

Bridging Upstream Patient Engagement: Using Employer Insights to Inform Mental Health Treatment Access and Benefit Design

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BACKGROUND

Employers play a central role in determining patient access to care through benefit design, coverage and cost management. As the largest source of private health coverage, employer-sponsored insurance covers more than 160 million individuals in the United States and underscores how employers shape which treatments are available and utilized. **Despite their outsized impact, employer perspectives are rarely incorporated into patient-centered research and engagement, which contributes to gaps between innovation and real-world adoption.**

The Pulse of the Purchaser Research Institute (PPRI) bridges that gap by providing a platform to gather employer insights around benefits design, evidence needs and implementation considerations — and enables healthcare stakeholders to better align research, policy, innovation and care delivery in real-world conditions. PPRI's inaugural study demonstrates how this approach is applied in practice.

GOALS

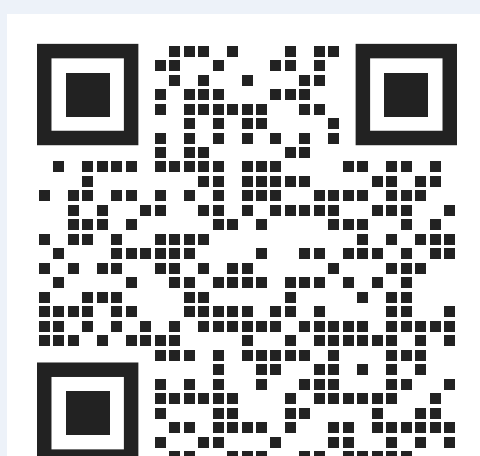
This study explores four key questions:

- 1 How do employers prioritize mental health within overall benefit design?**
- 2 What factors influence employer decisions about adopting emerging treatments for mental health?**
- 3 Where do gaps exist between employer priorities and actual coverage?**
- 4 How can employer insights strengthen approaches to meet patient needs?**

METHODS

The quantitative phase consisted of an online survey of 66 employers and coalition leaders drawn from the National Alliance of Healthcare Purchaser Coalitions membership, all involved in shaping health benefits decisions. Topics included mental health benefit prioritization, coverage practices and gaps, perspectives on emerging treatments and evidence and information needs.

Recently completed qualitative in-depth interviews (n=12) with employers and coalition leaders explore decision-making processes, tradeoffs, barriers to adopting new treatments, evidence thresholds and operational considerations.



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RESULTS

Employers report strong prioritization of mental health benefits (94%) and high engagement in benefit design (95%), largely driven by employee need (94%) and to a lesser extent, employer need (68%). **Employers recognize direct impacts on employees, including reduced productivity (58%) and increased absenteeism and functional impairment (56%), yet gaps persist in translating these needs into condition-specific coverage. (FIGURE 1)**

Interest in emerging mental health treatments reflects employee demand: **22% report some interest (FIGURE 2)**, driven by openness to new approaches (79%) and dissatisfaction with current options (43%). However, employers remain cautious (60%), requiring clear evidence on regulatory approval (91%), safety (86%) and clinical outcomes (83%). Decisions must balance patient needs with **internal education (80%) (FIGURE 3)**, cost (66%) and potential reputational risk (35%).

FIGURE 1

Most employers agree that mental health disorders impact employers and employees; yet opportunities exist for more information and coverage policies for mental health.

Q21. Based on your role, please rate your level of agreement with the following statements regarding mental health disorders. n=64

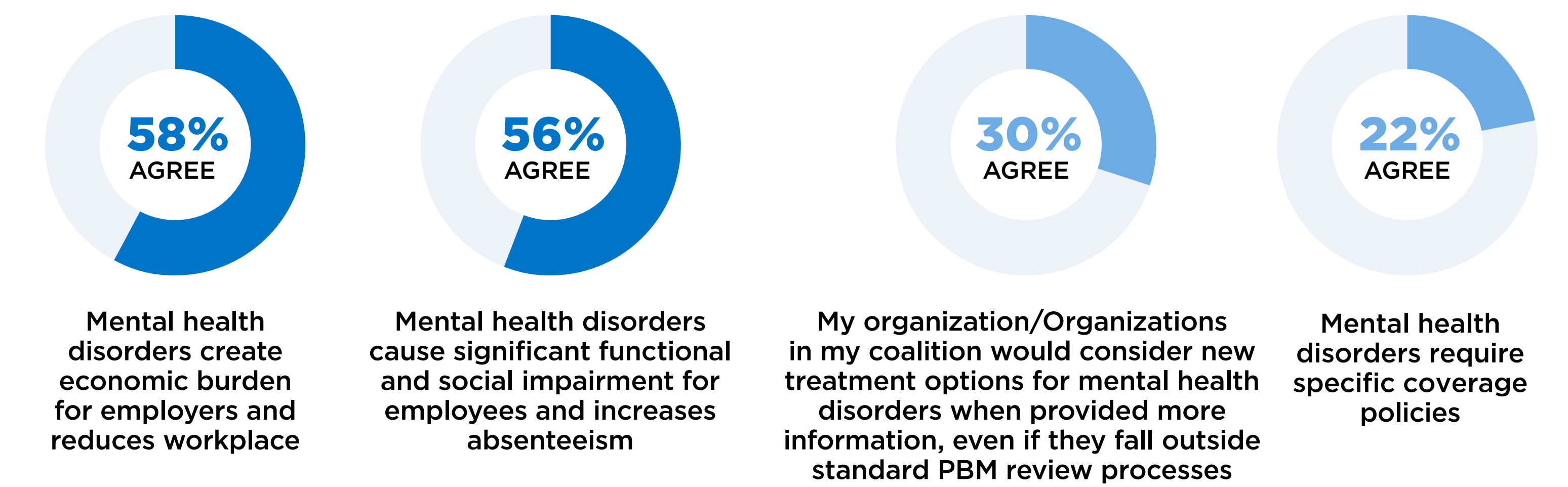
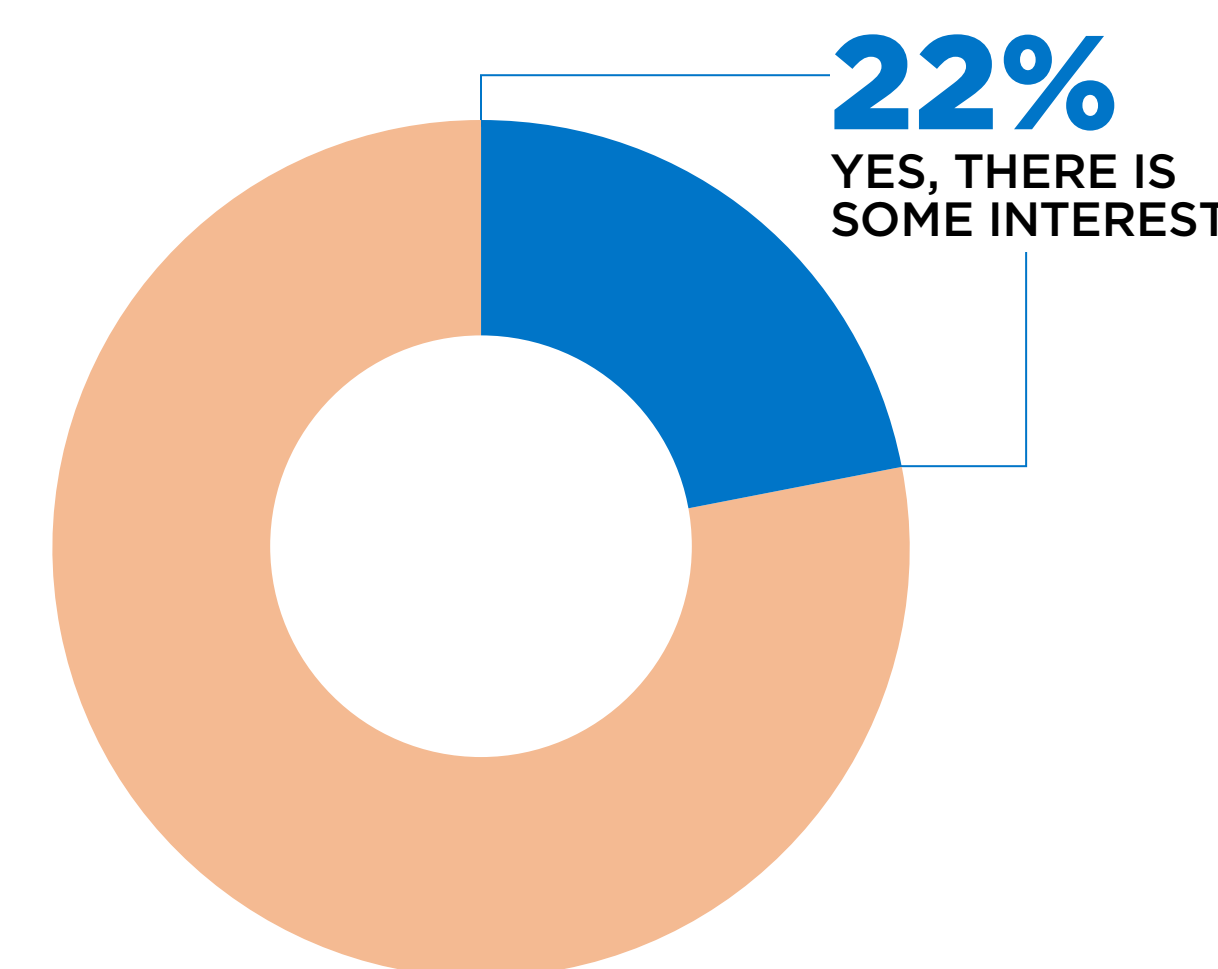


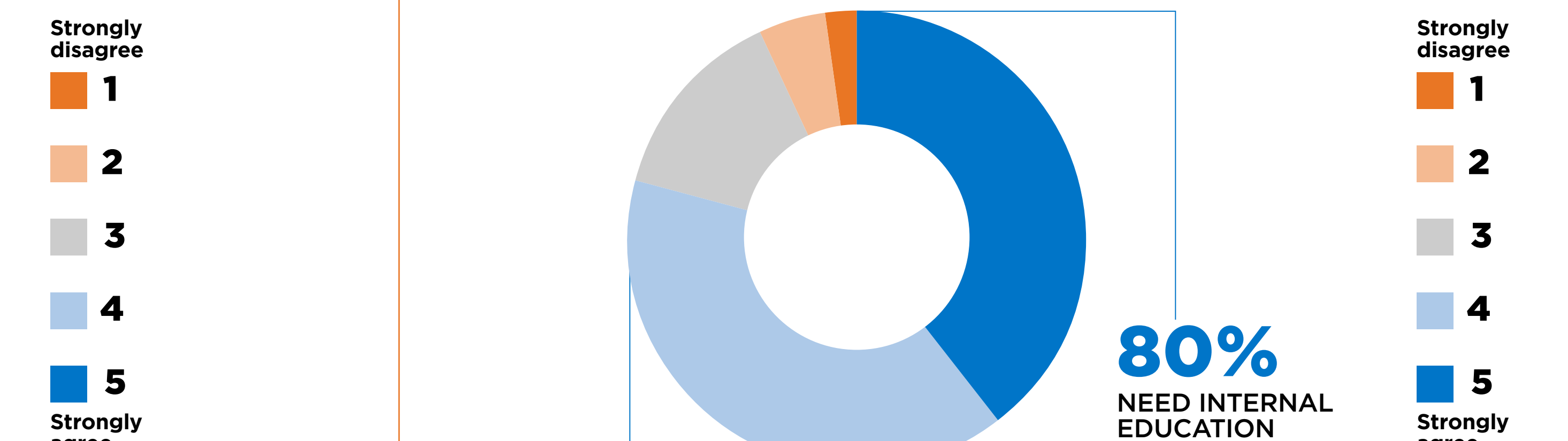
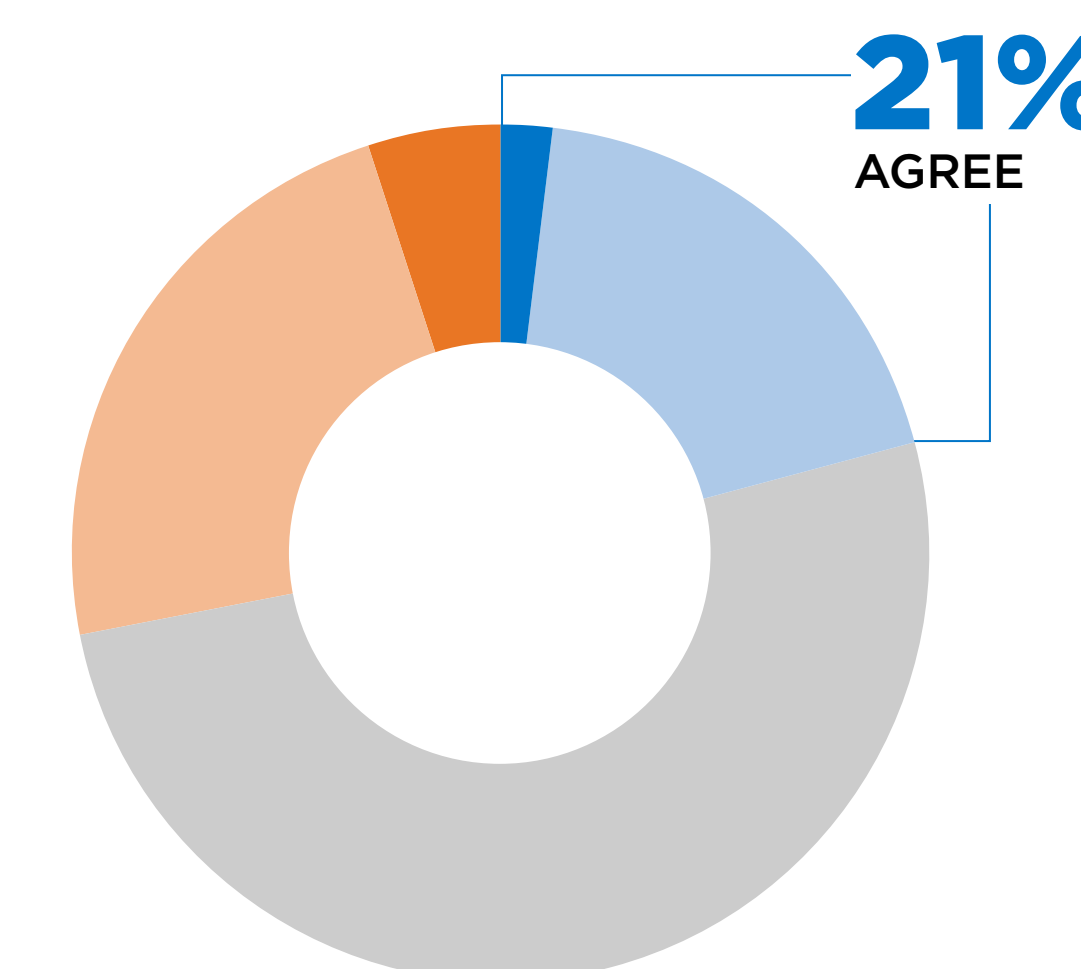
FIGURE 2

Employer interest in emerging mental health treatments matches level of employee interest.

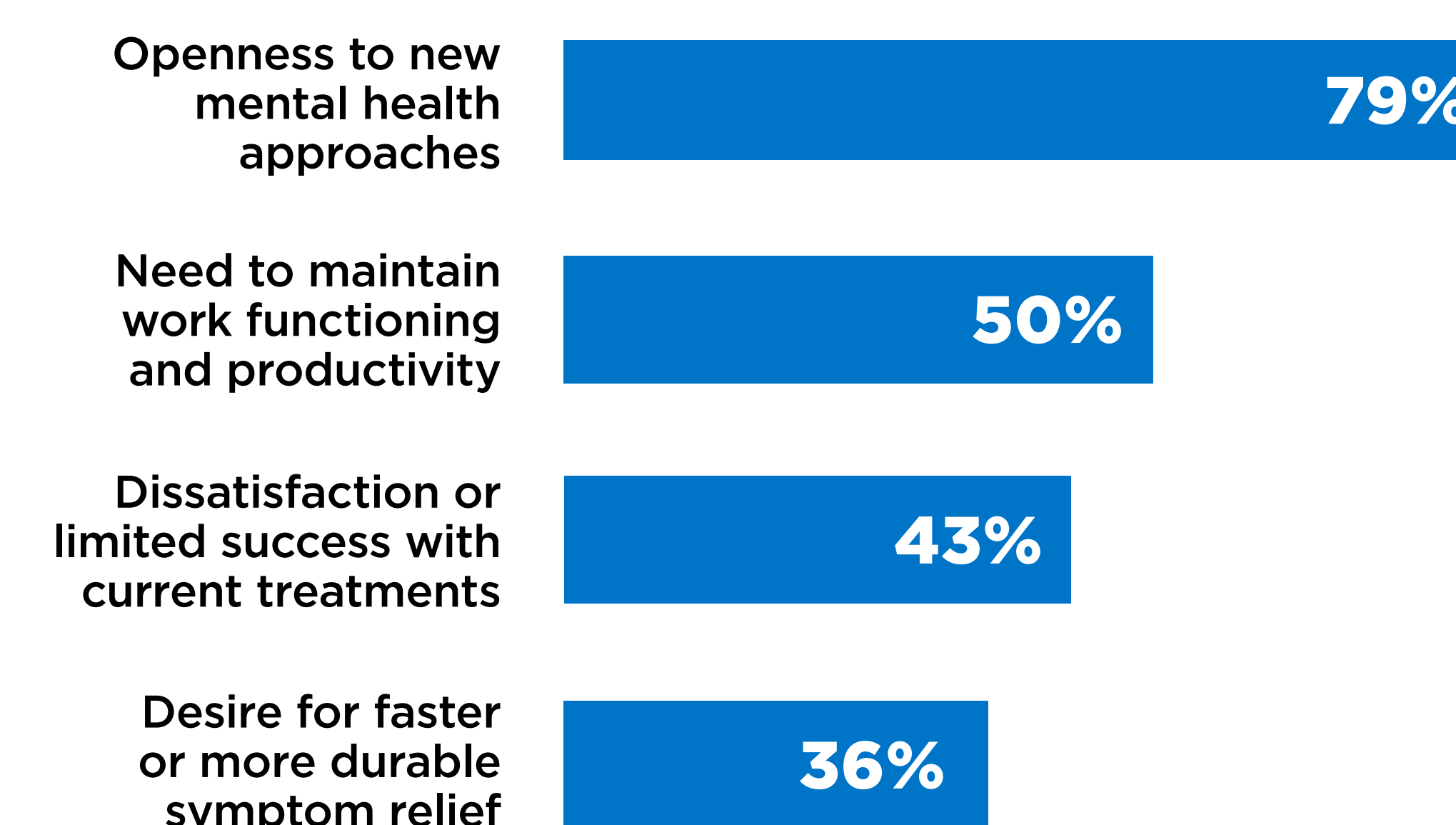
Q22. Are employees/organizations in your coalition actively requesting or expressing interest in benefits related to emerging mental health treatments? n=65



Q24: Now, rate your level of agreement with the following statements: My organization/Organizations in my coalition would consider use of emerging treatments for mental health care. n=65



Q23: Which are the top reasons employees/organizations in your coalition express interest in emerging treatments for mental health? Select all that apply. n=14



CONCLUSION

Incorporating employer perspectives expands patient engagement by addressing upstream decisions that shape access to care. Findings highlight that patient access to mental health care is shaped by employer benefit decisions, which reflect employee needs but are constrained by evidence requirements, cost considerations and implementation realities. While employers prioritize mental health and recognize its impact on workforce outcomes, coverage gaps and cautious adoption of new treatments may limit access. Ongoing qualitative work will deepen understanding of how employer decision-making can better support patient needs and expand access to effective mental health care.

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