of good people was also raised and how they can fix problems quickly and efficiently.

"Insurers can live and die by their account managers," said Linda Beavis, global leader - mobility health solutions for multinationals at Aon.

"If they've got really good account managers, it makes people's lives so much easier and if they've got really average or below average then that can really be a trial to deal with.

"The really good ones are good at responding - even if they don't have the answer, at least they acknowledge that they're working on it, that they're actually dealing with it rather than just ignoring you so you don't know what's happening, which is one of the most frustrating things.

"They're also good at the education piece, good at talking to clients and you can have the tripartite meetings so they can explain to the client how they work, what they can do and what they can't do, so they're clear on setting the expectation.

"And they can have that conversation around the renewal; that ability to tell the story around their renewal and understanding their own product can be

really lacking, so it really makes a huge difference if you've got good account managers."

'REAL TELLTALE SIGN'

The more routine or mainstream client pathway should not be neglected however, and Pacific Prime UK manager Jonathan Hill suggested this could be the truer sense of how an insurance provider operated.

"When I'm judging the ability of our insurance partners, I probably do so more of their ability to handle individual and family clients, because I have a bigger expectation over an SME or a corporate client," he said.

"We have good account managers who



John Kaye

make all the difference and they look up to you when something is escalated.

"But when we're talking about that market segment without an account manager assigned and they are going through the general system where someone's not going to pull it out and prioritise it, that's an interesting journey.

"Those individuals are still high net worth, they could be paying \$20,000 a year for their insurance, but they're going down this standard insurance channels, and that is a real telltale sign of how well it works without the need of an account manager pulling it out the pile and fixing it."

IMPORTANCE OF TECHNOLOGY

One of the more practical and routine issues raised by the panel that could improve the way advisers work was the process of gathering quotes from insurers and providers.

Typically these are received through pdf files but often advisers compile these together into spreadsheets to present to clients alongside benefit lists, triggering a lot of work and the headache of transferring data from one format to another.

Providing quotes in a spreadsheet to simplify and speed-up this process was highlighted as a potential quick win and as particularly important where insurers include many different benefits as part of their core offerings.

As UnitedHealthcare Global's Kaye acknowledged, technology can be a vital part of a provider's offering but it is also about getting the right model for the insurer and the market concerned.

"We don't do individual business so we don't have technology to support the distribution, pricing and quoting on the corporate and SME side because we bring those together under a client manager," he said.

"It's much more a consultant-client manager relationship and that's the priority for us.

"One of the things we scored low on in the service ratings was technology for brokers because we don't have any at the moment.

"If you're in that individual distribution space then you're going to need to be a lot more immediate to service that quote, you don't have the same five or six-day turnaround.

"So the priority with us is in the people and I think will continue to be for a little while," he added. ■

APRIL INTERNATIONAL PREPARING TO MEET ADVISER DEMAND FOR GLOBAL RISK ENTRANTS

April International reveals it is preparing to launch into the risk benefits market as advisers lament the paucity of offerings available at present, hears **Owain Thomas**

April International is poised to answer advisers' calls for more providers to enter the global risk benefits market with a launch targeted in the third quarter of 2023.

Its plans were revealed as the issue was raised by the adviser panel at Health & Protection's international PMI House of Lords roundtable as one of the key issues they face meeting client needs.

"Talking products and challenges for advice firms, we really struggle in the life and disability market," said Mercer Marsh Benefits multinational global mobility solutions leader UK Dave Hilton.

"To be honest, it's in dire need of investment and competition, but it's also very profitable.

"There's a real opportunity either for someone to step up and do better or another provider to come in, though I appreciate it might not be in everyone's strategy.

"I was really excited to hear Andrew Wilkinson from Moneysworth speaking at the IPMI Summit but the outcome in the individual market was that there was a solution from AIG, it's now gone and there's pretty much none.

"It's just really lacking; so that's a massive challenge and it's one for the provider market too."

WIPE THE FLOOR WITH COMPETITION

The desperation of the situation was backed-up by Aon global leader - mobility health solutions for multinationals Linda Beavis who noted this was a worldwide



Penny Pemberton

problem.

"I would absolutely second that, we have that problem in every market around the world," Beavis said.

"There is no region where you've got a really good risk market and for the providers that we do have, there are definitely some challenges with some of them.

"It's a shame because if you had one that really just got their act together, they could wipe the floor with everybody else."

The issue spans across the protection insurance product spectrum including life insurance, critical illness, income protection and accidental death and dismemberment (ADAD).

Likewise, there are specific issues in countries to meet the needs of their

populations, for example in Australia income protection is higher profile than life insurance, while in the UK it is reversed.

And clients seeking higher value cover can be particularly restricted.

Engage Health Group head of international benefits Penny Pemberton explained: "I find with insurers on the international market, especially for clients that have been used to the UK-based life solutions, the benefit is not sufficient in terms of the maximum that can be insured.

"That is especially for executives and higher net worth people who are looking to have £4m or £5m in life cover.

"There's just very little choice and it definitely needs investment and more products coming in."

Overall, there was a feeling from the panel that intermediaries were left unable to advise on the whole product suite necessary and the market was missing competition.

Attendees agreed that any competitive new entrants or revitalised existing propositions would be warmly welcomed and stood a good chance of securing significant volumes of business.

DEVELOPING SOLUTIONS

However, they were pleasantly surprised when April International UK managing director Joe Thomas declared the firm's plans for the sector.

"The risk market is on our radar, we are developing some solutions," Thomas said.

"It's not happened as quickly as we wanted to, but we're fully aware there isn't the level of variety and competition on that on an international scale - and the ones doing it, some are doing it better than others."

Thomas also highlighted the benefits that could come to providers in IPMI business by having a well-rounded risk proposition.

"That was one of the plus points Global Benefits Group brought to the table, they were doing a lot of risk," he continued.

"It brought them to the table and a lot of opportunities where by default they would pick up the medical insurance and the risk.

"So we definitely think there's an opening there and we would like to be in a position probably by Q3 this year to have our life and disability products live for those individuals."

Thomas added that the products are likely to be available for all its global markets except Switzerland and the United States of America, but did not give many other details. ■



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UNLOCKING GROWTH: MEETING CLIENT NEEDS AMID RISING COSTS AND MARKET CHANGES

Joe Thomas, managing director, APRIL International UK



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PRIL International is an award-winning international health insurance provider that delivers flexible and

personalised solutions to its members across the globe. Joe Thomas, managing director, APRIL International UK, shares his thoughts on some of the most pressing issues facing our industry.

CORPORATE OUTLOOK AND MARKET EXPANSION

There has been real growth in the international health insurance market in recent years, which has been underpinned and driven by a range of factors, such as an increasingly diversified audience.

Groups like digital nomads, high-net-worth individuals (HNWIs) and frequent travellers have seen an increased presence in this market.

The rise in popularity of fixed-term work contracts is also driving demand for short-term international medical insurance.

Another factor contributing to this include individuals choosing to live abroad temporarily before committing to a permanent relocation.

Popular destinations include Europe and some countries in Asia, such as Thailand and Singapore.

The Gulf region, particularly across the United Arab Emirates, Qatar and Saudi Arabia are major hubs for expats.

These locations offer attractive job opportunities in sectors like finance, technology, and hospitality, alongside tax-free income and the appeal of a luxurious lifestyle.

Africa, with its emerging markets and growing economies, is also becoming appealing to expats.

MEETING CLIENT DEMANDS

Feedback from both brokers and clients

indicates that market needs are evolving.

An increasingly digitised approach can enhance efficiency and streamline healthcare access and support.

However, it's crucial to retain the human element, as medical care is often a deeply personal issue requiring sensitivity and tact at the point of delivery.

Today, globally minded people are looking for policies that include not only traditional offerings such as outpatient and hospitalisation cover, but preventative care benefits and mental health support, which are becoming increasingly important.

The value of telehealth services meets an expectation for quick healthcare solutions from a global client base.

These offerings are especially beneficial for those living in remote locations across the world where they might not live close to a medical facility, enabling them to seek a medical diagnosis when needed in their time zone.

Leveraging technology to better assist customers is crucial for any provider's strategy.

APRIL International's technological solutions, such as our award-winning Easy Pay Card and the Easy Claim app, simplify access to healthcare by offering members innovative features and ensuring a superior customer experience.

To maintain market leadership, providers need to evolve and keep pace with the times.

Regular product reviews and updates mean that a provider's offerings remain relevant and appealing.

This incorporates developing new products to meet regional demands and adhere to regulatory compliance requirements.

Having a direct, on the ground presence helps providers stay attuned to local trends and feedback, which can then be

integrated into future product and service development.

MANAGING COSTS IN THE FACE OF RISING HEALTHCARE INFLATION

Medical inflation is one of the industry's biggest concerns, and a subject we pay great attention to.

Providers must actively be seeking ways to limit costs and keep premium increases sustainable. But they need to be careful to balance this with the responsibility of charging appropriate rates based on risk profiles and locations.

A network of international offices can give a better understanding and control of hospital networks.

In some countries, healthcare operates primarily as a business, often unregulated in terms of pricing which can lead to practitioners overcharging or recommending unnecessary treatments to extend hospital admissions.

Medical data can play a significant role in supporting members across the world in balancing the most suitable treatment with a fair price.

Larger and more established providers, such as APRIL International, have in-house teams of medical experts who are crucial in supporting cost containment.

They can challenge healthcare providers to ensure treatment plans are appropriate for members.

This approach means that medical inflation is managed effectively, keeping premiums affordable while maintaining high standards of care for policyholders. ■





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MEETING INCREASINGLY COMPLEX NEEDS IN A RAPIDLY EVOLVING MARKET

John Kaye, group sales director, UnitedHealthcare Global



Greater complexity at smaller scale schemes is bringing advisers and insurers closer together to meet client needs, says UnitedHealthcare Global group sales director John Kaye.

The evolution of global mobility populations and patterns is further driving the sector's development, Kaye explains in this post-roundtable Q&A.

WHAT ARE THE MAIN TRENDS YOU'RE SEEING COMING OUT OF THE LARGE CORPORATE MARKET?

There is a certain empathy from advisers who are working with large corporates with some of the challenges that we're dealing with and are making it more difficult to provide the solutions they need for their clients.

I've seen in the last couple of years there's an appreciation that it's less about sticking out a set of requirements and getting a quote back, and a lot more of a deep dive with them at the consulting stage as to what solutions they need.

That's not just \$10m schemes but even \$1m schemes, those with 75 employees, or even smaller ones of between 50 and 75 employees.

There's no such thing as vanilla in our world anymore and there was a lot of similar language spoken between us and the consultants working at that level.

WHAT IS THE BIGGEST DRIVER OF COMPLEXITY IN PROVIDING THOSE SOLUTIONS FOR ADVISERS AND THEIR CLIENTS?

The challenge starts a bit further back as a lot of clients still want a certain level of consistency, even if it's not total equity, across different locations.

However, there are often a multitude of competing forces within the client, perhaps

regional stakeholders have different needs and do not want to compromise to fit a global model.

They may want a regional model which could be driven by local market dynamics and that regionalisation is also powered to a large degree by regulation and compliance, but there are still clients who want that consistency.

We spoke a lot about how clients have never been in greater need of advice for building and designing their benefits across borders because the solutions are becoming much more complex.

There was a lot of agreement and alignment that this market is not smaller it's just in lots of different pockets, forms and personas now, driven by clients looking at other methods of managing their business rather than two, three, or four-year assignments.

HOW ARE MOBILITY PATTERNS AND EMPLOYEE MANAGEMENT AFFECTING THE SECTOR?

While employers of record (EORs) have been around quite a long time, the use of them has increased sharply.

Technology has enabled companies to look at a more globally dispersed workforce, and EORs have become a much more common solution of being able to stand up an entity in a certain location.

Of course this added another group of countries to achieve benefit consistency in.

As an industry we're catching-up to greater EOR use and looking for solutions to that, still with all the challenges around compliance, reach and access to care.

That's where the adaptability of IPMI works, but it's not a perfect solution, there are still challenges.

IPMI products were built more around the populations we have been used to serving, so we're revisiting those products in this

new environment, reviewing how we price them, how we view the risk and how we deliver service, which is not an overnight process.

THERE WAS A DESIRE FOR MORE MODULAR AND CHEAPER PRODUCTS FROM THE PANEL. IS THAT HOW UNITEDHEALTHCARE GLOBAL IS TRYING TO EVOLVE?

Certain elements will reduce the price, but they're generally not the ones people want to take off a plan.

What we must adapt to is the different types of behaviour; the claiming behaviour and understanding the personas we're dealing with.

We get quotes for 50 person schemes in 20 different countries and the most might be seven or eight people in one location.

In some countries they're providing IPMI but there is also some state provided or subsidised or mandated cover - so how do we look at claiming behaviour for one client in 20 locations?

The claiming behaviours and even benefit needs within that one client could be very different.

How do we respond to that when it comes to service even before we think about price?

We're rooted in that very intensive service journey and we found a lot of those more dispersed companies have realised that as their businesses get more complex, they need the security of 24-hour help lines, the language support, the networks we offer. ■



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July 2024 — healthcareandprotection.com



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