



A SURVEY:

HOW SUCCESSFUL
WAS YOUR OPEN
ENROLLMENT?

THE Drury
Group INC.

NOW THAT THE FLURRY OF PRE-COMMUNICATIONS, EMPLOYEE MEETINGS, COUNTLESS QUESTIONS, AND ONE-ON-ONE CONVERSATIONS HAS COME TO AN END AND YOUR OPEN ENROLLMENT IS FINALLY OVER, IT'S TIME TO ASSESS HOW IT WENT.

And the time to do that is now, while it's fresh in your mind.

That's why we're sharing a tool many of our clients like and currently use: Post-enrollment surveys.

We've put together a series of questions for you and your benefits team to ask yourselves. As an added bonus, we've also included a survey you can use with your employees to assess how they thought it went, which will help verify your perceptions.



EMPLOYER SURVEY

It is extremely important not to limit this to only the benefits or HR staff. For true insight into how well the enrollment went for everyone integral to the process, gather together HR, marketing, IT, leadership, etc. Grab a whiteboard, and start talking through these questions to assess the recent enrollment.

GENERAL

1 _____

WHAT WORKED WELL FOR EACH AREA?

How can it be improved next year?

2 _____

WHAT COULD'VE GONE BETTER FOR EACH AREA?

How can it be improved next year?

3 _____

WHAT WAS THE MOST TIME-CONSUMING PART OF THE PROCESS FOR EACH AREA?

How can it be streamlined for next year's enrollment?

ENROLLMENT

4

WHAT TYPE OF ENROLLMENT DID YOU HOLD:

- Active
- Passive
- Other

How did it work?

5

DID YOU HOLD AN ACTIVITY DURING ENROLLMENT, SUCH AS A DEPENDENT AUDIT, TO DRIVE BETTER PARTICIPATION?

- Yes
- No

How effective was that choice? Will you hold an activity next year? If so, what?

6

WHICH ENROLLMENT METHOD DID YOU USE?

- In-person
- Telephonic
- Online
- Combination approach

How effective was it? What can you change next year to improve it?

COMMUNICATION

7

WHICH COMMUNICATION CHANNELS DID YOU USE? (CHECK ALL THAT APPLY.) THEN ASSESS HOW EFFECTIVE THEY WERE FROM YOUR AREA'S PERSPECTIVE? WHAT EVIDENCE (E.G., EMPLOYEE SURVEYS OR FEEDBACK EITHER FORMAL OR INFORMAL) DO YOU HAVE TO SUPPORT EACH CHANNEL'S EFFECTIVENESS?

GROUP MEETINGS

Extremely Ineffective **1** **2** **3** **4** **5** Extremely Effective
Why? _____

EMAILS

Extremely Ineffective **1** **2** **3** **4** **5** Extremely Effective
Why? _____

WEBINARS

Extremely Ineffective **1** **2** **3** **4** **5** Extremely Effective
Why? _____

PHONE CALLS

Extremely Ineffective **1** **2** **3** **4** **5** Extremely Effective
Why? _____

ONE-ON-ONE MEETINGS

Extremely Ineffective **1** **2** **3** **4** **5** Extremely Effective
Why? _____

TEXT MESSAGES

Extremely Ineffective **1** **2** **3** **4** **5** Extremely Effective
Why? _____

SOCIAL MEDIA

Extremely Ineffective **1** **2** **3** **4** **5** Extremely Effective
Why? _____

COMMUNICATION

7 (CONTINUED)

WHICH COMMUNICATION CHANNELS DID YOU USE? (CHECK ALL THAT APPLY.) THEN ASSESS HOW EFFECTIVE THEY WERE FROM YOUR AREA'S PERSPECTIVE? WHAT EVIDENCE (E.G., EMPLOYEE SURVEYS OR FEEDBACK EITHER FORMAL OR INFORMAL) DO YOU HAVE TO SUPPORT EACH CHANNEL'S EFFECTIVENESS?

INTRANET

Extremely Ineffective **1** **2** **3** **4** **5** Extremely Effective
Why? _____

POSTERS

Extremely Ineffective **1** **2** **3** **4** **5** Extremely Effective
Why? _____

TABLE TENTS

Extremely Ineffective **1** **2** **3** **4** **5** Extremely Effective
Why? _____

DESK DROPS/FLYERS

Extremely Ineffective **1** **2** **3** **4** **5** Extremely Effective
Why? _____

VIDEO

Extremely Ineffective **1** **2** **3** **4** **5** Extremely Effective
Why? _____

PODCASTS

Extremely Ineffective **1** **2** **3** **4** **5** Extremely Effective
Why? _____

COMMUNICATION

8 _____

HOW MANY WEEKS/MONTHS BEFORE YOUR OPEN ENROLLMENT DID YOU BEGIN YOUR COMMUNICATIONS?

WAS THIS TIMEFRAME SUFFICIENT TO PROVIDE ALL AREAS ENOUGH TIME TO CRAFT AND DEVELOP THOSE COMMUNICATIONS?

- Yes
 No

Why/why not?

9 _____

HOW FREQUENTLY DID YOU DISTRIBUTE YOUR COMMUNICATIONS?
(This includes ALL communications.)

HOW EFFECTIVE WAS THAT TIMELINE/FREQUENCY?

Extremely Ineffective 1 2 3 4 5 Extremely Effective

Why?

STRATEGY

10 _____

HOW HELPFUL WAS YOUR BENEFITS CONSULTANT WITH PLANNING AND EXECUTING YOUR OPEN ENROLLMENT PROGRAM?

Extremely Ineffective 1 2 3 4 5 Extremely Effective

Why?

11 _____

WHAT, IF ANYTHING, DO YOU WISH YOUR BENEFITS CONSULTANT HAD DONE/ HELPED YOU WITH THAT THEY DIDN'T?

12 _____

BASED ON EVERYTHING YOU JUST WALKED THROUGH AS A GROUP:

What will you keep the same next year?

What will you change?

What will you need to do that?

How can your benefits consultant help?



EMPLOYEE SAMPLE SURVEY

Now that you've assessed how this year's open enrollment went from the benefits team's perspective, it's time to get your employees' viewpoints – and compare notes.

We've created sample survey questions you can use to gather employee feedback. Just modify each question to fit your enrollment conditions when you enter them into your online survey tool (e.g., SurveyMonkey). *[We've included instructions within brackets like these; remove or complete that content prior to distributing your survey.]*

EMPLOYEE SAMPLE SURVEY

1

DID YOU PARTICIPATE AND ELECT BENEFITS IN THIS YEAR'S OPEN ENROLLMENT?

- Yes
- No, I have benefits through my spouse/partner or independently.
[If "no," set the survey tool to take them to the end thank-you page.]

2

HOW WELL DID ALL OF THE PRE-ENROLLMENT COMMUNICATIONS (E.G., GROUP MEETINGS, EMAILS, POSTERS, ETC.) HELP YOU UNDERSTAND THE BENEFITS AVAILABLE TO YOU THIS YEAR?

Not at All 1 2 3 4 5 Extremely Well

Why?

3

WHICH OF THE FOLLOWING DID YOU FIND MOST HELPFUL/USEFUL IN UNDERSTANDING AND MAKING YOUR BENEFITS SELECTIONS? (SELECT ALL THAT APPLY.) [REMOVE ANY CHOICES YOU DID NOT USE FOR YOUR ENROLLMENT AND ADD ANY OPTIONS YOU USED NOT INCLUDED HERE.]

- | | |
|--|---|
| <input type="checkbox"/> Group meetings | <input type="checkbox"/> Intranet (open enrollment guide) |
| <input type="checkbox"/> One-on-one meetings | <input type="checkbox"/> Posters |
| <input type="checkbox"/> Emails | <input type="checkbox"/> Table tents |
| <input type="checkbox"/> Webinars | <input type="checkbox"/> Desk drops/flyers |
| <input type="checkbox"/> Phone calls | <input type="checkbox"/> Video |
| <input type="checkbox"/> Text messages | <input type="checkbox"/> Podcasts |
| <input type="checkbox"/> Social media | |

Why?

EMPLOYEE SAMPLE SURVEY

4 _____

WHICH PART(S) OF CHOOSING YOUR BENEFITS ARE THE MOST CONFUSING OR FRUSTRATING TO YOU?

5 _____

WHICH OF THE FOLLOWING, IF ANY, WOULD IMPROVE YOUR OVERALL EXPERIENCE DURING THE BENEFITS ENROLLMENT PERIOD? (SELECT ALL THAT APPLY.)

- Group meetings
- More information about my benefits choices
- Simplified benefits information
- More time to review and/or discuss my choices
- Access to a benefits advisor or financial planner *[If you didn't offer this already.]*
- Decision tools and/or calculators to help me determine how much of each type of coverage is necessary for my specific situation
- Other



EMPLOYEE SAMPLE SURVEY

6

HOW WELL DO YOU UNDERSTAND THE FOLLOWING BENEFITS?

[CHANGE THE BRACKETED ITEMS BELOW TO YOUR OWN PLAN NAMES.]

[HEALTH PLAN 1]

Not at All 1 2 3 4 5 Extremely Well

[HEALTH PLAN 2]

Not at All 1 2 3 4 5 Extremely Well

[HEALTH PLAN 3]

Not at All 1 2 3 4 5 Extremely Well

[NAME] DENTAL PLAN

Not at All 1 2 3 4 5 Extremely Well

[NAME] VISION PLAN

Not at All 1 2 3 4 5 Extremely Well

WELLNESS PROGRAM/OPTIONS

Not at All 1 2 3 4 5 Extremely Well

[EMPLOYER NAME]-PROVIDED LIFE INSURANCE PLAN

Not at All 1 2 3 4 5 Extremely Well

VOLUNTARY BENEFITS LIFE INSURANCE PLAN

Not at All 1 2 3 4 5 Extremely Well

VOLUNTARY BENEFITS CRITICAL ILLNESS/CANCER PLAN

Not at All 1 2 3 4 5 Extremely Well

VOLUNTARY BENEFITS DISABILITY PLAN

Not at All 1 2 3 4 5 Extremely Well

VOLUNTARY BENEFITS ACCIDENT PLAN

Not at All 1 2 3 4 5 Extremely Well

PET INSURANCE PLAN

Not at All 1 2 3 4 5 Extremely Well

[ADD OTHER OPTIONS AS NECESSARY.]

EMPLOYEE SAMPLE SURVEY

7 _____

DO YOU KNOW WHERE YOU CAN FIND MORE INFORMATION AND/OR WHO YOU CAN TALK TO ABOUT QUESTIONS REGARDING YOUR BENEFITS CHOICES?

- Yes
- No

Comments:

8 _____

[IF YOU DIDN'T USE TEXT MESSAGING THIS YEAR, CONSIDER ASKING THIS QUESTION.] WOULD YOU BE MORE LIKELY TO READ BENEFIT REMINDERS IF WE TEXTED THEM TO YOU INSTEAD OF SENDING THEM VIA EMAIL?

- Yes
- No

9 _____

WHAT, IF ANYTHING, WOULD YOU LIKE TO SEE CHANGED FOR NEXT YEAR'S OPEN ENROLLMENT PROCESS?

10 _____

PLEASE PROVIDE ANY OTHER COMMENTS/SUGGESTIONS YOU'D LIKE TO SHARE.

THE DRURY GROUP

IF YOU'D LIKE TO LEARN MORE ABOUT DEVELOPING A BENEFITS PROGRAM FOR YOUR COMPANY OR WANT TO TALK ABOUT HOW WE CAN HELP YOU CREATE AND MANAGE YOUR BENEFITS PROGRAM FOR NEXT YEAR, CONTACT US TODAY.

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