



2024 HEALTHCARE AND EMPLOYEE BENEFITS

Benchmarking Report

Published July 2024





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Introduction

Trends in the employee benefits market tend to reflect what's happening socially and economically, and this year is no exception. As brand-name specialty medications continue to dominate the headlines, employers are faced with how to address the growing demand for these high-cost drugs with the complexity of the pharmaceutical marketplace. Lingering inflation is also having an impact on employee benefits as employers are challenged with balancing the impact of rate increases on stretched household budgets. Employers are hungry for innovation in their benefits, and benchmarking can provide insight into what is possible.

The results of Alera Group's *2024 Healthcare and Employee Benefits Benchmarking Report* provide insights into how employers are navigating these challenges and more through benefit plan design and funding strategies. This report is an essential tool, providing the data and insights you need to stay competitive and have an edge in the marketplace.

As you evaluate your employee benefits strategy, we invite you to review the findings of this report with your Alera Group partner to see how you stack up with your peers, and to discuss how you can tailor your employee benefits plan to minimize cost and maximize the impact on your employees and your bottom line.



Best regards,

SALLY PRATHER

EXECUTIVE VICE PRESIDENT
NATIONAL EMPLOYEE BENEFITS
PRACTICE LEADER

79%

of the Medical plans in the survey experienced a rate increase

90%

of participants offer Dental Insurance, consistent with results from last year

8%

increase in the number of employers offering plans with five pharmacy tiers

Key Findings

Another year of Medical plan rate increases; Dental remains steady

It was another year for rate increases, with 79% of the Medical Insurance plans in the survey experiencing a median increase of around 8%. In contrast to Medical plans, Dental Insurance rates remain steady from the prior year, with few increases.

Increase in pharmacy tiers

The number of employers offering five pharmacy tiers increased over the prior year, as employers continued to struggle with pharmacy rate increases and the high cost of specialty medications.

Employers offering choice

When it comes to benefits, employers offer an average of five different benefit types, with larger organizations offering even more benefits, including supplemental plans.

Shift to self-funding

With health insurance premiums continuing to rise, this year's data reflects a shift in the number of employers with over 100 employees migrating to self-funding.

Benefits eligibility varies by size and industry

This year's *Healthcare and Employee Benefits Benchmarking Report* dives in-depth into benefits eligibility requirements, which vary widely across industries and by size of employers.



On average, survey participants offer employees five different benefit types. The most common benefits, offered by over 75% of survey participants, are Medical, Dental, Vision, and Life and AD&D.

Benefits Offered

The big picture on employee benefits

This year's *Healthcare and Employee Benefits Benchmarking Report* offers a big picture view of the type and number of employee benefits that participants are offering. The data provides insight into 13 types of insurance benefits, including core and supplemental offerings:

CORE INSURANCE BENEFITS

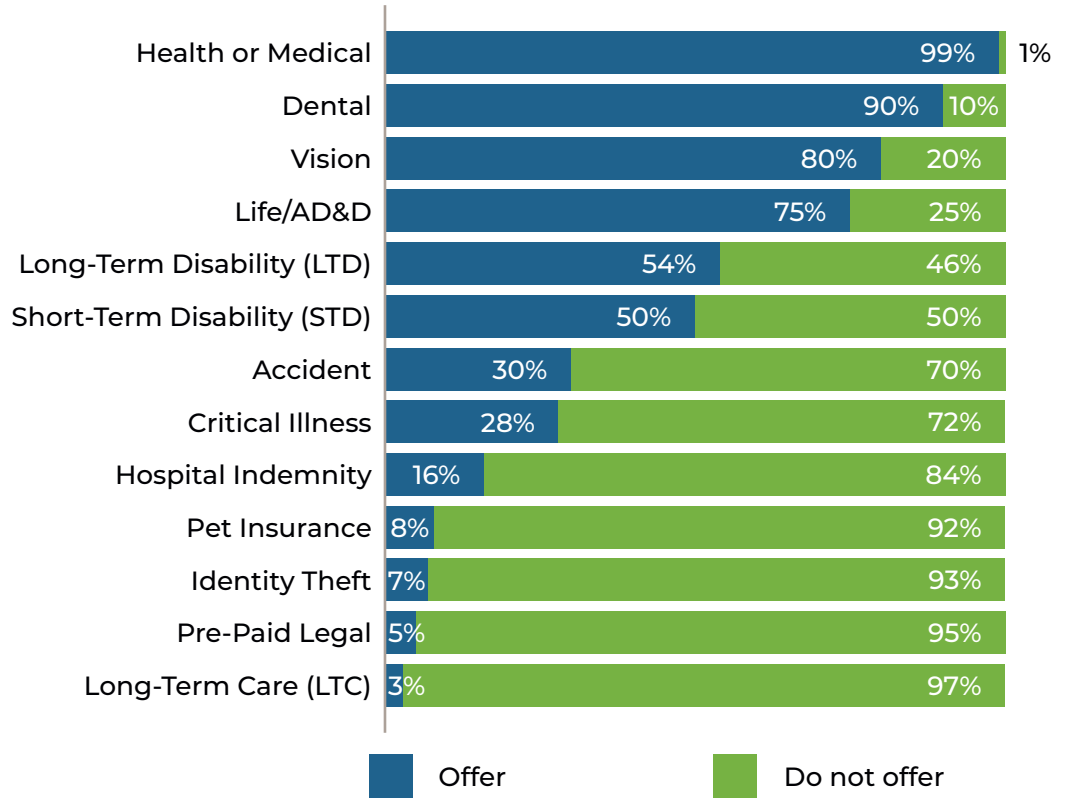
- Medical
- Dental
- Vision
- Life and Accidental Death and Dismemberment (AD&D)
- Long-Term Disability (LTD)
- Short-Term Disability (STD)

SUPPLEMENTAL INSURANCE BENEFITS

- Accident
- Critical Illness
- Hospital Indemnity
- Pet
- Identity Theft
- Prepaid Legal
- Long-Term Care (LTC)

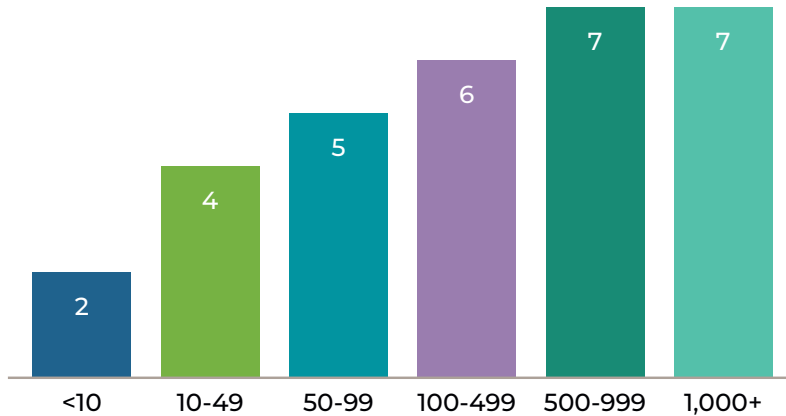
Of these benefits, over 75% of participants offer Medical, Dental, Vision, and Life and AD&D. The number and type of benefits vary by employer size. Not surprising, larger employers offer a greater variety of products and are more likely to offer supplemental products, such as Pet Insurance.

Type of insurance benefits offered



Number of products offered by employer size

Average number of products (out of 13)



Supplemental benefits

Accident, Critical Illness and Hospital Indemnity are the most commonly offered supplemental insurance benefits, with larger employers more likely to offer these benefits than smaller employers.

Employers looking to increase the perceived value of their benefits to their employees could consider offering more supplemental benefits, which are often viewed favorably by employees.

“Critical Illness coverage, Disability Income and Accident Insurance benefits provide a sense of financial security and peace of mind, and contribute to higher levels of job satisfaction and loyalty in today's fiercely competitive job market.”

TINA SANTELLI

VICE PRESIDENT OF VOLUNTARY BENEFITS
AND ENROLLMENT SOLUTIONS, ALERA GROUP

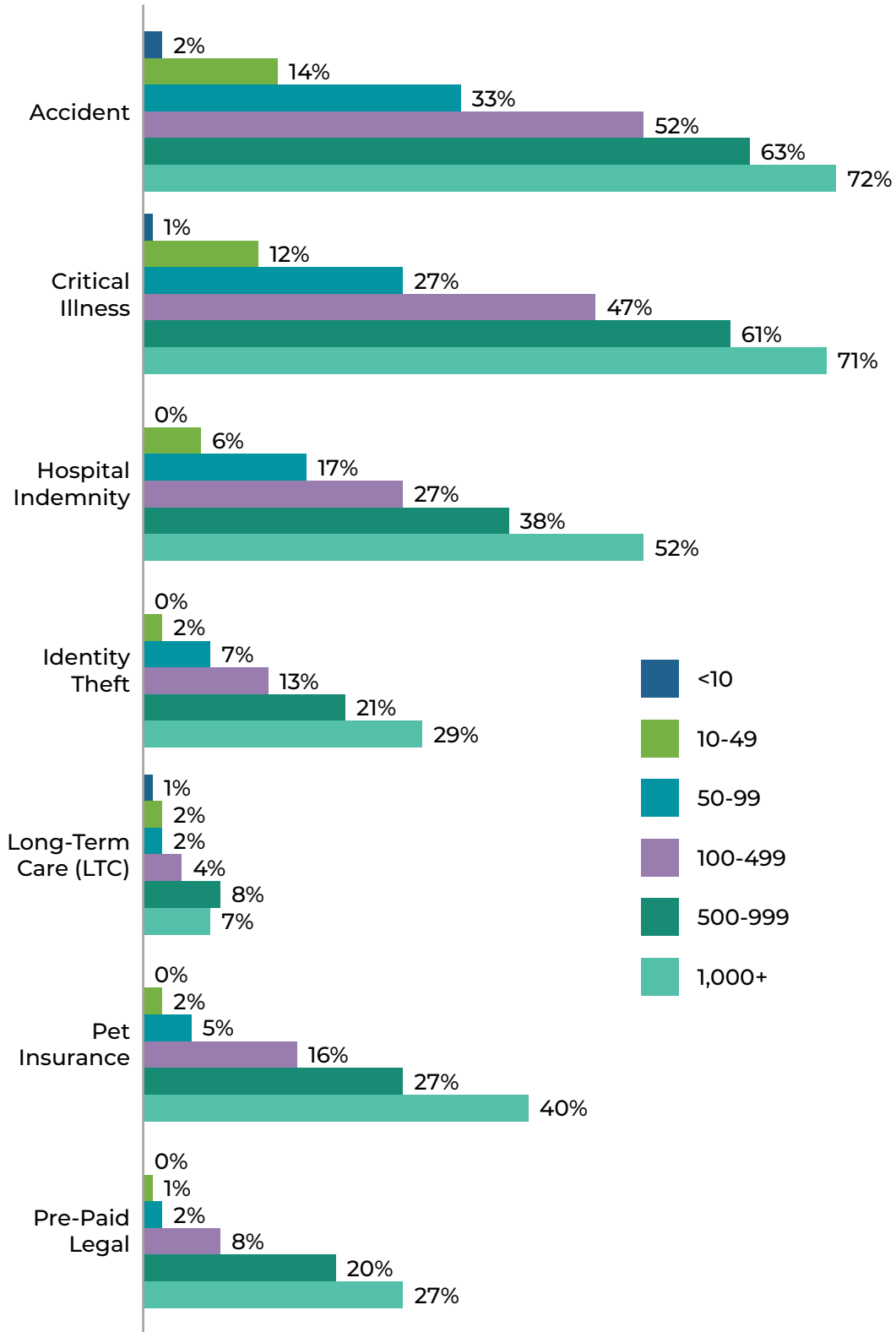
Small employers shouldn't feel excluded from offering supplemental benefits, however, as many are funded fully by employee contributions.

Retirees and domestic partners

Consistent with last year's findings, only a few participants (4%) reported offering retiree Medical. The largest employers (1,000+) were significantly more likely to offer retiree Medical than smaller employers at, 16% vs. 1%. Of those offering, none reported using an exchange but rather electing to offer through their group plan.

Fifty-seven percent of participants allow domestic partners to enroll in their health or Medical plan, which is down from 61% in 2023.

Percentage of participants offering supplemental benefits by employer size



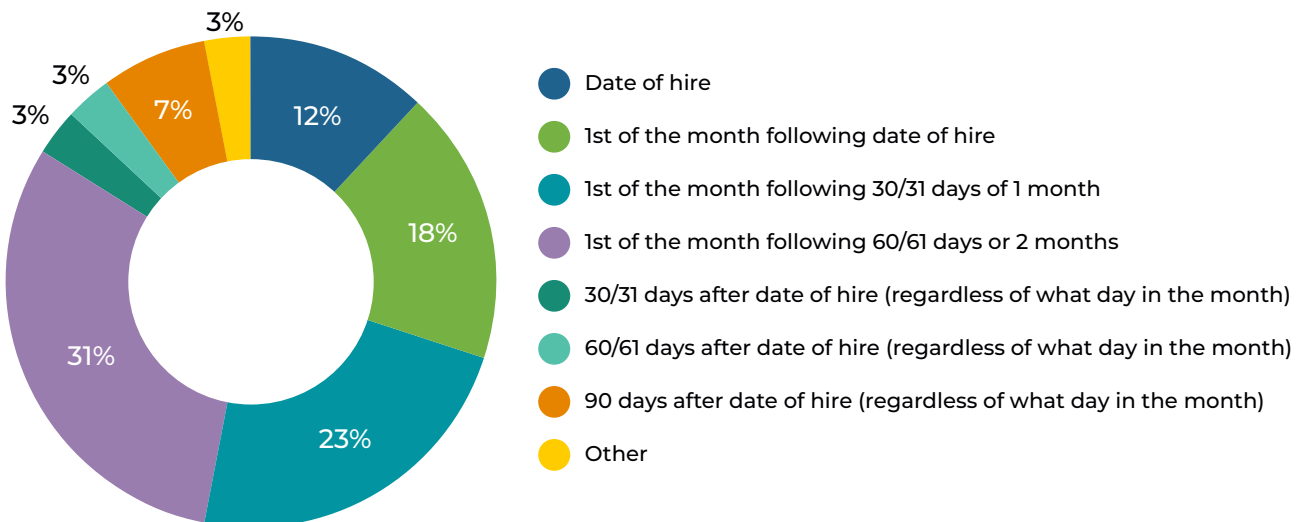


Employee Benefits Eligibility

Regardless of industry or company size, in order to be eligible for major Medical, employees must work a median of 30 hours per week. Eligibility enrollment dates, however, vary widely among survey respondents — from date of hire (12%) to two months on the first of the month (31%).

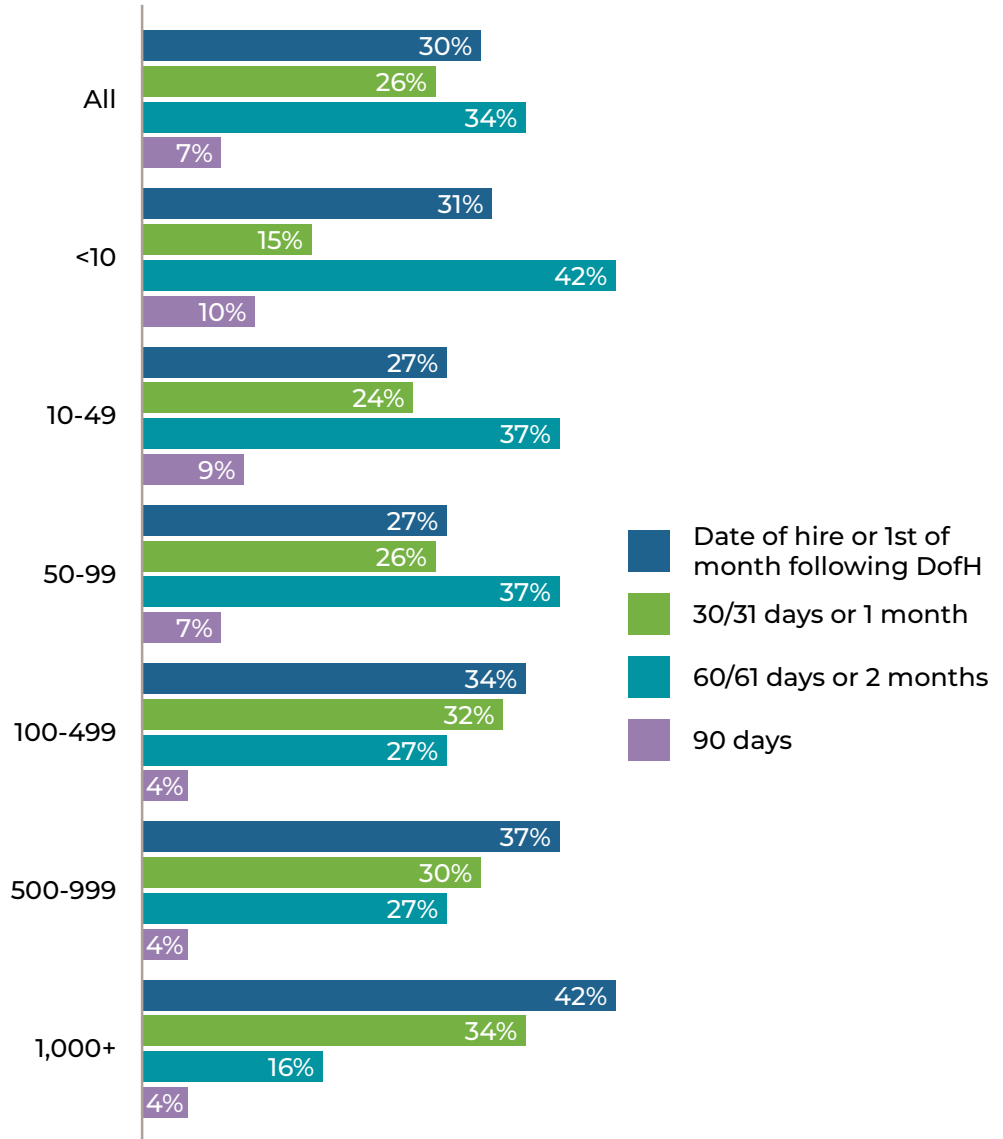
Upon closer analysis, there is also variation among employers on the day of the month for enrollment. Thirteen percent of respondents allow enrollment in major Medical on any day of the month, but the majority of participants (73%) require waiting until the first of the month.

Eligibility to enroll as a new hire



Regardless of whether it's the first of the month or in the middle, the amount of time an employee needs to wait before becoming eligible varies by company size and industry. For example, 7% of manufacturing industry respondents allow enrollment at the date of hire, compared to 25% of computer programming/processing or other computer-related industries.

Eligible to enroll by employer size



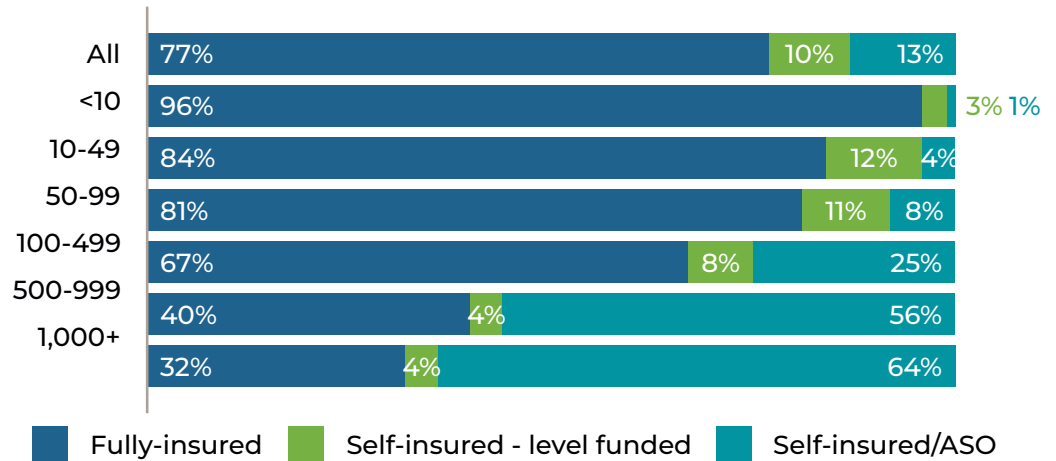
Medical Plans

Funding strategies trend by company size

Medical plan funding continues to trend based on employer size, with the vast majority of smaller companies responding remaining fully insured. As Medical premiums continue to increase, self-insurance continues to be a popular funding strategy among larger employers.

The type of self-funding that employers leverage also varies by size, with employers in the larger end of the market using an administrative-services-only (ASO) arrangement. Sixty-four percent of the largest employers responding (1,000+) and 56% in the 500-999 size range are leveraging an ASO with self-funding.

Funding methods by employer size



64%

of employers sized 1,000+ are leveraging an ASO with self-funding

56%

in the 500-999 size range are also leveraging an ASO with self-funding

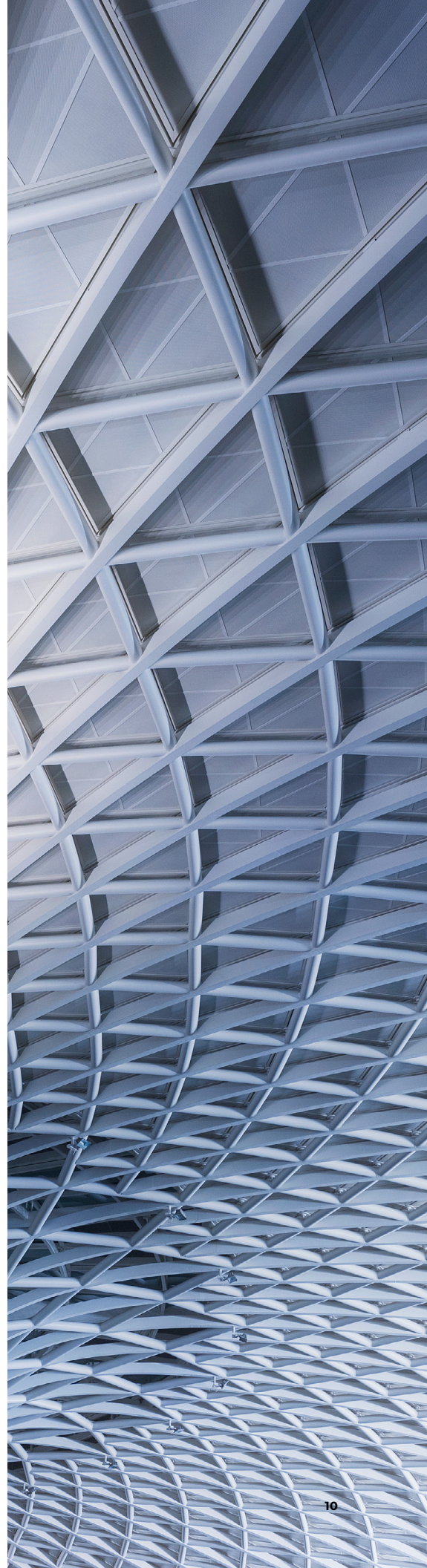
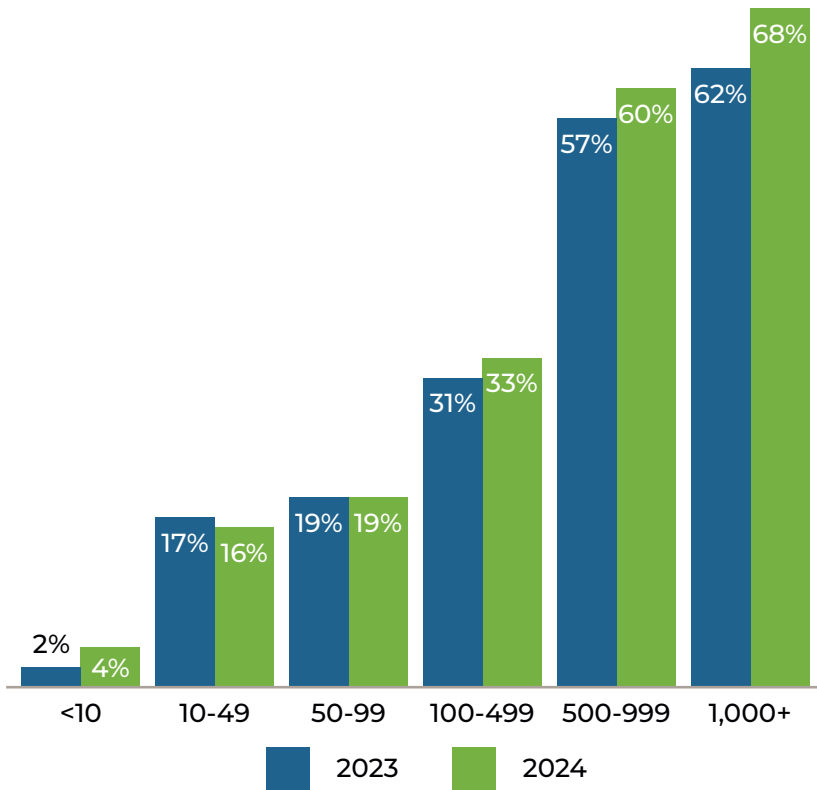
Of interest in this year’s data is the increase in the number of employers with over 100 employees shifting to self-funding. We will watch next year’s numbers to determine if this is an anomaly or reflective of a shifting market.

“As employers’ pharmacy costs continue to rise, the need for more control of what can be implemented is important. Being self-funded provides that flexibility and more employers should continue to consider it.”

BOB EISENDRATH
PHARMACY PRACTICE LEADER, ALERA GROUP

Self-funding based on employer size

Year-over-year (2023 vs. 2024)

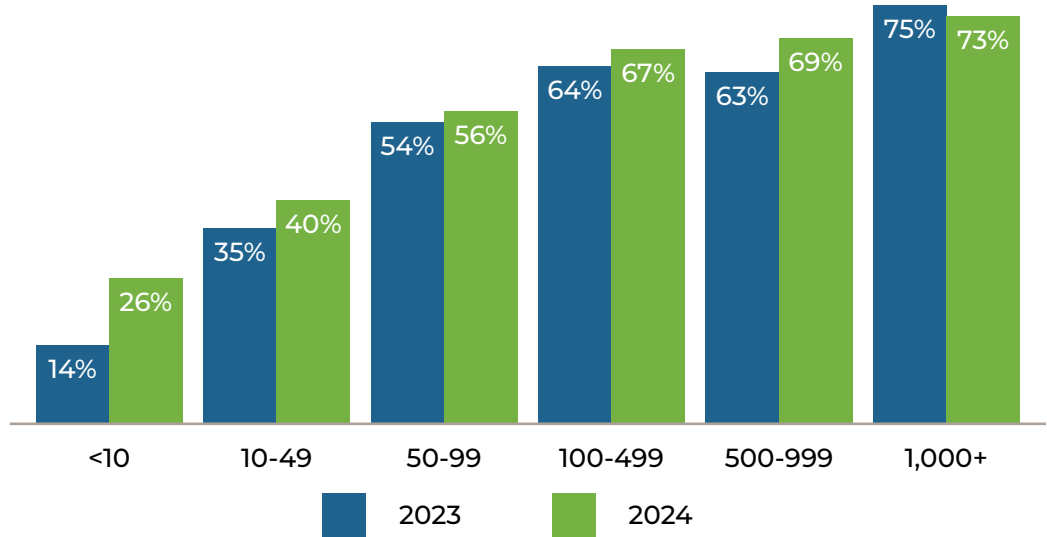


Copay plans dominate

The vast majority of survey participants (86%) offer a copay plan. The number of companies offering a qualified high-deductible health plan (QHDHP) is slightly higher than the prior year, up from 47% in 2023 to 52% in 2024.

Usage of HDHP

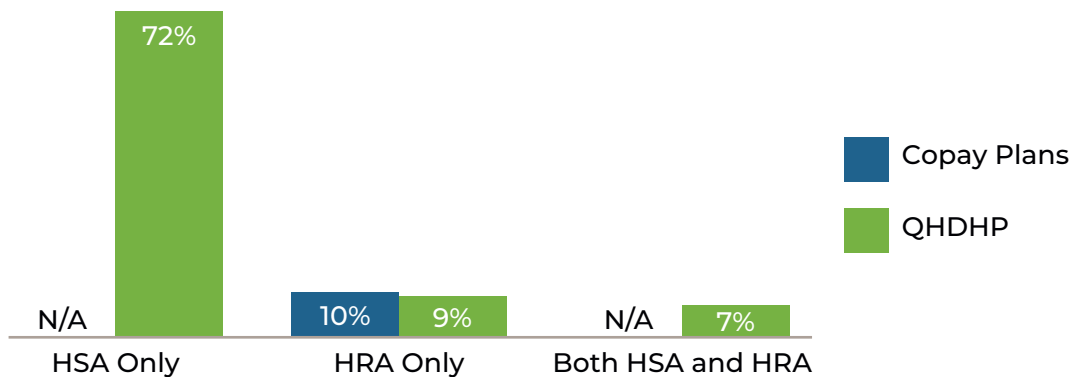
Percentage of participants offering QHDHP



HSA and high-deductible plans go hand-in-hand

Of those offering a QHDHP, 79% also offer a Health Savings Account (HSA). Significantly fewer offer a Health Reimbursement Arrangement (HRA), at just 16%. It is important to note that copay plans, which are offered by the majority of participants as an option, are not eligible for an HSA account, and only 10% of these plans offer an HRA.

Percentage of plans offering a savings account



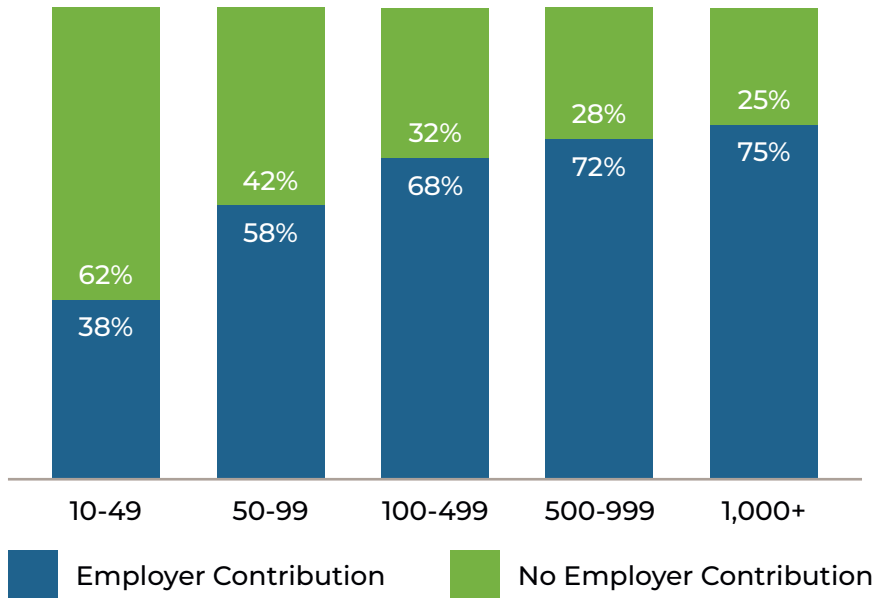
“HDHPs were born out of the hope to drive consumerism, yet we find our healthcare system lacks transparency and people lack the time to do enough research. Providing direction of care assistance helps employers create successful steerage.”

MARY DELANEY

POPULATION HEALTH PRACTICE LEADER, ALERA GROUP

The percentage of employers contributing to an HSA plan varies by size of company. The most commonly offered annual HSA amounts are \$500 for an individual and \$1,000 for a family. Although offered less frequently, average employer contributions to HRAs, which are entirely employer-funded accounts, are higher than contributions to HSAs.

Percentage of plans offering an employer contribution in the HSA



EMPLOYER CONTRIBUTIONS

	HSA EE ONLY	HSA FAMILY	HRA EE ONLY	HRA FAMILY
Median	\$800	\$1,440	\$2,000	\$4,000
Most common	\$500	\$1,000	\$1,000	\$2,000

73%

of the Medical plans offered are PPO/POS making them the most popular

26%

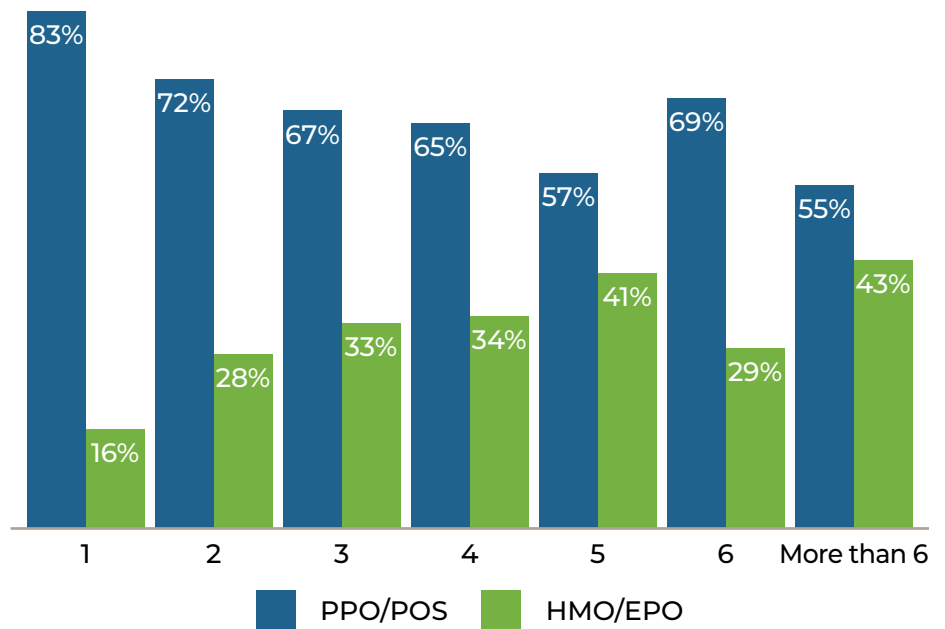
of plans offered are HMO/EPO, regardless of whether its a QHDHP or a copay

PPO plans still popular

Based on the survey results, regardless of whether it's an HDHP or copay, the network type preferred provider organization (PPO) and point of service (POS) plans remain the most popular, representing 73% of plans vs. 26% offering a health maintenance organization (HMO) and exclusive provider organization (EPO).

If a participant reported offering just one Medical plan, 83% of the time that plan was a PPO or POS.

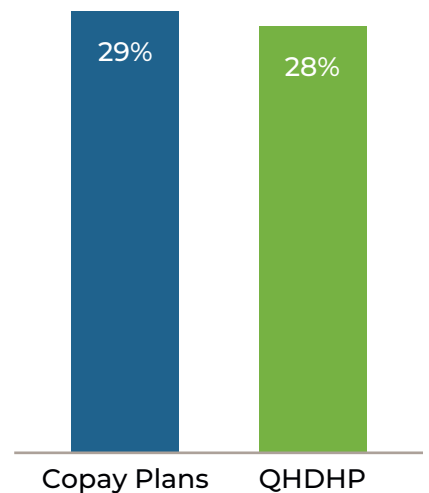
Type of plan offered by number of plans offered



When comparing enrollments based just on type of plan (copay vs. QHDHP), there isn't much of a difference. There are a number of factors that can impact enrollments, including employer contributions to savings accounts. For QHDHP, if an employer contributes, the average enrollment is 31% compared to 24% if there is no employer contribution.

(These figures are not enrollment by account — only enrollment by plan.)

Average enrollments

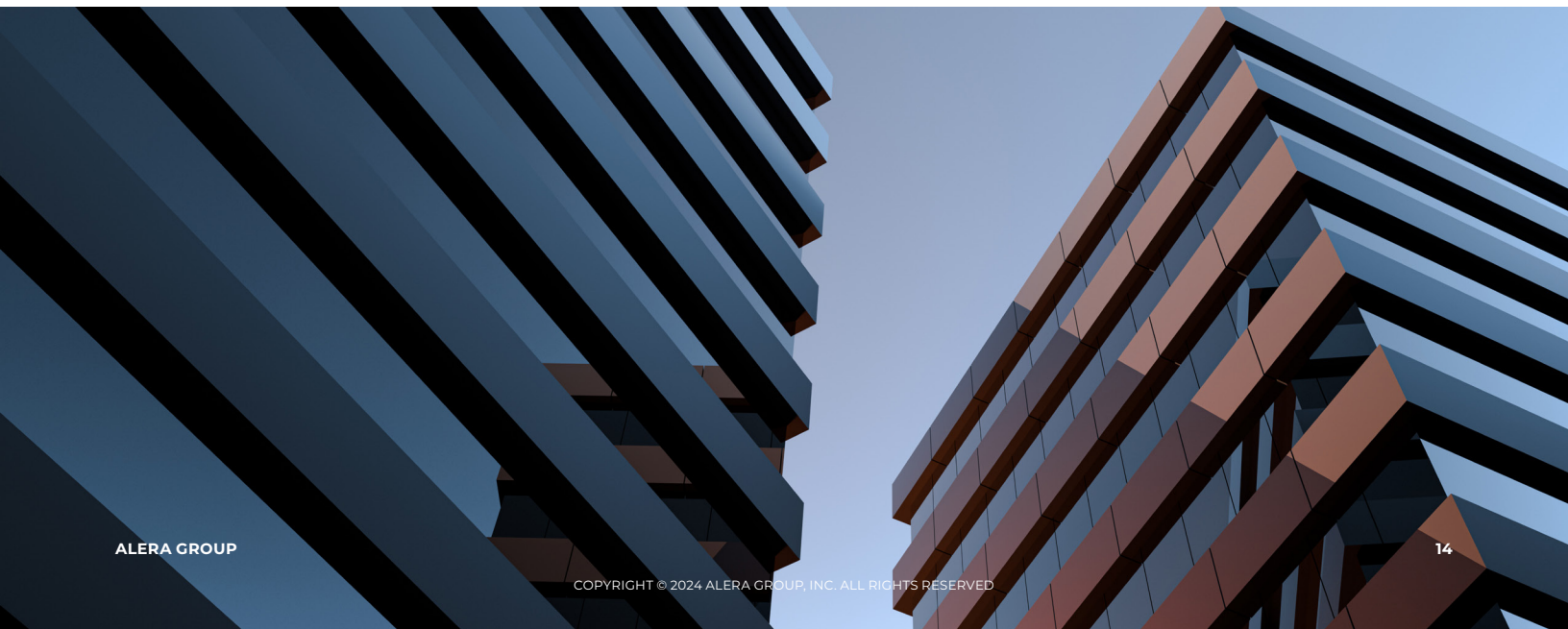
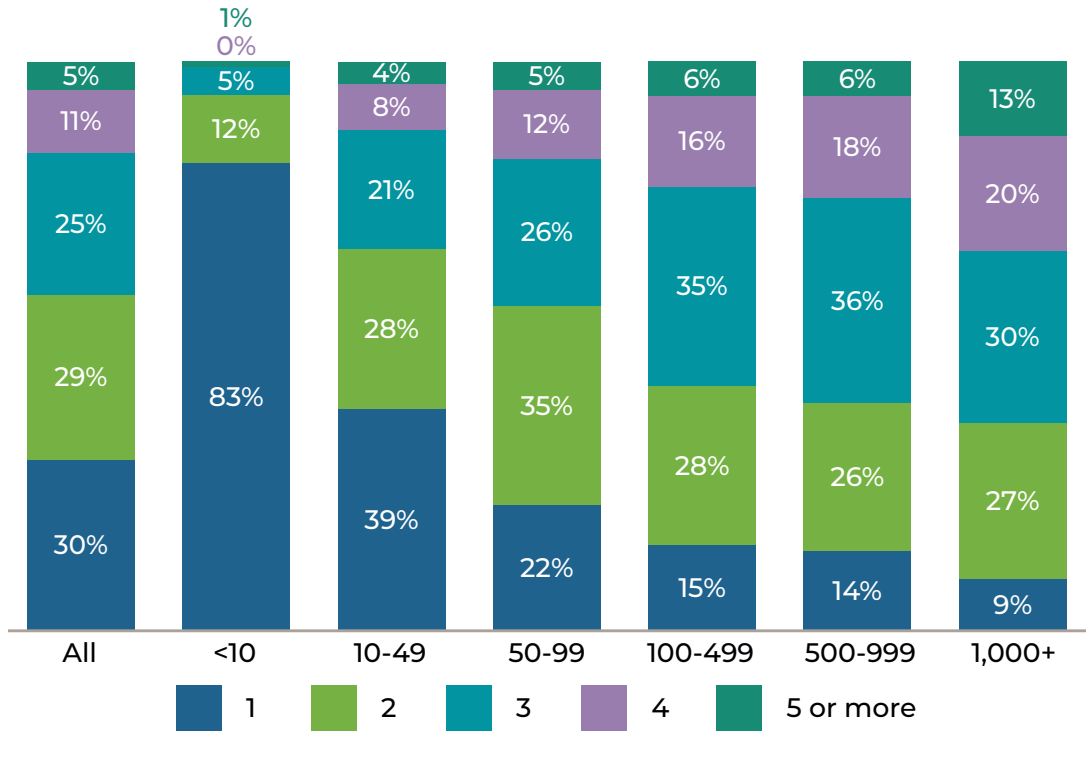


Multiple Medical plan offerings common

Participants typically offer more than one Medical plan. Doing so allows employees to pick from a variety of features, one of which is the amount of individual deductible. The smaller employers (under 50) typically offer 1-3 Medical plans. The larger employers in the survey (500+) are more likely to offer 2-4 Medical plans.

Number of Medical plans offered by employer size

Percentage of participants





60%

of survey participants offer a midrange deductible of between \$2,000 and \$3,999

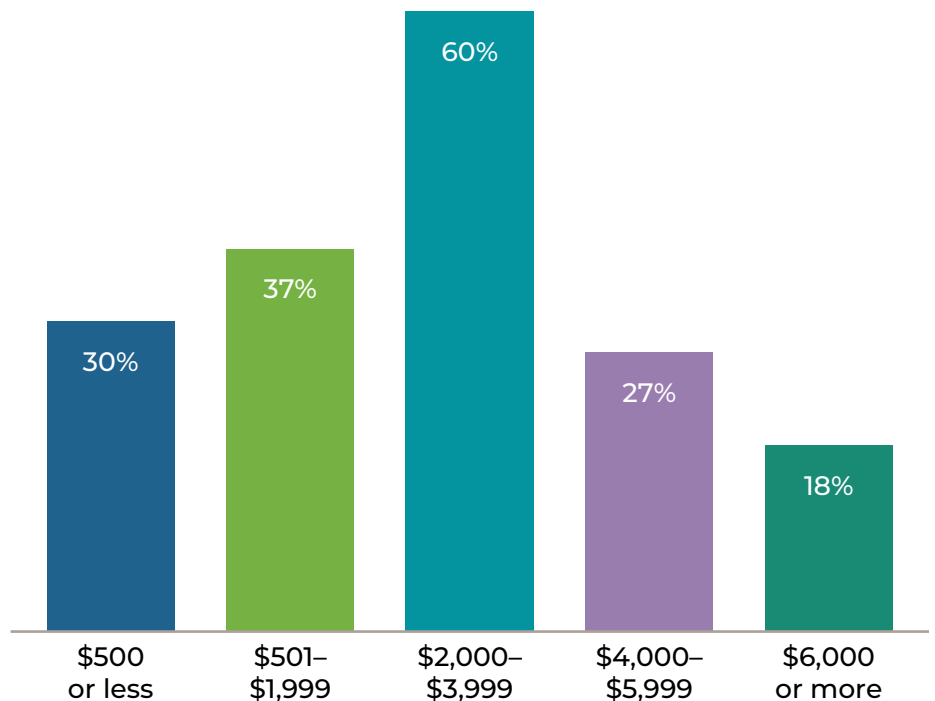
45%

offer a plan with an in-network, individual deductible of more than \$4,000

Deductibles

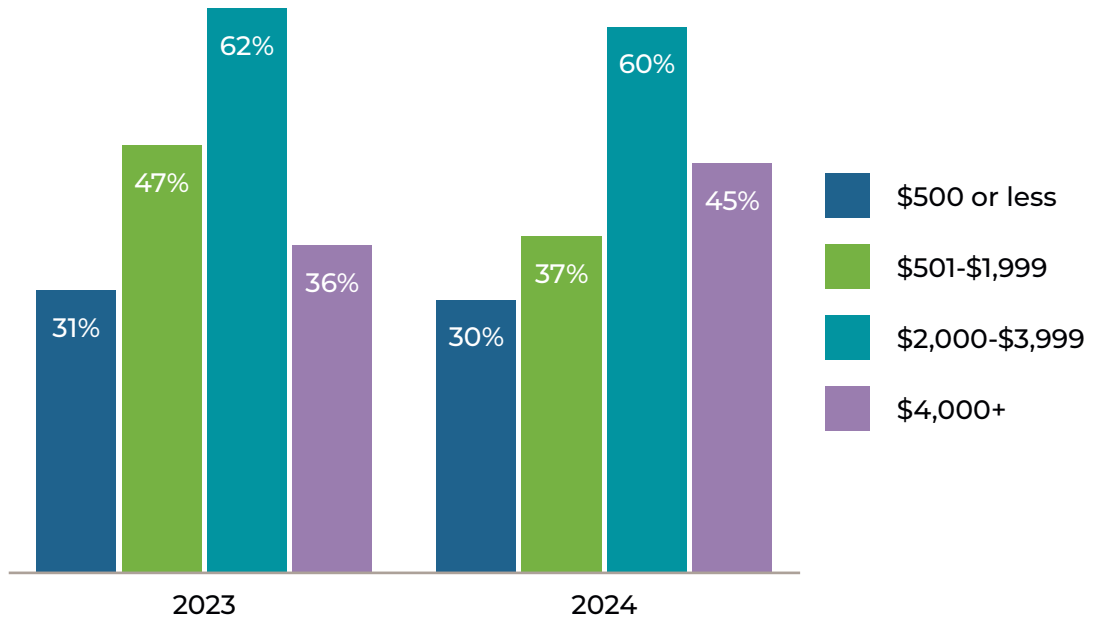
With respect to deductibles, the majority of survey participants (60%) offer a midrange deductible of between \$2,000 and \$3,999. This is down slightly but mainly consistent with last year's result of 62%. Based on survey responses, 30% offer at least one plan with a deductible of \$500 or less. Close to half of survey participants (45%) offer a plan with an in-network, individual deductible of more than \$4,000.

Percentage of participants offering a plan with an in-network, individual deductible of...



When comparing this year’s results to last year’s responses, there is a notable jump in the number of participants offering deductibles of \$4,000 or more. While it is too early to determine if this will become a trend, it is something to keep an eye on in next year’s data.

Percentage of participants offering plans with a deductible of...



The following snapshot of plan designs is from Alera Group’s proprietary dashboard.

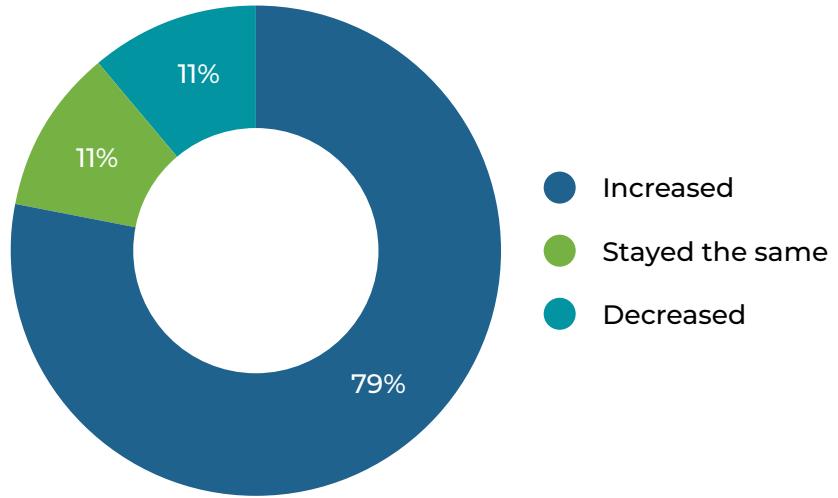
IN-NETWORK PLANS (MEDIANS SHOWN)

	PPO/POS	HMO/EPO	QHDHP
Deductible	\$2,000	\$1,500	\$3,200
Coinsurance Percentage member pays	20%	10%	10%
Out-of-pocket max	\$6,350	\$6,350	\$6,000
Office visit copay	\$25	\$25	NA
Specialist copay	\$50	\$50	NA
ER copay	\$300	\$250	NA
Urgent care copay	\$50	\$50	NA

Premiums continue to rise

After any plan design changes, 79% of the Medical plans experienced a rate increase in this year's survey. The median increase was 8%, and the most common increase was 5%.

Final rate change after any plan design changes



79%

of the Medical plans in the survey experienced a rate increase

+5%

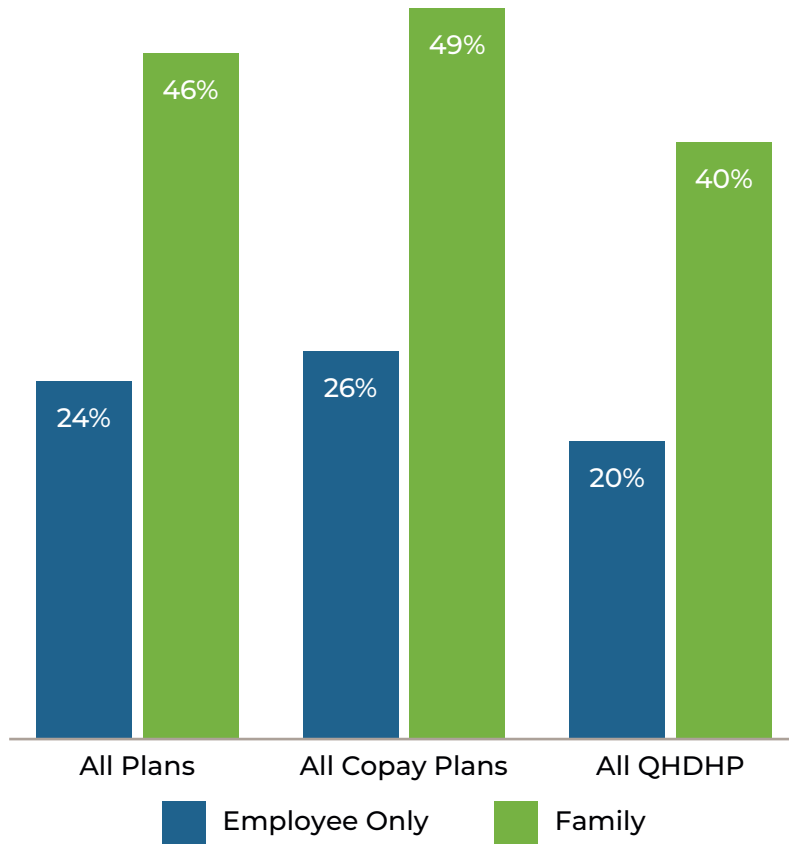
was the most common rate change compared to last year's data

Employee contributions offset costs

To offset these costs, on average, employees are asked to pay 24% of the cost for the Medical plan. Employees with copay plans average a higher contribution, with an average copay contribution of 26% vs. 20% for a QHDHP.

With respect to employee contributions, the percentage is higher for a family rate compared to employee-only.

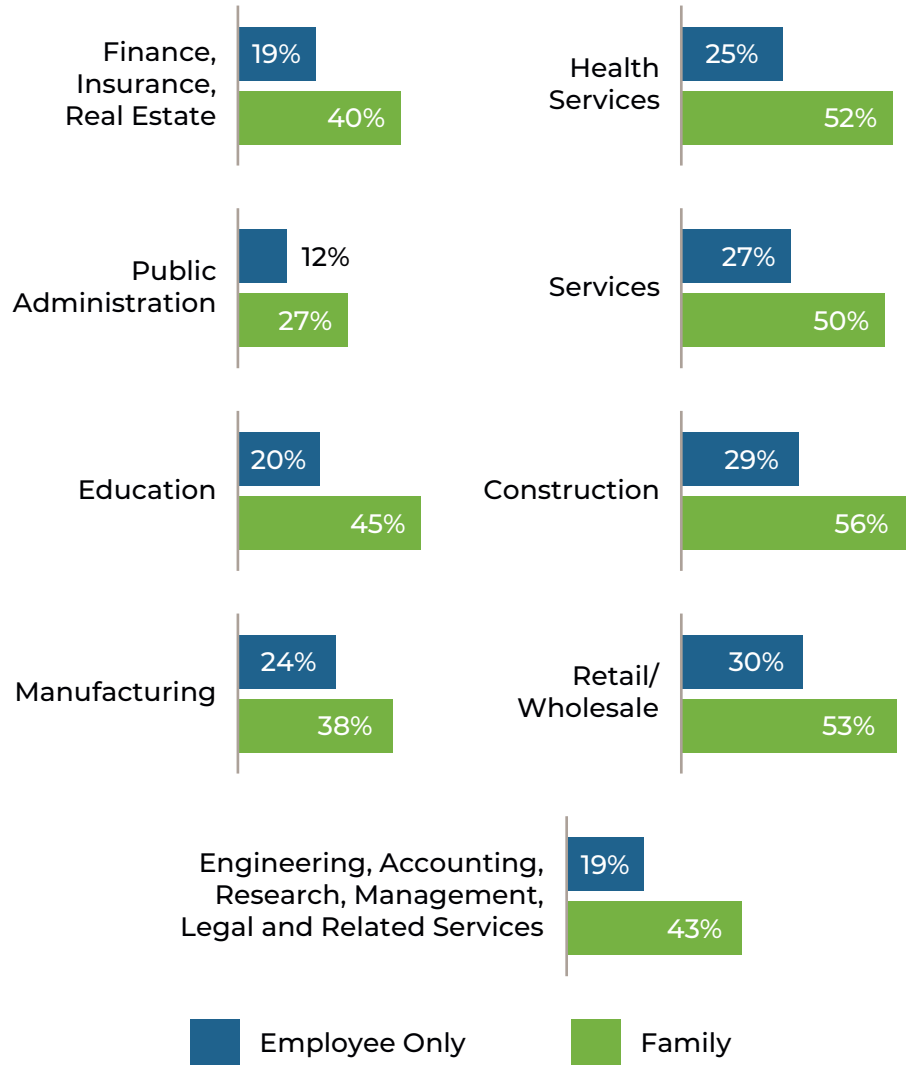
Average employee contribution percentage



Industry snapshot of employee contributions

Employee contributions vary by industry, with the Retail and Wholesale Trade and Construction industries at the high end of employee contributions and Public Administration at the lower end of the range.

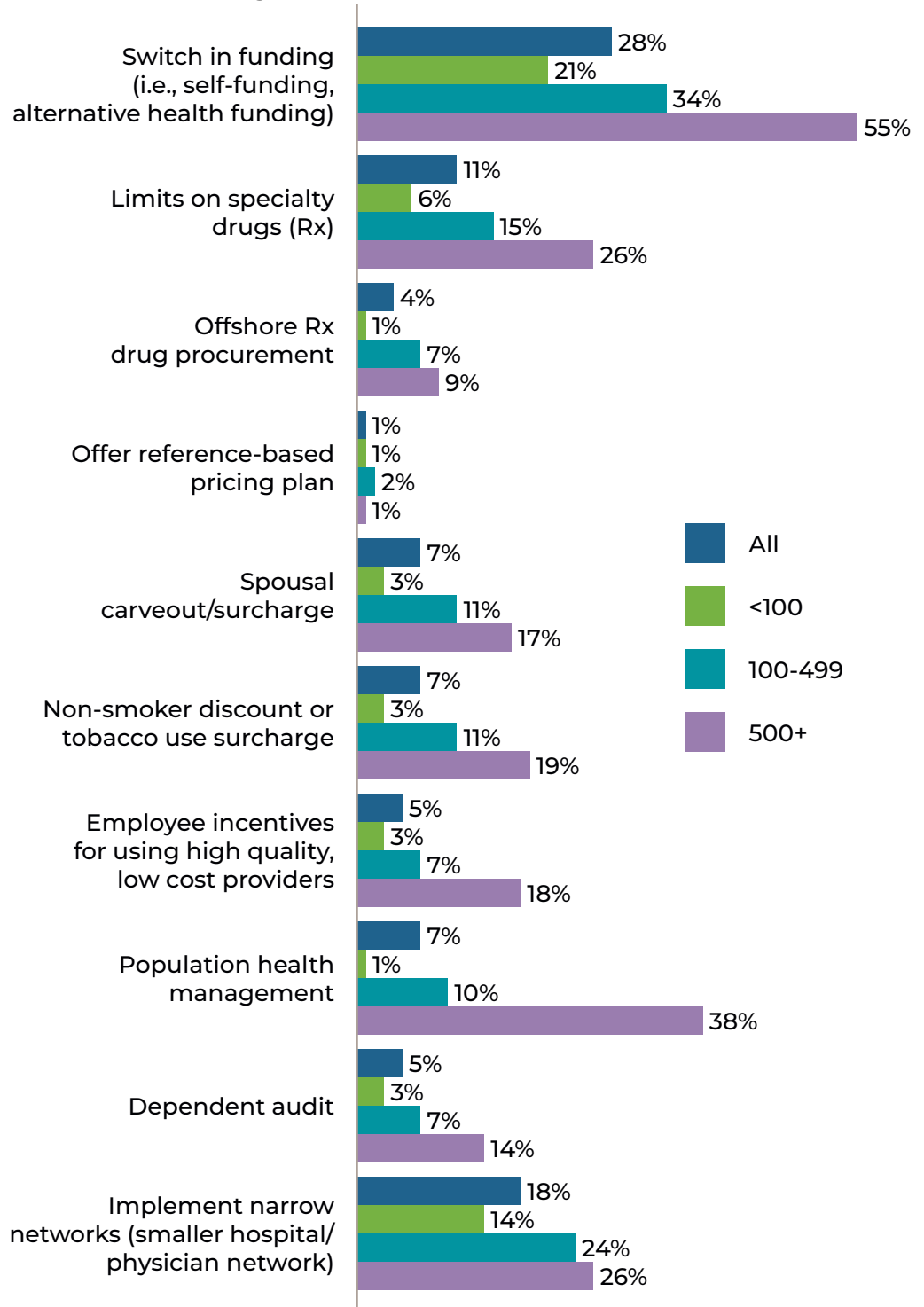
Employee contribution percentage by industry



Cost containment strategies

Measures used to control costs are more frequently used by large employers. The most commonly used are self-funding and narrow networks. Earlier we highlighted that there was some increase in the number of employers using self-funding of Medical Insurance. The results to this question are in line with that finding, as 6% reported they changed their funding in the past year.

Cost-control strategies



Another means of controlling cost is to offer employees a financial incentive to "opt-out" of Medical Insurance coverage. The results of our survey show that this isn't frequently used, however, with only 4% of employers reporting that they offer employees an opt-out incentive to decline Medical Insurance.

96%

of participants report their health or Medical plans are embedded within their Rx plans

46%

of the Rx plans have four formulary tiers

Pharmacy (Rx)

This year's survey includes Rx details on almost 13,000 plans.

- Ninety-six percent of survey participants reported that their Rx plan is embedded within their health or Medical plan, provided by their Medical carrier.
- Forty-six percent of the Rx plans have four formulary tiers.

Although it is too early to determine if this is a trend, a comparison of benchmarking report data between 2023 and 2024 indicates there is an increase in the percentage of Pharmacy plans with five tiers.

“As the pharmacy marketplace continues to become more complex, access to your own data is imperative. The best way to identify clinical and cost opportunities is reviewing your data with an expert.”

BOB EISENDRATH
PHARMACY PRACTICE LEADER, ALERA GROUP

IN-NETWORK PLANS (PERCENTAGE OF RX PLANS)

TIERS	2023	2024
1	4%	2%
2	1%	1%
3	39%	33%
4	47%	46%
5	10%	18%

There is an increase in the percentage of Pharmacy plans with five tiers when comparing data between 2023 and 2024.

For copay plans, 12% require a separate deductible, outside of what is required for the Medical plan. The median annual deductible is \$250.

EMPLOYER CONTRIBUTIONS

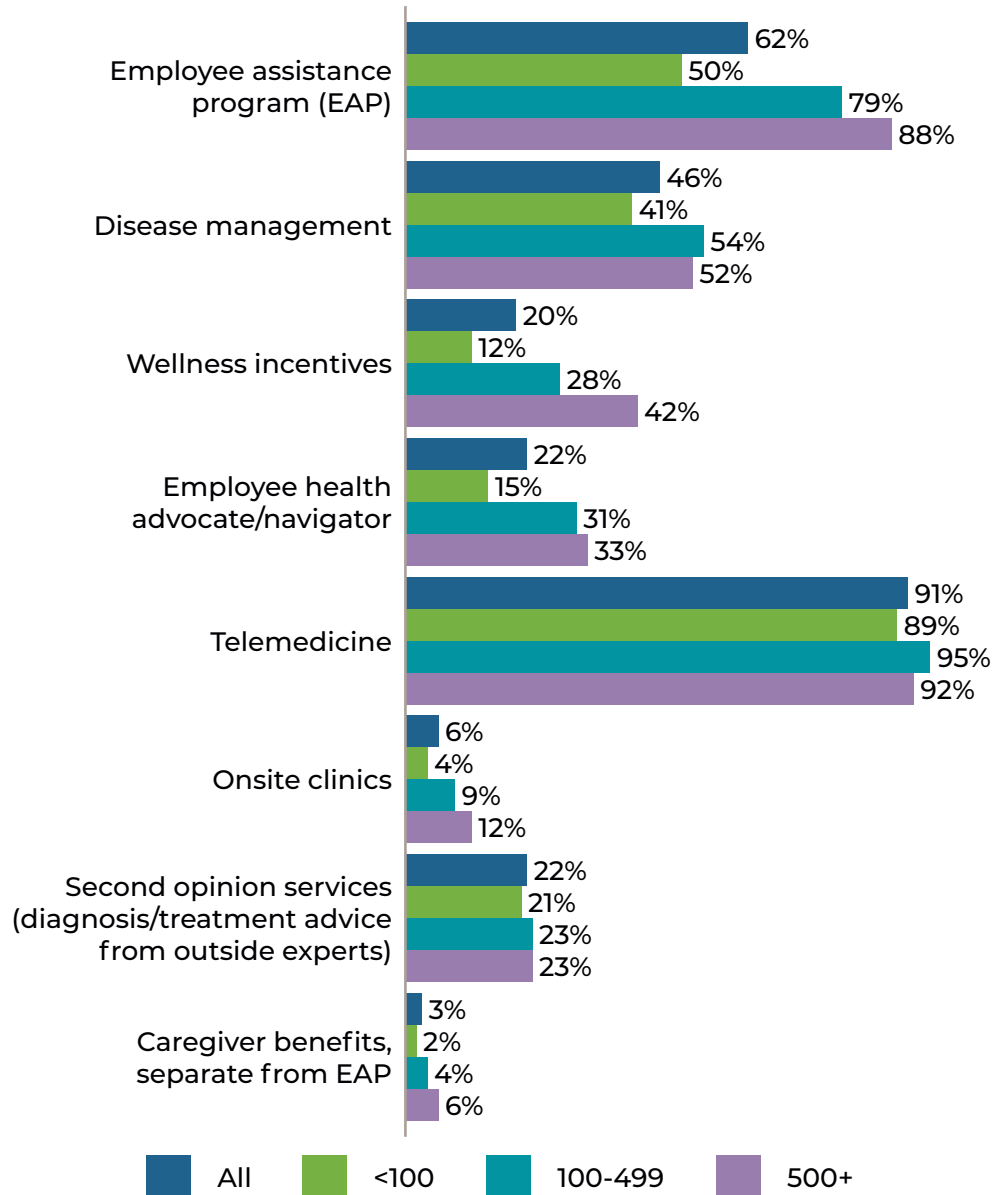
	GENERIC	BRAND FORMULARY	BRAND NON-FORMULARY	SPECIALTY PREFERRED
	Retail	Retail	Retail	Retail
Most common	\$10	\$35	\$75	\$250
Median	\$10	\$40	\$75	\$150

Health and Productivity

Telemedicine trend continues

Employers continue to leverage a variety of health-and-productivity strategies, particularly telemedicine and employee assistance programs (EAPs). In fact, telemedicine programs are offered by 91% of total survey respondents and cut across all companies, regardless of size. Conversely, only 6% of employers offer on-site clinics to employees.

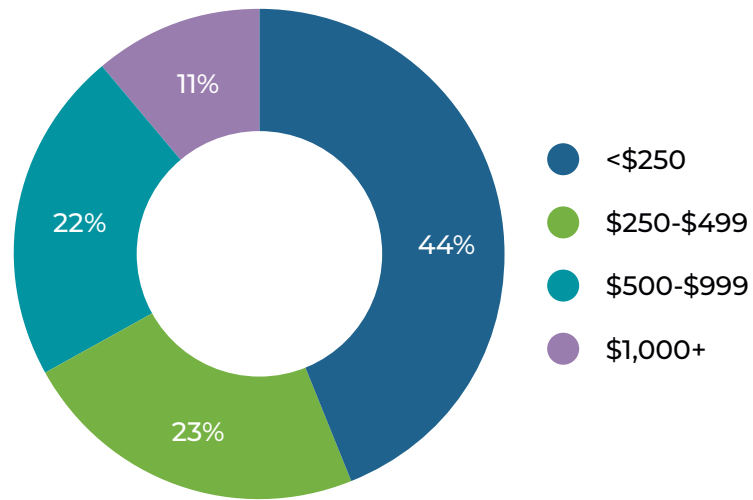
Additional benefits offered



Wellness incentives vary significantly by size of employer, with 42% of larger employers (500+) offering wellness, compared to just 12% of smaller companies (under 100). Of participants offering a wellness incentive, 44% reported an annual value of less than \$250.

Wellness incentive

Wellness incentives vary by employer size



91%

of survey respondents offer telemedicine programs

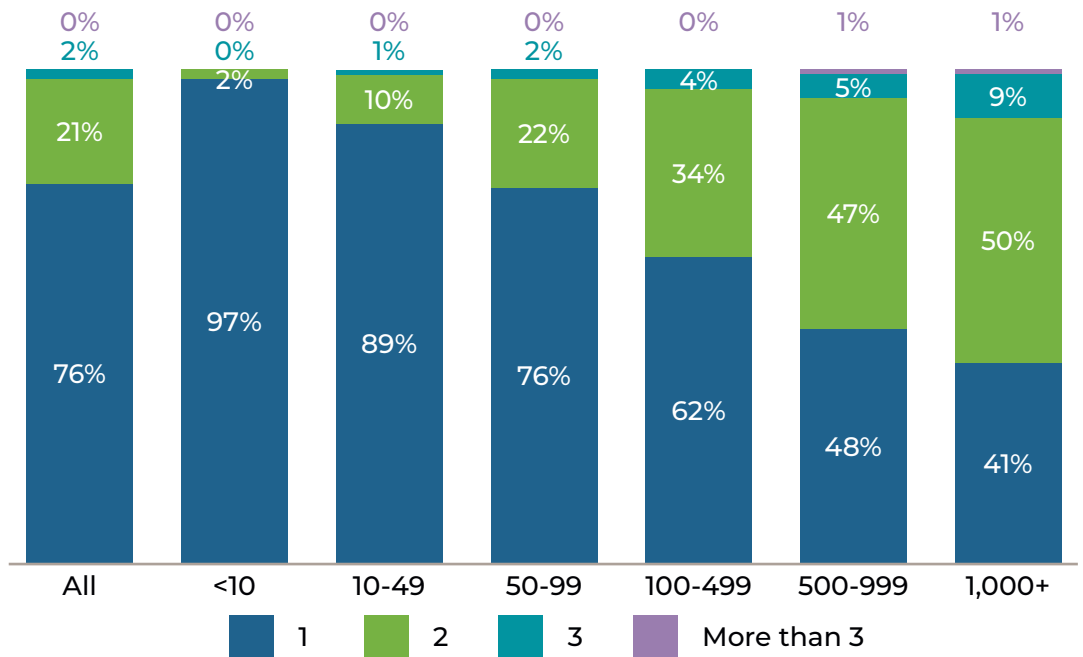
44%

reported an annual value of less than \$250 for wellness incentives

Dental Insurance

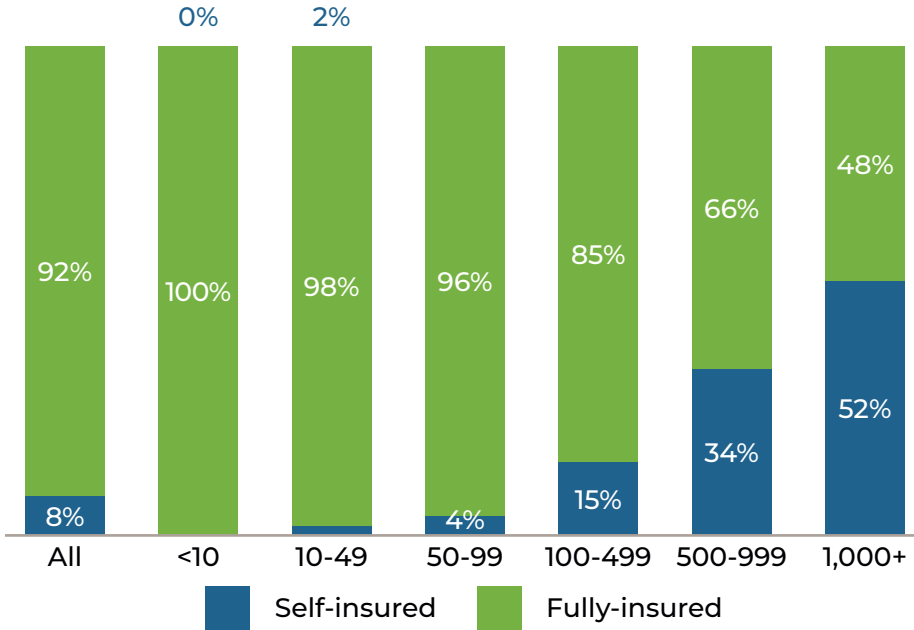
Dental coverage remains overwhelmingly popular — 90% of participants offer Dental Insurance, which is consistent with prior year results. Overall, 76% of the participants in the survey offer one Dental plan. As seen with Medical and other insurance products, the larger the employer, the more variety in the offering. The more Dental plans an employer offers, the more likely it is that the employer will have at least one plan that offers orthodontics.

Number of Dental plans offered



More companies fully insure than self-insure their Dental. The only exception is the 1,000+ group.

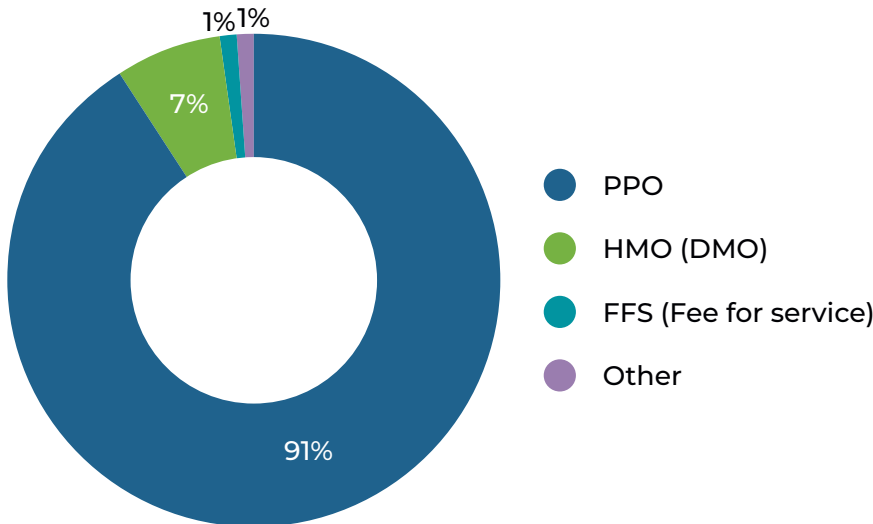
Funding of Dental insurance



Majority offer PPO plans

With respect to plan type, out of the over 6,300 Dental plans in our survey, the vast majority are PPO-type plans.

Type of Dental plans



“Strength of network and associated in-network savings continue to be driving forces in Dental plan selection.”

DAVE BORTNEM
MANAGING PARTNER,
ALERA GROUP

56%

of Dental plans did not experience a rate change from last year

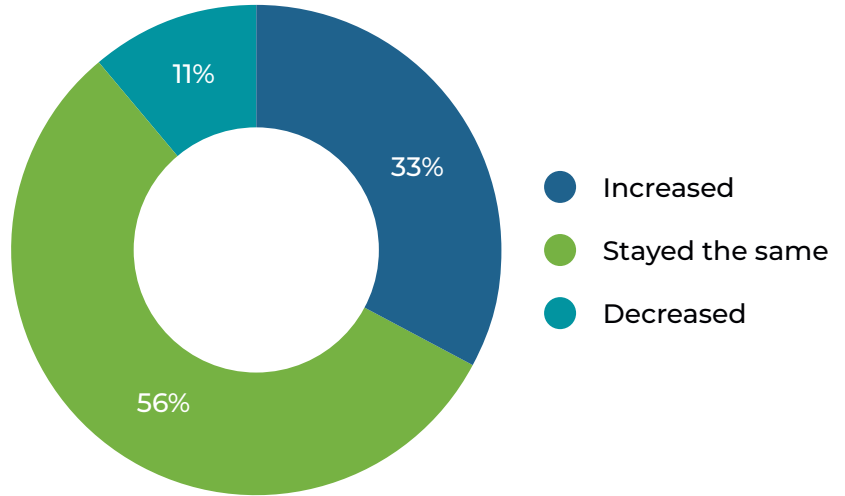
55%

of survey respondents include orthodontic coverage

Dental rates remain consistent

Unlike health insurance coverage, 56% of Dental plans did not experience a rate change from last year.

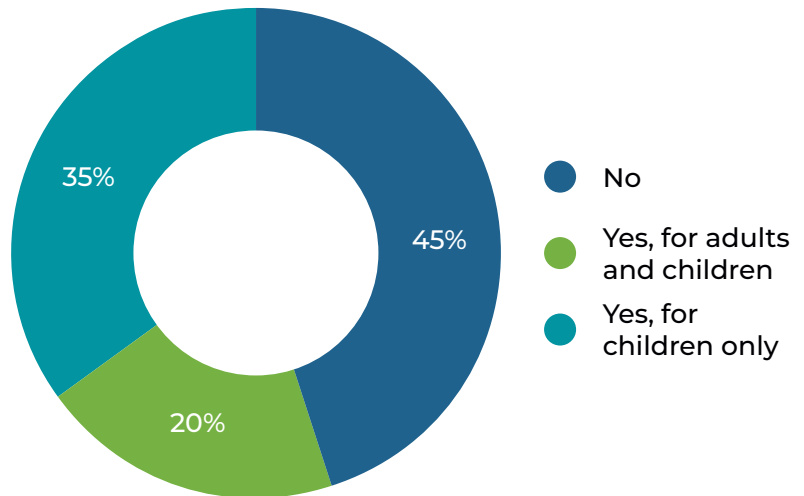
Final rate change compared to last year



Employers split on orthodontic coverage

Fifty-five percent of survey respondents include orthodontic coverage, with 35% being restricted to children only.

Does this plan include orthodontic coverage?

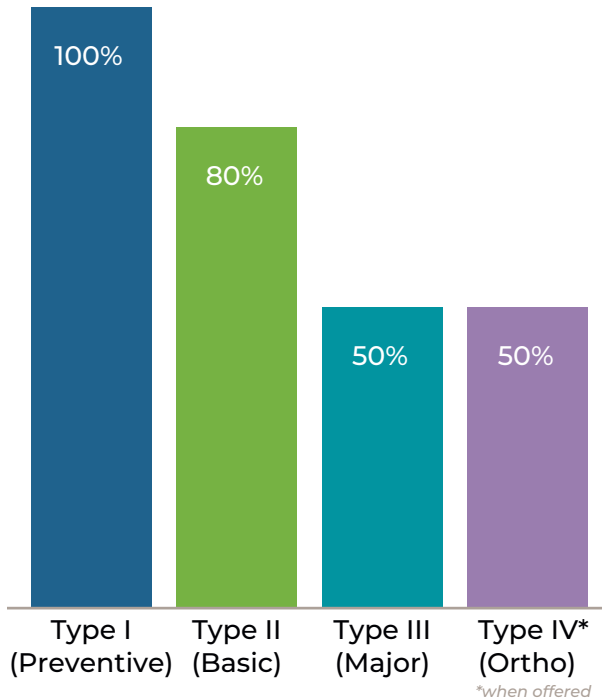


Dental coverage highlights

- The median in-network annual max and most offered is \$1,500.
- The second-most commonly offered is \$1,000.
- Twenty-five percent of Dental plans have an in-network annual max of \$2,000 or more.
- The most commonly offered deductibles on PPO plans are \$50 for an individual and \$150 for a family.
- Orthodontic median lifetime max is \$1,500, with a range from \$250 to \$5,000.
- As seen in prior years, insurers typically cover 100% of preventative care but will reduce the coinsurance amount as the type increases in severity.

In-network coinsurance

Most common offered



25%

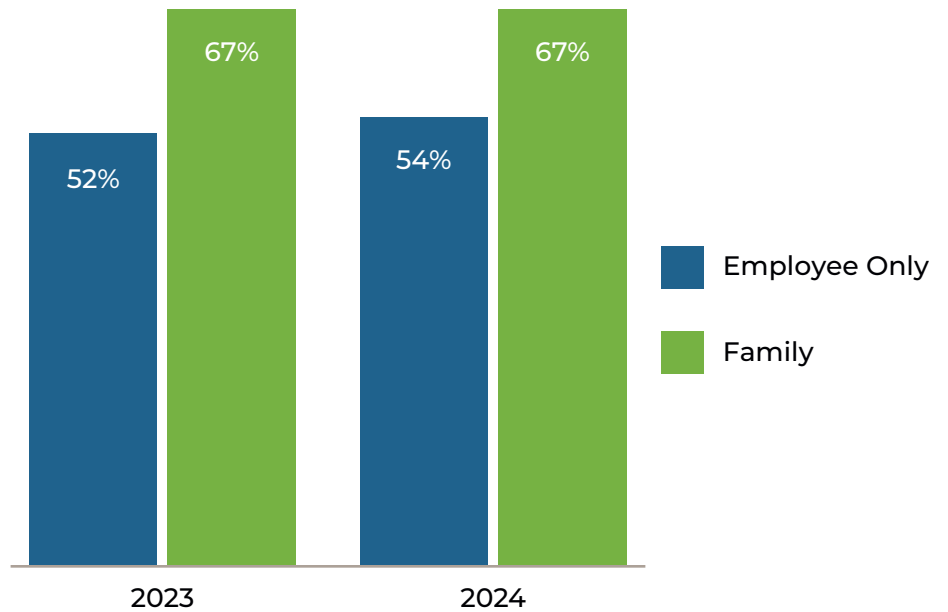
of Dental plans have an in-network annual max of \$2,000 or more

Dental employee contributions

Employee contribution requirements are relatively stable from 2023 to 2024, with a slight change in the employee-only rate. It will be interesting to see if that rate change continues for another year.

On average, the employee pays for 54% of the employee-only premium and 67% of the family premium, a difference of 13 percentage points.

Average Dental employee percentage contributions

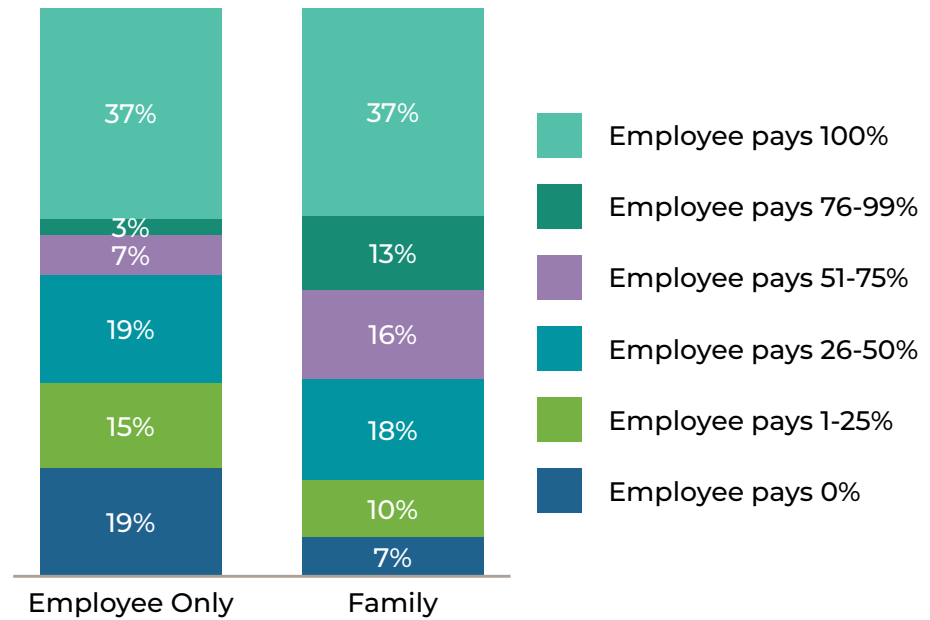


More employers are willing to pay for the employee's Dental coverage while requiring the employee to pay toward coverage for dependents.

Thirty-seven percent of Dental plans included in the survey require that the employee pay 100% of the cost. It is not a surprise to see that percentage consistent with the employee-only and family rate tiers. Employers requiring an employee to pay the cost for an employee-only rate tier are going to require the same at the family rate tier.

More employers are willing to pay for the employee’s Dental coverage while requiring the employee to pay toward coverage for dependents. For 19% of the plans in the survey, the employee doesn’t pay any of the premium for the employee-only. That decreases to 7% when looking at the family rate tier.

Distribution of employee contribution



37%

of Dental plans require that the employee pay the entire cost

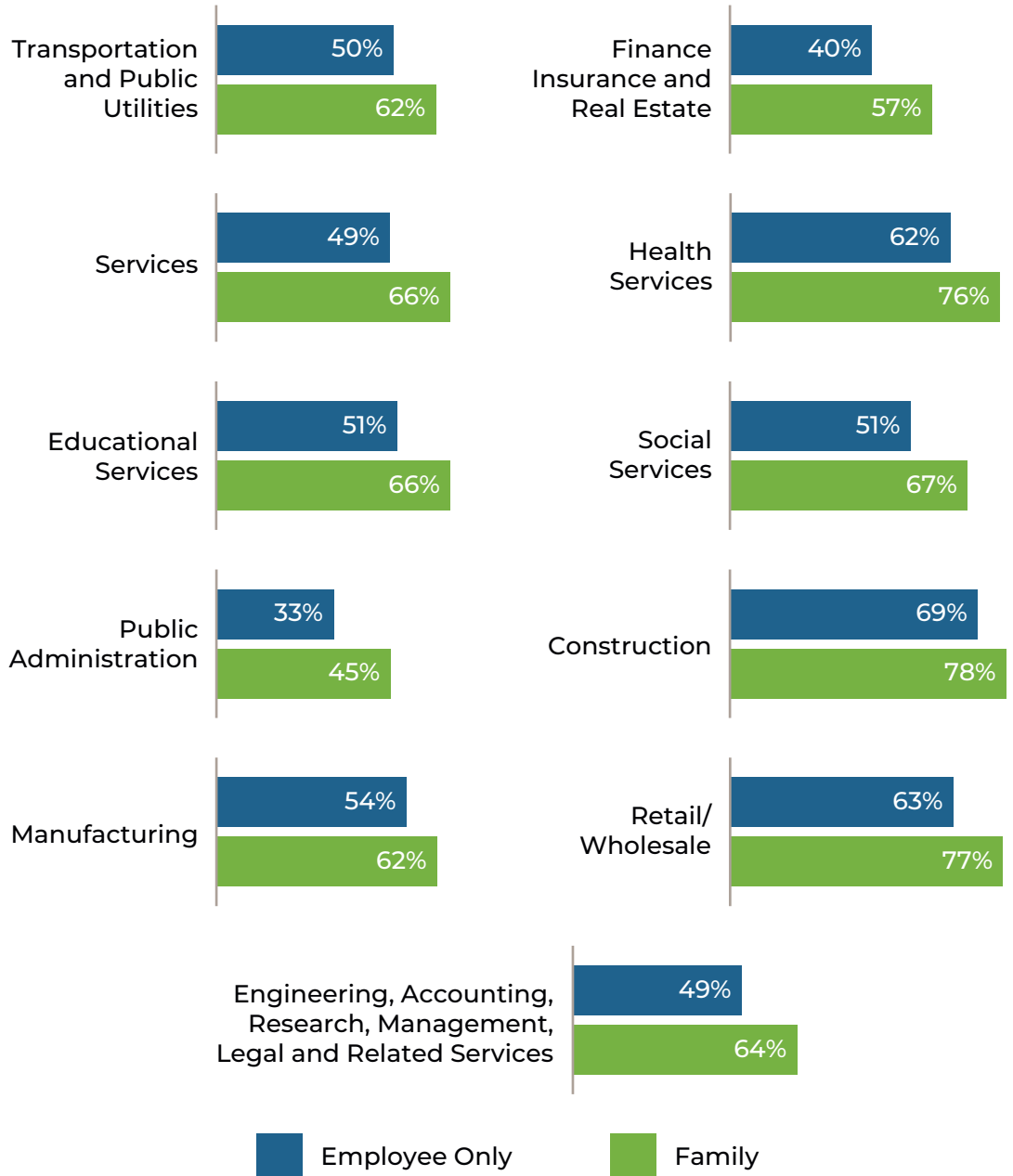
67%

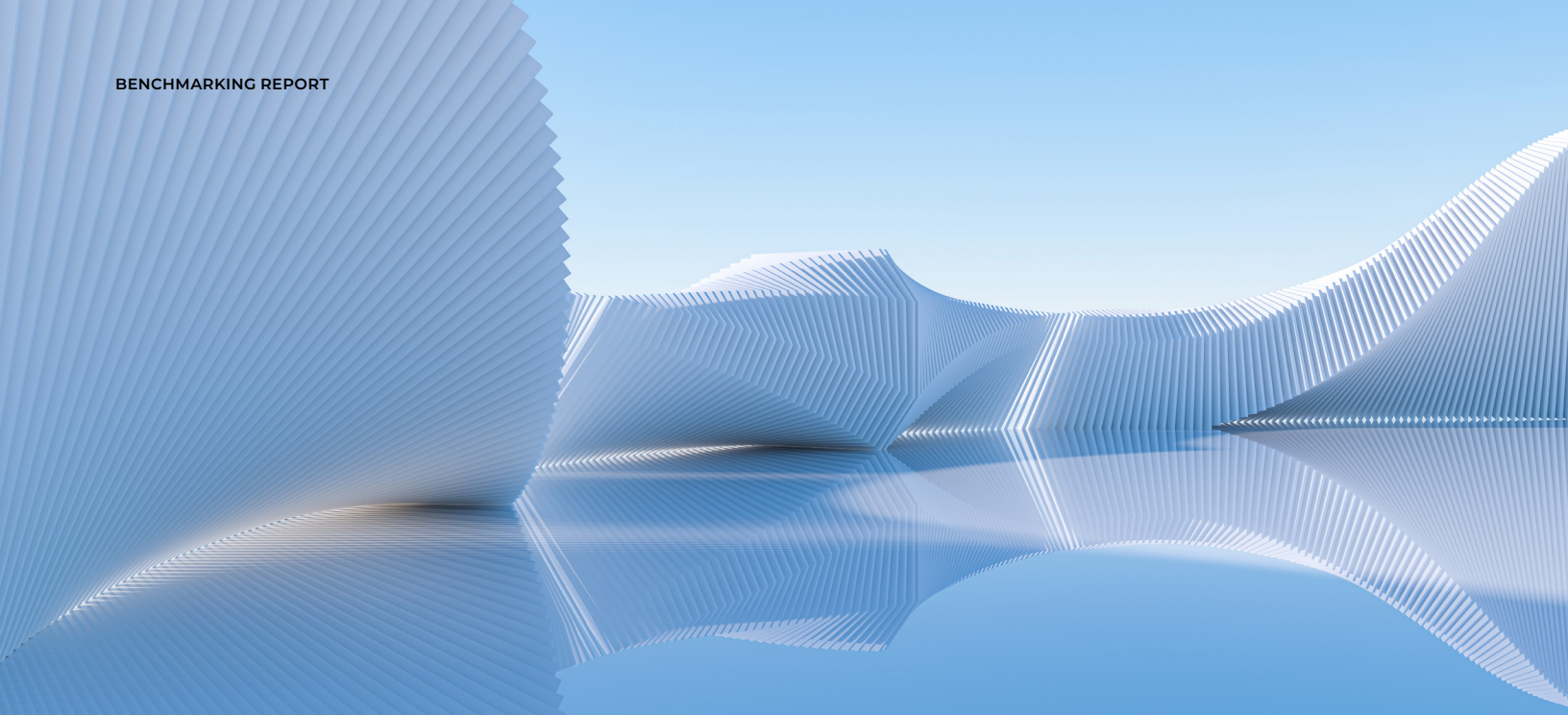
is the average employee percentage contribution for family premiums

Dental coverage by industry

Based on results by industry, Public Administration employees contribute the least, at an average of 33%. Employees in the construction industry contribute the most, at 69% on average, which is consistent with the prior year.

Employee contribution percentage

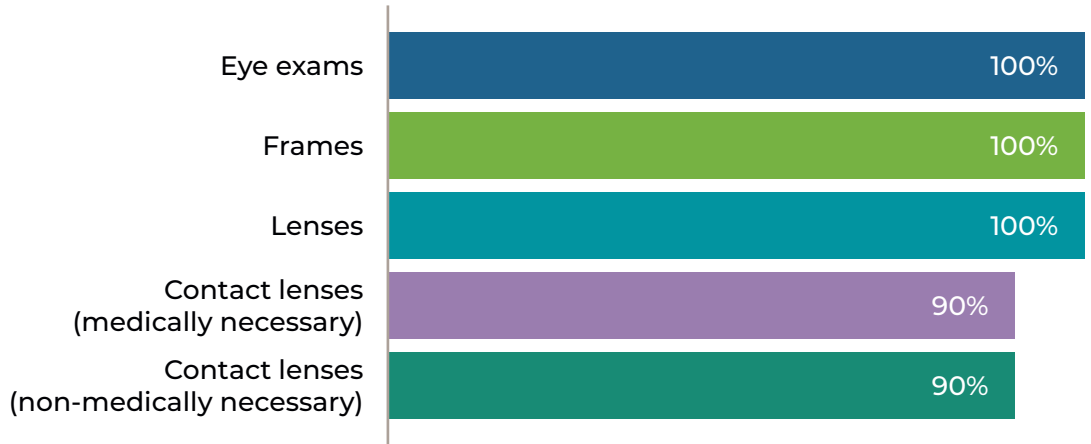




Vision Insurance

The vast majority of Vision plans cover exams, frames, lenses and contacts (regardless of whether the contacts are Medically necessary).

Included in Vision plan



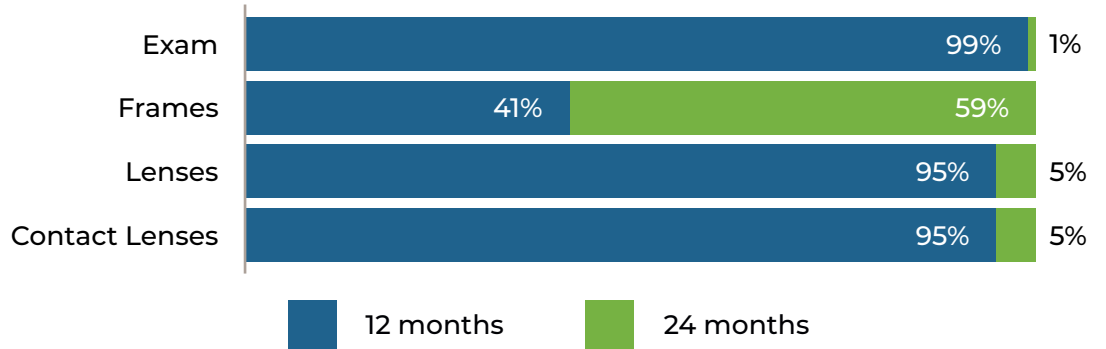
58%

of the premiums for Vision are paid exclusively by the employee

The frequency of exams and associated costs remain steady from last year, with frames allowed every two years by more than half of the participants.

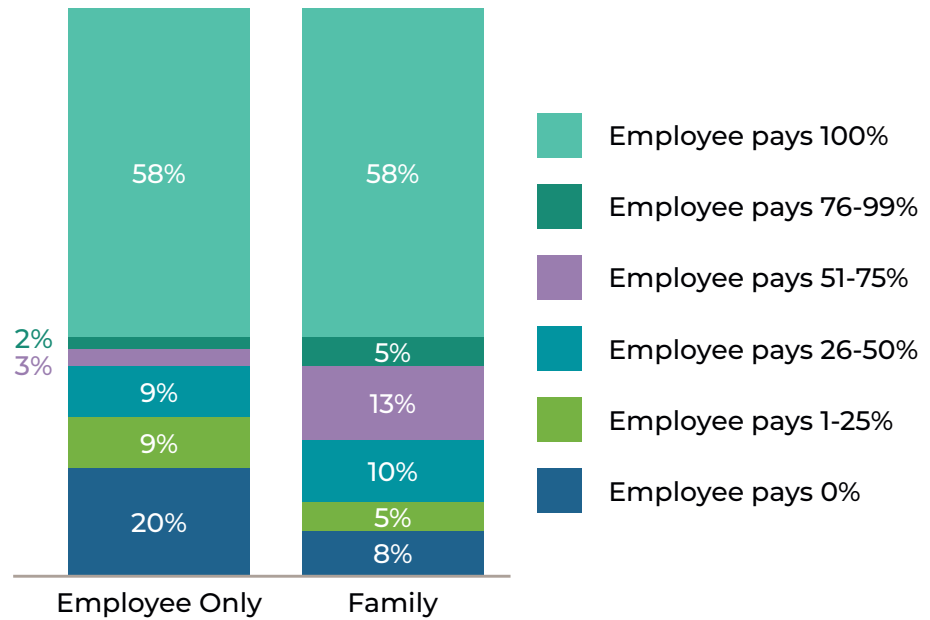
Frequency period

Percentage of Vision plans



As seen last year, 58% of the premiums for Vision are paid exclusively by the employee. While 20% of employers reported paying 100% of the employee-only premium, that number drops to 8% under family plans.

Percentage of Vision premiums paid by employee



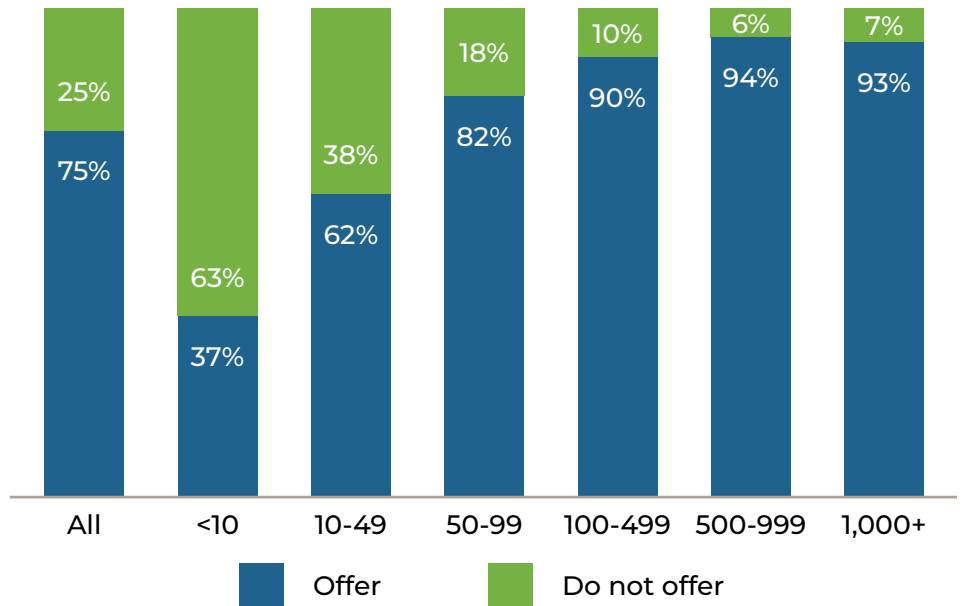


Life Insurance

Life and AD&D continue to be popular benefits, with 75% of participants offering Life Insurance. As seen with other insurance products, the larger the company, the greater the likelihood that the employer offers Life and AD&D Insurance.

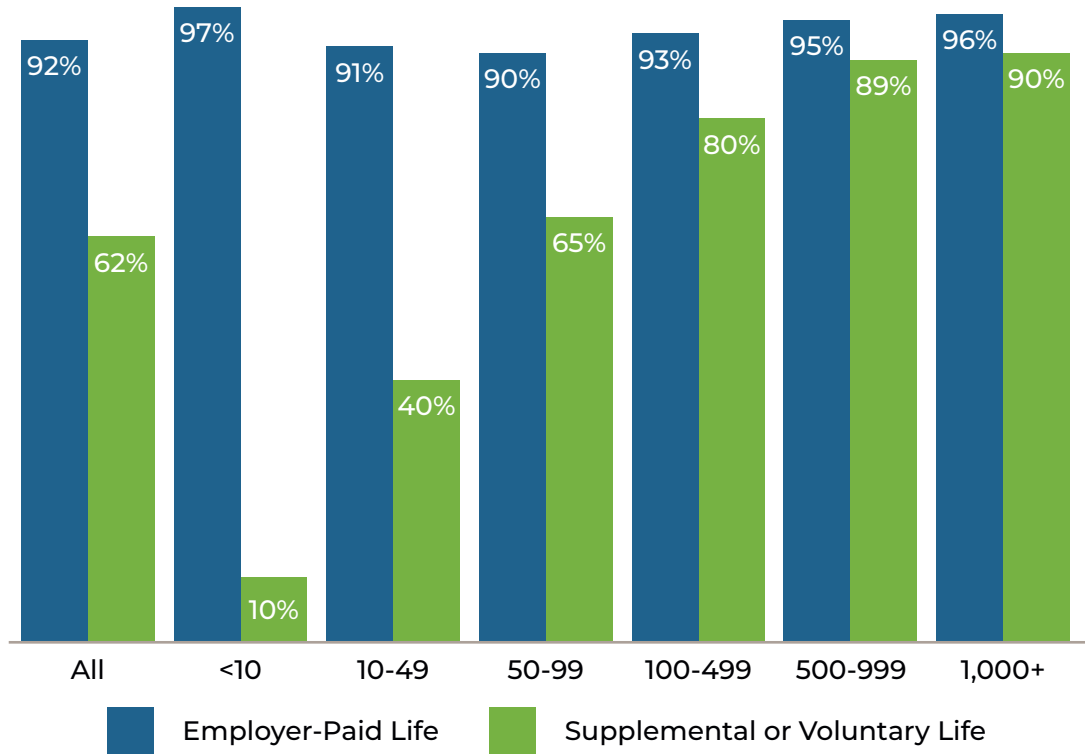
Percentage of employers offering Life/AD&D

75%
of participants offer
Life Insurance

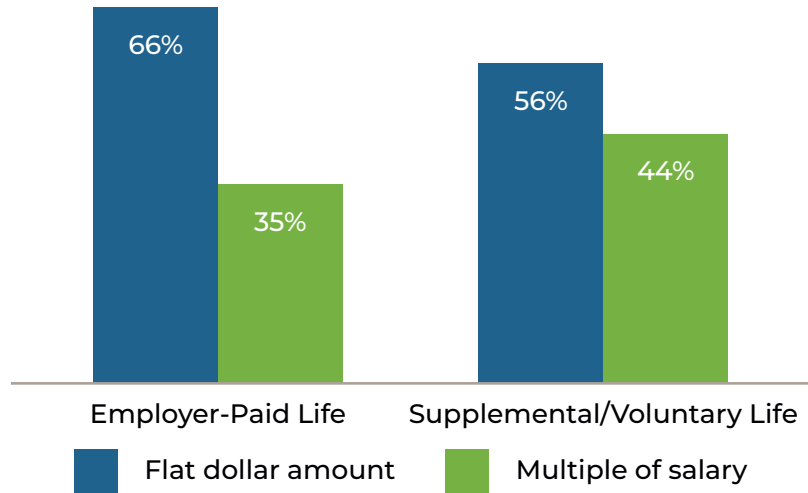


Regardless of size, if a participant offers Life Insurance, it is likely to offer some employer-paid benefit. Voluntary or supplemental Life, however, increases as size increases. This could be due to the extra effort of administering a supplemental product. Smaller companies are also less likely to offer other supplemental products already mentioned.

Type of Life Insurance offered



How Life coverage is offered



Commonly offered levels of employer-paid and supplemental or voluntary Life are consistent with last year.

COMMONLY OFFERED LIFE INSURANCE AMOUNTS

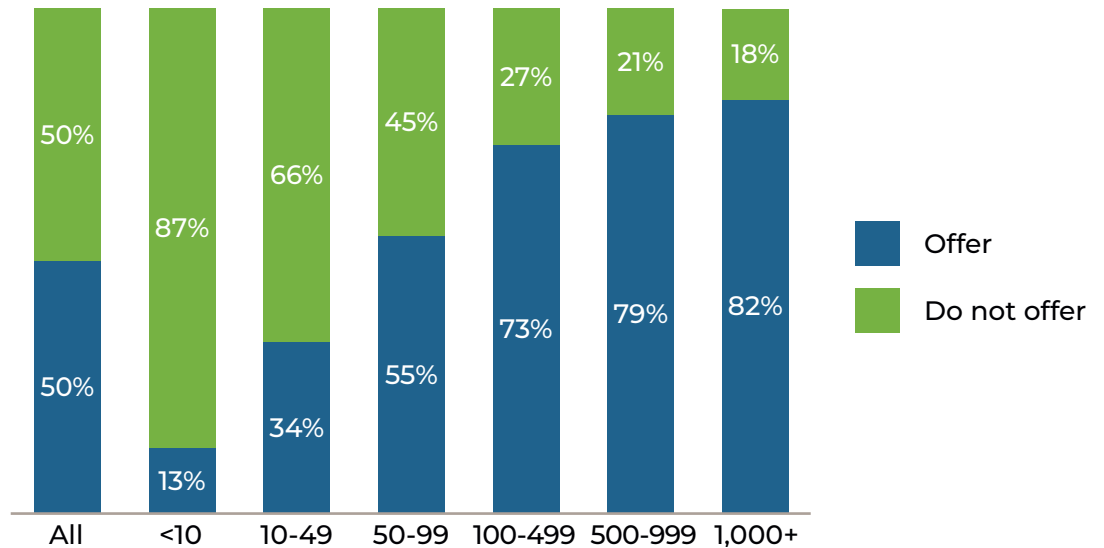
	IF MULTIPLE OF SALARY	IF FLAT DOLLAR AMOUNT
Employer-Paid Life	1x salary	\$50,000
Supplementary or Voluntary Life	5x salary	\$500,000



Short-Term Disability

Half of the participants in this survey offer Short-Term Disability Insurance (STD). As in prior years, the propensity to offer STD increases with employer size — up to 82% for employers with 1,000+ lives.

Percentage of participants offering Short-Term Disability



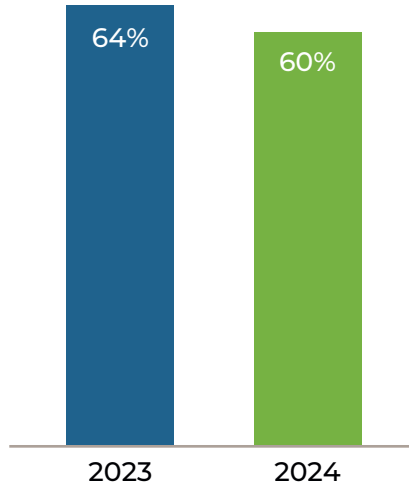
82%

of employers with 1,000+ lives offer Short-Term Disability

60% of the participants reported that they pay 100% of the STD benefit, rather than having employees contribute to the cost.

Key features of an STD policy include the elimination period, benefit duration, benefit percentage and weekly benefit maximum.

Employer pays 100% of STD

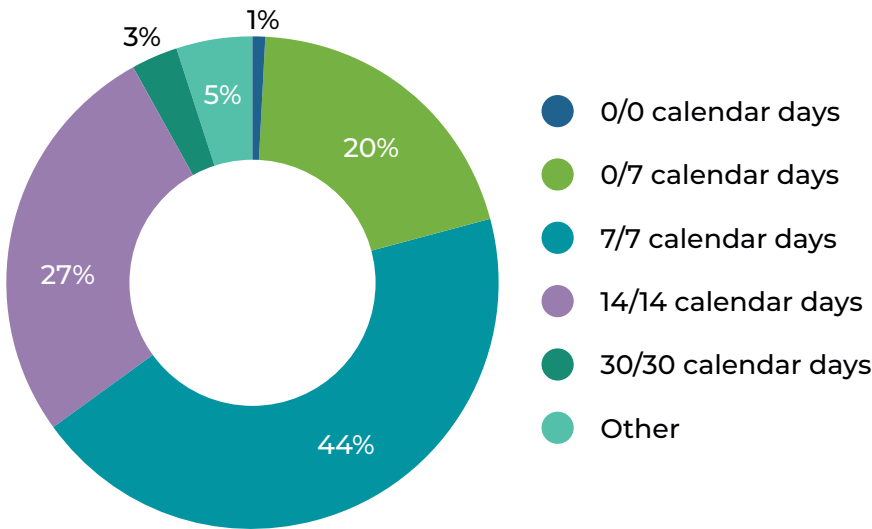


Eligibility

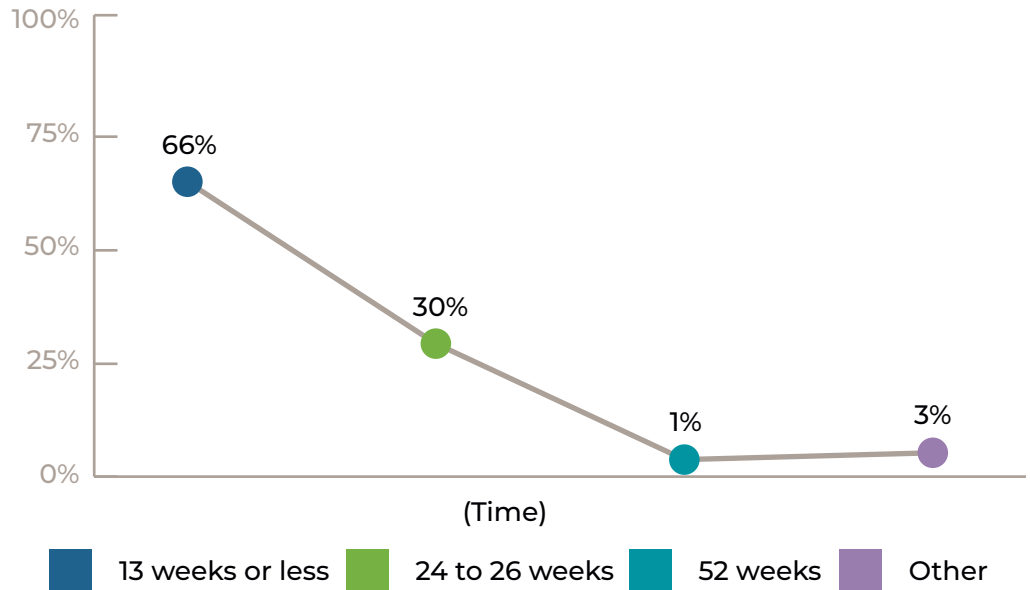
For most STD plans, the employee must be disabled for seven calendar days before the STD benefit begins. The benefit will then pay for 13 weeks or less — or 24 to 26 weeks — depending on when the LTD benefit begins.

STD elimination period

(Accident/sickness)



STD maximum benefit duration



Most respondents offer a benefit that pays 60% of an employee’s weekly salary up to a median weekly maximum of \$1,200.

STD benefit amount percentage



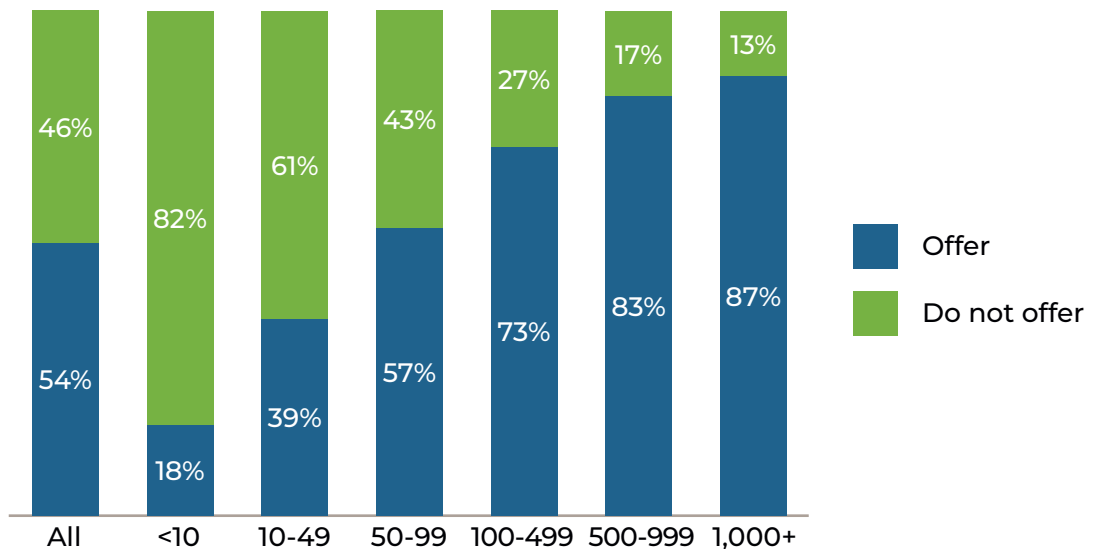
The weekly maximum is strongly correlated with salary ranges offered to employees. For example, employers in the health services industry offer a median weekly maximum of \$1,500. Employers in the construction industry, a more blue-collar segment, offer a median weekly maximum of \$1,000.



Long-Term Disability

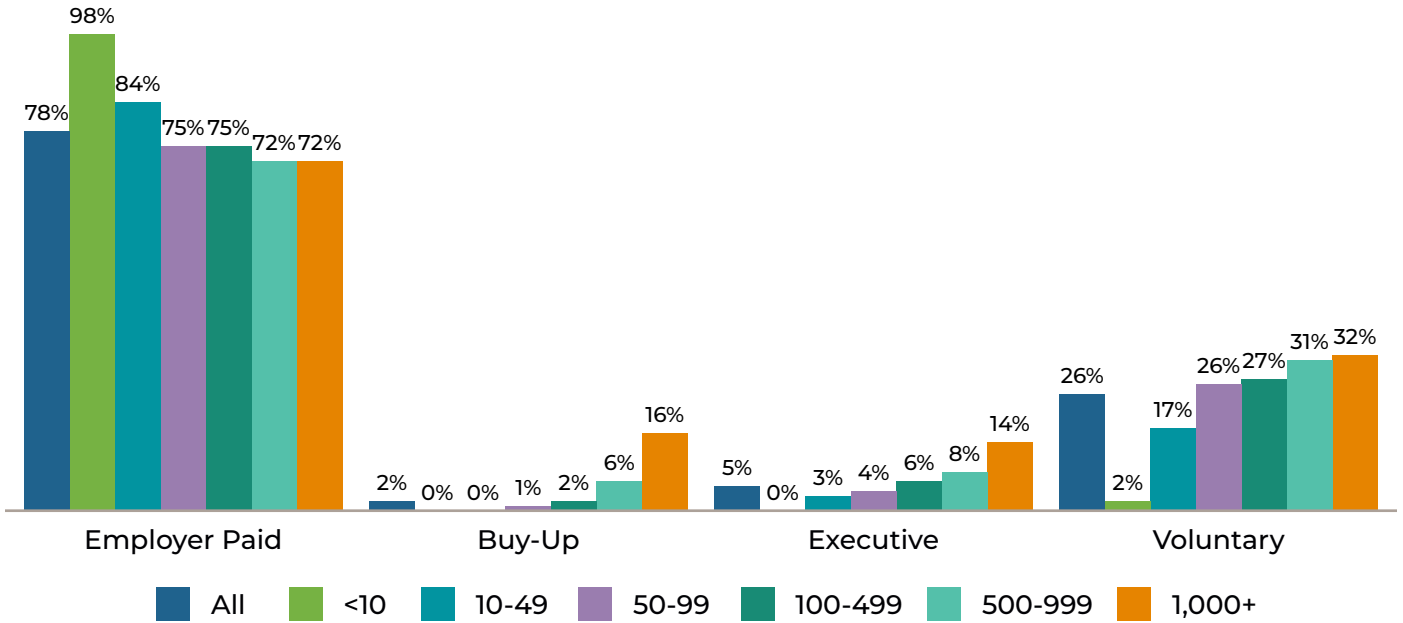
Fifty-four percent of the participants offer Long-Term Disability Insurance. The propensity to offer LTD increases with employer size, up to 87% for employers with 1,000+ lives. The percentage increases as the size of the employer increases.

Percentage of participants offering Long-Term Disability



Seventy-eight percent of the participants offer their LTD as an employer-paid plan, rather than having employees contribute to the cost, but this can vary by employer size.

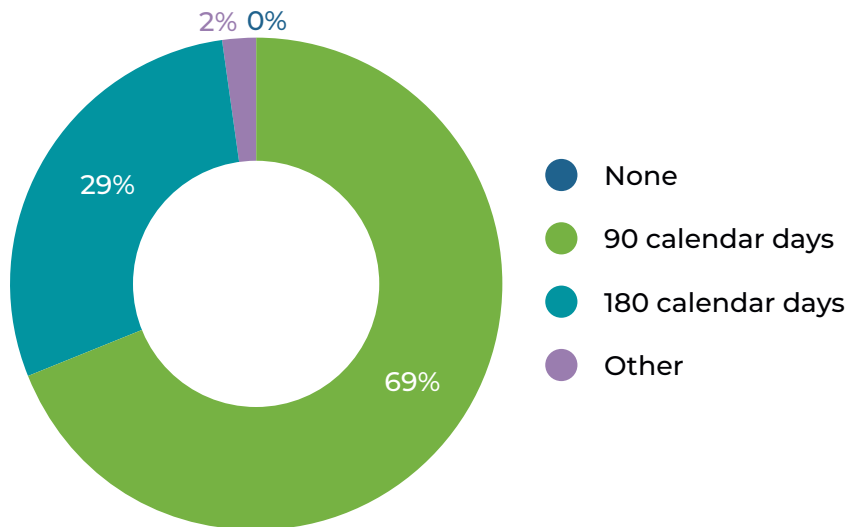
Type of Long-Term Disability offered by company size



Key plan design elements for LTD include elimination period, benefit percentage and the maximum monthly amount paid.

Most plans include a 90-calendar-day elimination period, particularly for 13-week-or-less STD plans, while others have a 180-calendar-day elimination period to dovetail with a 26-week STD plan.

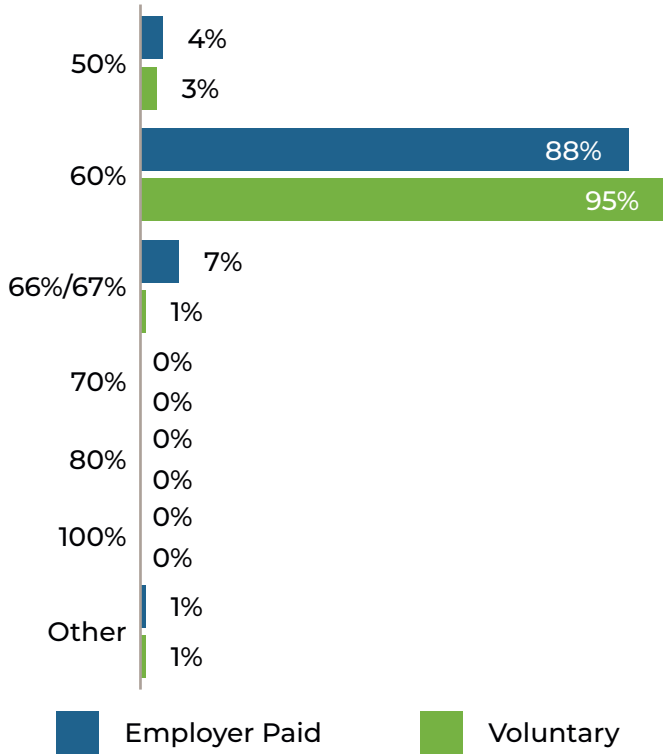
LTD elimination period



Regardless if the plan is employer paid or voluntary, the vast majority of LTD plans pay 60% of an employee's salary.

LTD benefit amount

As a percentage of salary



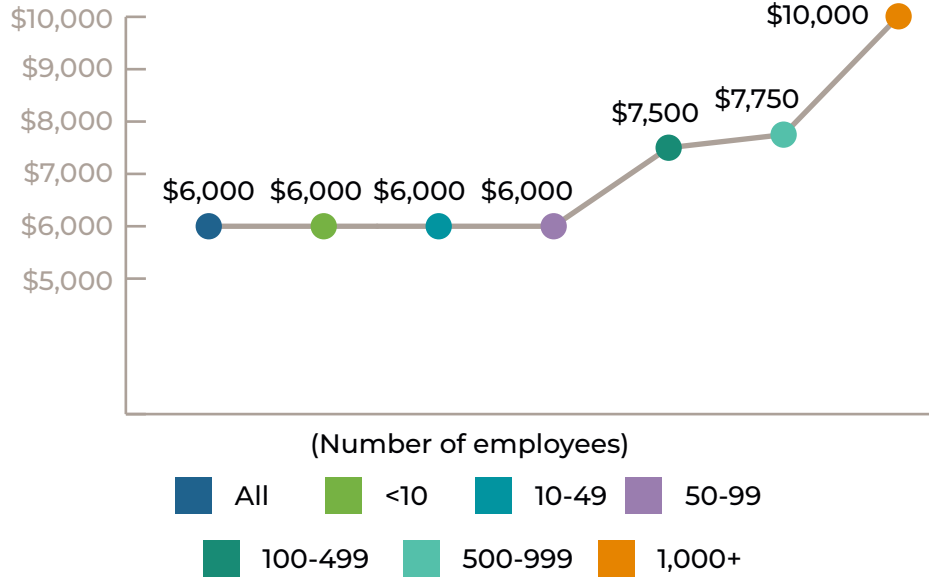
78%

of the participants offer their LTD as an employer-paid plan



The median monthly maximum an LTD policy will pay on an employer-paid plan is \$6,000. As with STD, the median varies based on the type of industry and size. For example, an employer in the financial, insurance or real estate industry (SIC Code 60-67) has a median of \$7,500 vs. manufacturing (SIC Code 20-39), with a median of \$6,000.

Median monthly maximum by employer size



The duration of LTD and STD correspond to prevent a lag in coverage.

RELATIONSHIP BETWEEN STD AND LTD

		STD MAXIMUM DURATION	
		13 weeks or less	24 to 26 weeks
LTD ELIMINATION PERIOD	90 calendar days	97%	5%
	180 calendar days	2%	94%

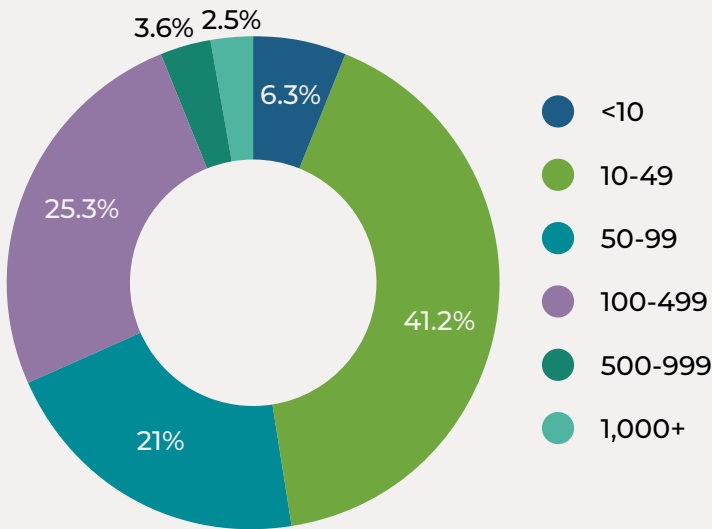
Respondent Profile

Responses to Alera Group’s benchmarking survey continue to rise, with over 6,200 completed surveys this year, representing approximately 14,000 Medical plans. The data represents over 1,017,000 full-time employees across multiple industries. Data for this report was collected online from November 2023 to May 2, 2024.

+6.2K

benchmarking surveys
have been completed
this year

Size of participants



+1M

full-time employees
across multiple industries
represented

Industries most represented



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*STATISTICS ACCURATE AS OF MARCH 31, 2024.

SOCIAL MEDIA



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