

The State of Plan Member Mental Health

A review of service utilization
and disability claims in 2020



Insurance

Mental health matters

Advocates for workplace wellness have long understood the link between employee health and productivity. But while efforts to promote physical well-being have been broadly applied, strategies to promote mental well-being are relatively new in workplaces across Canada. The stigma that often surrounds anxiety, depression and other mental health issues has made it more difficult to openly discuss mental well-being in the workplace.

To their credit, employers have made considerable strides in promoting mental health. The 2020 Sanofi Canada Healthcare Survey reports that 61% of plan members say their employer is effective in helping employees manage stress. Just 42% said the same in 2011.

Meanwhile, a rising number of Canadians have grown comfortable with the subject. The 2020 RBC Insurance® Mental Health & Group Benefits Survey – a study of 1,001 adult Canadians conducted by Ipsos – found that 77% would discuss a mental illness with their co-worker or boss. That's up from 73% in 2019.

The arrival of the COVID-19 pandemic in Canada placed all of this in sharp relief. It was clear that an abrupt shift to virtual work, coupled with a combined health and financial crisis, would exacerbate existing mental health issues and perhaps even contribute to new ones.

This report will compare plan member utilization of mental health services and mental health-related drug and disability claims in 2019 and 2020. We have collected expert opinions from partners inside and outside our organization, to provide analysis of this early-stage data.

Our expectation is that we will see a rise in both the utilization of extended health care benefits and drug and disability claims related to mental health. We believe this will play out over the course of the pandemic, and perhaps for years to come.

This first set of data begins to tell that story. Further study will add to our understanding, and to our ability to best serve Canadian plan sponsors and plan members. RBC Insurance is committed to sharing what we learn.

77% of Canadians in 2020 were comfortable discussing a mental illness with their co-worker or boss compared to 73% in 2019.

– RBC Insurance Mental Health & Group Benefits Survey

Before the pandemic was declared

At the time of the virus' arrival in late January, few Canadians foresaw what a profound impact COVID-19 would have on their day-to-day life. Still, in both January and February, RBC Insurance saw a rise in the number of plan members using both psychological and social worker services available through their workplace plan.

Measured on a per-1,000 lives basis, plan member utilization of psychologist services rose 33% in January and 38% in February, compared to the same months in 2019. Social worker utilization was up 21% in January and 59% in February (again, compared to 2019).

We cannot assume that these increases were the result of the emerging COVID-19 crisis. It was too soon after the virus had landed in Canada to attribute these results to the pandemic entirely. But it's not unreasonable to think that at least some Canadians were starting to worry.

The provinces and territories implemented bans on gatherings of various sizes between March 12 and 22. The federal government issued a recommendation against international travel on March 14, and by March 26, The Quarantine Act made it a requirement for travellers (not including essential workers) to self-isolate upon their return.

After the lockdown

Like other businesses across the country, many health care clinics stopped seeing patients in person as a result of government-imposed restrictions. That extended into April, and in some provinces, May and June.

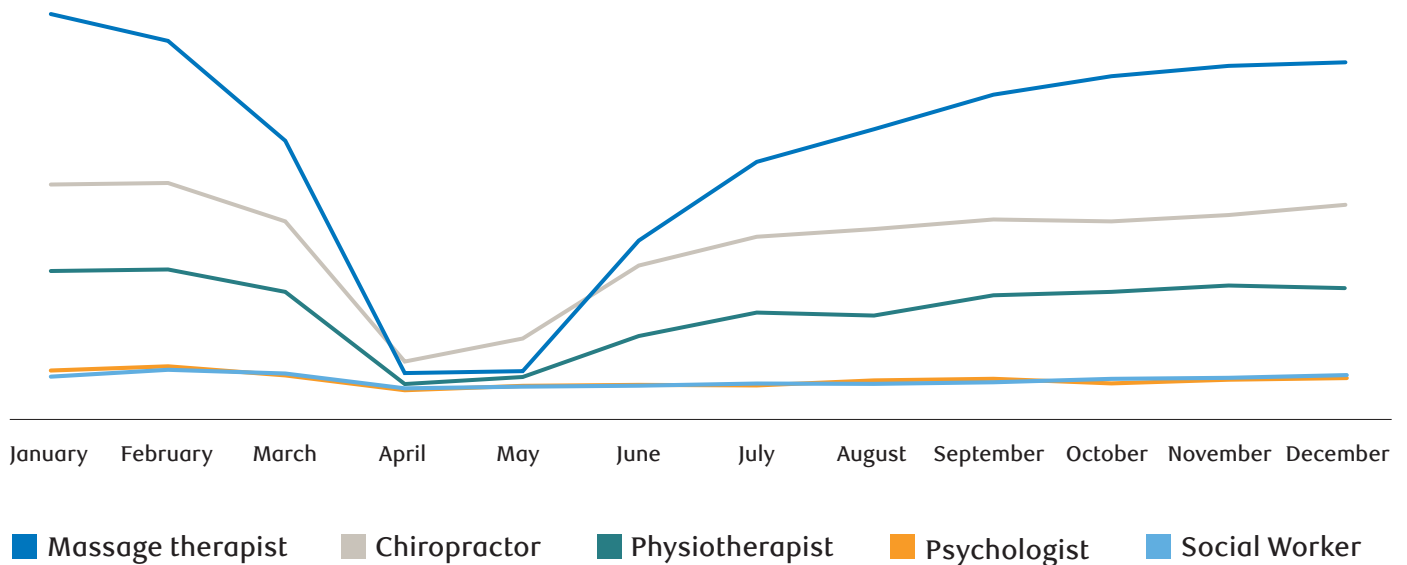
Some health care was still available, but many professions were instructed to see patients on an emergency basis only. And Canadians were asked to only leave home for essential trips.

This inability to access health services via traditional means explains multiple year-over-year declines in utilization rates. Clearly though, some practitioner types experienced more significant drop-offs than others.

Massage therapy, for example, which had the highest utilization to begin with, also experienced the highest drop-off. That’s understandable given the hands-on nature of this care. And while visits to psychologists and social workers started out at much lower levels of utilization, they also experienced considerably less dramatic reductions once the lockdown began.

This smaller drop in mental health practitioner utilization is consistent with what we’re seeing elsewhere in the industry. It should not be seen as a reflection of improved mental health.

Paramedical practitioners’ utilization rate (Monthly utilization, January – December 2020)



*Utilization = number of unique claimants per 1,000 insured lives in each month



“In April and May, we saw a massive dip in people seeking service,” says Dr. Sylvain Roy, Ph.D., C.Psych. He is director of strategic initiatives at Strata Health and a former president of the Ontario Psychological Association. “But the need was there.”

Paula Allen, global leader and senior vice president, research and total well-being at Morneau Shepell, leads that company’s monthly Mental Health Index,¹ launched in April 2020.

“We often see that when there is a crisis situation, people delay taking care of their mental health,” says Allen. “They’re focused on the practical things they need to get done. They feel anxious, angry and upset and then they attribute that to the situation they’re in. They don’t realize that this is something they need to take care of for their own well-being.”

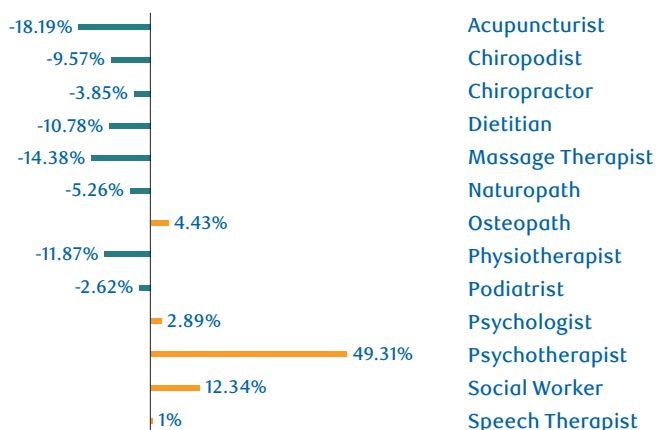
Allen says Morneau Shepell’s data show a marked decline in mental health. “There definitely were a lot of issues,” she says. “People had high anxiety, their optimism was lower. Everything that you could look at dropped quite significantly.”

Fortunately, by the time these providers were asked to stop seeing patients in person, many had already invested in virtual care capabilities.

“[In Ontario], we went from 25% of psychologists doing virtual care in 2018 to about 75% right at the onset of COVID-19,” says Dr. Roy. “We suspect we’re now at 85%. Are we going to go back? No. We’ve invested heavily in virtual care technology and patients love it.”

When looking at the total number of claimants by practitioner type in 2020 compared to 2019, RBC Insurance saw a similar pattern in utilization rates. Specifically, the number of plan members who made mental health-related paramedical claims have shown positive year over year increases: psychologists (+2.89%), psychotherapists (+49.31%) and social workers (+12.34%). Again, this is during the March-to-December 2020 period, compared to the same 10 months in 2019.

Year-over-year change in number of claimants



¹ <https://www.morneaushepell.com/ca-en/mental-health-index>

Drug claims

In September 2020, Express Scripts Canada reported a 20% increase in drug claimants related to depression year to date, compared to the January-to-August period in 2019. By the end of August 2020, mental health-related claims had already reached 97% of the previous year’s claims total.² Time will tell if we are seeing a sustained shift from counselling support to drug-plan utilization. The evidence so far could point to either individual preferences or a lack of physical access to therapists.

Dr. Roy says clinic closures drove a lot of Canadians to their family doctor with mental health concerns. Because there were fewer referral options available to them, they may have been more apt to write a prescription. “If physicians don’t have access to an interdisciplinary team, their only option is medication,” he says. “They don’t have the ability to refer to a psychologist or a social worker. And psychiatrist wait times are high in the province, like it is everywhere else in the country.”

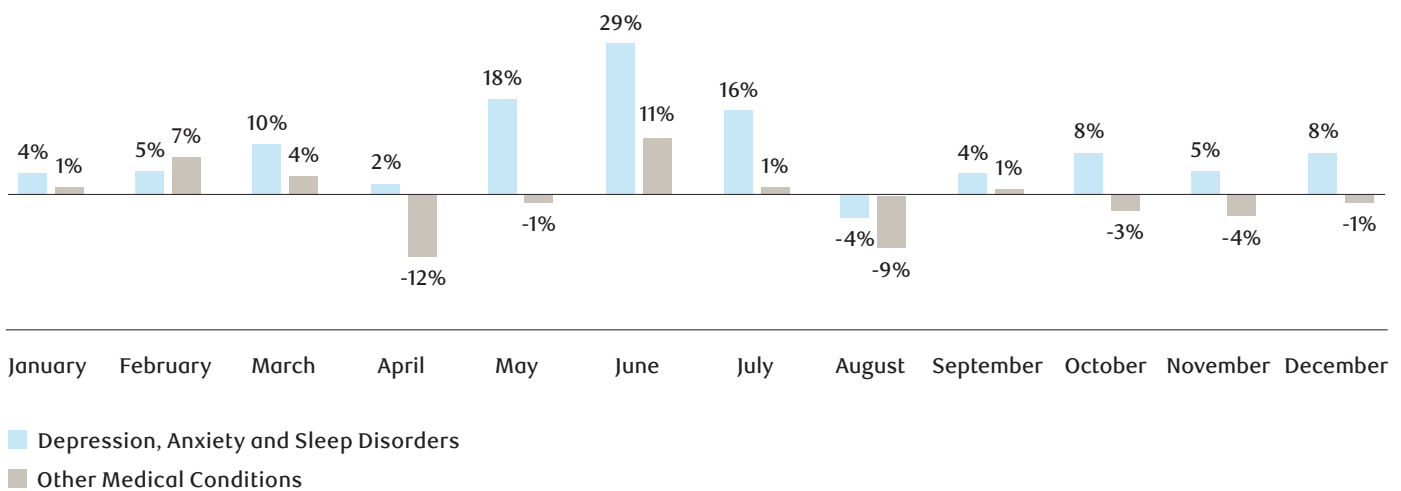
Indeed, we found that drug plan utilization related to depression, anxiety and sleep disorders rose every month in 2020 except for August, compared to the same months the previous year.

Because both counselling and medication are often used in the treatment of mental health conditions, we will continue to monitor this to advance our understanding. This may serve as a leading indicator of what we can expect in terms of disability claims for mental health.

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– Dr. Sylvain Roy, Strata Health

YoY change in monthly drug use (Number of claimants per 1,000 lives in each month)



Note: Drug claims related to anxiety/depression/sleep disorders. Calculated as the number of claimants divided by the approximate number of insured lives on a monthly basis, then multiplied by 1,000.

² <https://www.benefitscanada.com/news/bencan/coronavirus-pandemic-drives-20-increase-in-new-claims-for-mental-health-drugs/>



Disability claims

Part of what we expected to experience was an increase in disability claims as a result of COVID-19 – from both the virus itself and its associated mental health impacts. So far, we’re not seeing it. Overall, disability claims were down slightly in 2020.

We experienced a brief spike in short-term disability (STD) claims in March, likely driven by COVID-19. Claims remained lower than the previous year until September.

Given the fact we don’t often see long-term disability (LTD) claims until about four months after the date of disability, it’s early to make any meaningful conclusions from this data. Still, the incidence is down compared to 2019.

There could be a couple of things happening here.

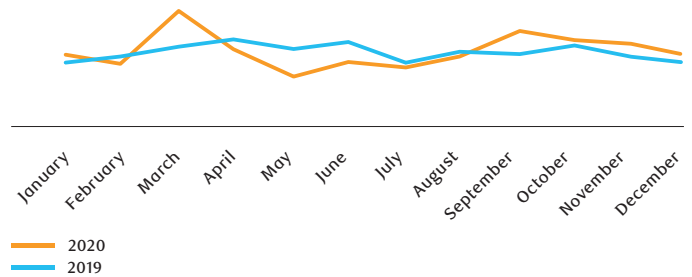
First, employees who remained on the job – working onsite or remotely – faced significant pressure as a result of the pandemic. Priorities shifted, the economy stalled and employers had to ask their people to do more, often under difficult circumstances. While pressures like these can often contribute to disability claims, the early days of a crisis are also a time in which employees are less likely to make a claim; due to either a fear of job loss or a sense of obligation to the employer and its customers.

Previous research conducted by RBC Insurance found that LTD incidence rates rise and fall with movements in gross domestic product (GDP). From the report³: “Contrary to what you may think, as GDP accelerates or the economy grows, there is an increase in the incidence of LTD claims. When GDP drops, so do the incidence of claims.”

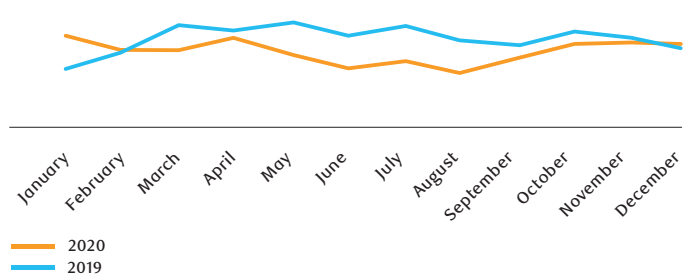
Second, the provincial lockdowns put a number of businesses on pause. Employees may have been temporarily laid off from work, receiving the Canada Emergency Response Benefit, and therefore less likely to submit a disability claim during this time.

³ <http://www.rbc.com/newsroom/news/2017/20170111-ins-ltd.html>

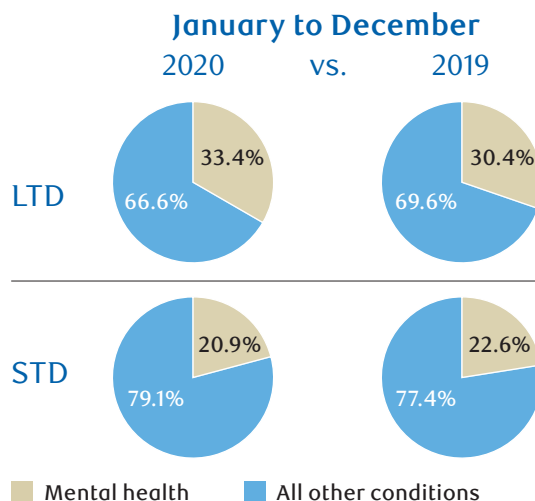
Number of new short-term disability claims YoY trending



Number of new long-term disability claims YoY trending



Regardless, mental health remains a top diagnostic category. A year-over-year comparison of mental health disability claims, measured as a percentage of overall disability claims, remains fairly consistent. The percentage of STD claims related to mental health is down slightly, driven by an early spring increase in COVID-19 related claims. For LTD claims, the proportion related to mental health was up slightly in 2020, but more time is needed to determine if this trend will persist.



“We can assume that there are a number of people who needed help in the spring and didn’t get it or delayed it,” says Allen. “We can expect some poorer outcomes in the short term that will ultimately push health costs and disability costs.”

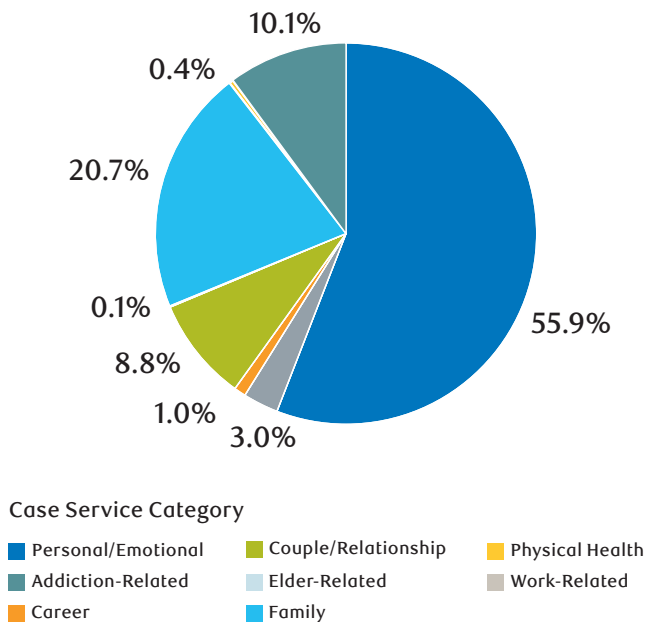
Allen says that many of those who have been able to get help have presented with more severe issues. “We saw a 30% increase in suicidal ideation,” she says. “People were accessing support in a very crisis-oriented way. And the group that’s not accessing support is getting worse. We know that if you delay mental health care – like with any condition – when you actually do get the care it’s more difficult to recover. You’re in a more compromised place as a result of that delay.”

Employee assistance plans

The value delivered by employee assistance plans (EAPs) is well understood by both plan sponsors and members. It is in times like this that they can make the most difference.

The majority (55.9%) of EAP usage relates to personal/emotional issues. But that’s not the entire mental health story. Another 20.7% are for family issues. Work and couple/relationship issues account for 10.1% and 8.8% respectively.

Morneau Shepell – EAP case service categories January – June 2020



Morneau Shepell, the EAP provider of services for RBC Insurance Group Benefit Solutions, experienced an increase in the severity of calls.

“We’re seeing a lot more people come in with a work-related issue, plus a greater level of severity,” says Allen. “We’ve also seen a phenomenon where people are burning out. ... We saw 33% of people saying they felt at risk of burnout. That’s huge. All aspects of our index say that we are in a state of high risk as a population.”

“We’re seeing a lot more people come in with a work-related issue, plus a greater level of severity”

– Paula Allen, Morneau Shepell

After a month-over-month dip in EAP cases between February and March, RBC Insurance saw a steady increase extending into April, May and June.

The top three presenting issues in the second quarter of 2020 – within the RBC Insurance EAP block – were emotional well-being, couples/relationships and work-related. Emotional health was by far the most prevalent category, representing more than two-thirds of cases.

Approximately 25% of the emotional well-being cases we saw were related to anxiety. Another 28% were related to personal stress.

There was an increase in calls related to couples/relationship issues. This included conflict resolution and general relationship issues. Close to 35% of cases in this category were related to relationship breakdown or separation/divorce.

The good news is that our plan members are accessing information and support from the EAP platform. Relative to Q1, we saw a 45% increase in the number of members accessing articles and tools in the mental health category. (2020 Q2 was also up relative to the same quarter the previous year.)

It is our expectation that the longer people are in isolation and feeling the financial, physical and mental impacts of the pandemic, the more mental health will be impacted. That will continue to drive EAP calls.

2020 RBC Insurance Mental Health & Group Benefits Survey

More plan members covered by RBC Insurance have experienced stress and anxiety since COVID-19 arrived in Canada. That’s supported by a separate study run by Ipsos, the 2020 RBC Insurance Mental Health & Group Benefits Survey.⁴ It was conducted during a three-day period in July 2020.

The percentage of adult Canadians who report excellent or good mental health fell four percentage points from 66% in 2019 to 62% this year. Women and younger people are less likely to report excellent/good mental health.

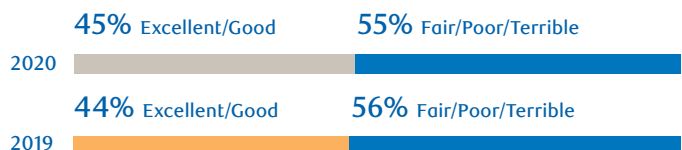
Canadians who assessed their mental health as:



Only 58% of women ranked their mental health as excellent or good, compared to 67% of men. And only 51% of younger Canadians ranked their mental health as excellent or good compared to 72% of those who are 55 and older and 60% of those between 35 and 54.

Self-assessments of financial health remained steady year over year. Among those who told us they have insurance, 48% reported that they were in good or excellent financial health. Just 36% of those who don’t have insurance said the same.

Canadians who assessed their financial health as:

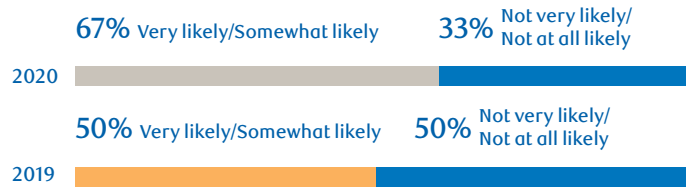


The poll showed a significant increase in likelihood to consult with a mental health practitioner using virtual care. Two-thirds (67%) are very or somewhat likely to use virtual care to consult with a mental health practitioner, compared to only 50% in 2019.

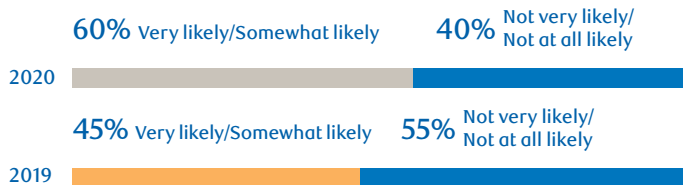
Women are more likely to use virtual care to consult with a mental health practitioner: 72% vs. 61% of men.

Asked specifically about using video chat or the telephone for mental health counselling, 60% say they’re very or somewhat likely. That’s up 15 points from a year ago. Again, women are more likely to say so: 65% vs. 54%.

Canadians who would consult with a mental health practitioner for challenges they’re facing:



Canadians who would use video/telephone counselling for mental health challenges:



Allen says the industry’s ability to serve people digitally is increasingly important.

“It will be, at some point in the very near future, the default,” she says. “We’ve been moving on this path to virtual care for a while. ... You’ll see it more as part of a continuum of care. Virtual, in every respect whether it’s mental or physical health, will be the first line of defence.” Only those patients who require in-person care will receive it.

⁴ RBC Insurance Mental Health & Group Benefits Survey. Conducted by Ipsos in 2020.



Conclusion

It will take time before we can fully understand the state of plan member mental health in a post-COVID-19 world. What is immediately clear is the need for continued promotion of these services.

Current indications are that plan members covered by RBC Insurance have experienced increased stress and anxiety since COVID-19 arrived in Canada, and that many are taking advantage of the services and protection

offered to them via their workplace plan. With more difficult months ahead, it's incumbent on all of us in the Canadian group benefits industry to prioritize plan member health – both mental and physical.

We will continue to study these trends and update the data so we can best serve Canadian employers and their employees.

What can employers do?

In addition to all of the health and financial stress associated with the COVID-19 pandemic, many Canadians have had to navigate the pressures that come with having children at home, caring for vulnerable seniors and working virtually. What can employers do to help?

Three suggestions:



Create and foster a culture that supports employee well-being. Promote an open and safe space that destigmatizes mental health challenges so employees feel comfortable asking for the support they need. This will help with challenges brought on by remote work, physical distancing and anxiety about returning to work.



Offer mental health resources to employees. Employers can consult with their insurance advisor on the services that are already in place for employees and consider if additional support is required.



Ensure your employees know how to access support. Communicate often to your employees about what's available through your insurance provider.



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