

# Benefits Benchmarking 2023

Employer-Sponsored Benefits Plans



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# Key findings

- Almost all Canadian employers we surveyed (97.6 per cent) provide benefits coverage to all their permanent full-time employees.
- Just over half (50.8 per cent) of organizations offer benefits to their permanent part-time employees. Roughly three-quarters of these employers provide their part-time permanent employees with the same extended healthcare and dental care coverage that they offer to their full-time permanent employees.
- More than one-third (39.5 per cent) of employers offer flexible benefits plans such as core-plus options or modular plans to their employees. This is up from 30.0 per cent in 2019.
- To supplement in-person healthcare services, nearly half (46.0 per cent) of Canadian organizations include in their current benefits plans a virtual component for accessing physical and/or mental health services.
- To ensure employees are aware of the benefits that are available to them, just over half of organizations (56.3 per cent) offer training on how to navigate and understand their benefits system.



# Introduction

The Conference Board of Canada's Benefits Benchmarking 2023 project explores employer-sponsored benefits plans, looks at organizations' practices in benefits plan administration, and benchmarks offerings for full- and part-time employees, including extended healthcare, dental, insurance, and paramedical care. It also looks at the methods organizations use to communicate their benefits plan offerings to employees to increase their awareness, interest, and usage.

The purpose of this research is to allow organizations to gauge their efforts relative to those of other employers in their region, sector, and/or industry and to help ensure that their benefits plans remain current and competitive in today's tight labour market.

The research for this project will be published in four modules:

1. Employer-Sponsored Benefits Plans
2. Inclusive Benefits Offerings
3. Mental Health and Wellness Initiatives
4. Flexible Work Practices

*Benefits Benchmarking 2023: Employer-Sponsored Benefits Plans* summarizes a portion of the data from the first module of the Benefits Benchmarking 2023 survey, which explored both group benefits and inclusive benefits.





# Benefits are crucial to attract and retain talent

Attracting and retaining talent was named the top internal priority for 2023 by Canadian C-level executives.<sup>1</sup> The Canadian job vacancy rate, which represents the percentage of total labour demand that remains unfilled,<sup>2</sup> is higher than it has been in nearly a decade, indicating that organizations have more open positions than talent to fill them. In turn, employers are vying to create compensation packages that stand well above the competition so that they can attract—and retain—the talent they need.

Benefits plans play a larger role than employers may realize when potential workers evaluate and assess total rewards packages.<sup>3</sup> Many employees would consider accepting a lower-paying job with better benefits, especially if offered better health, dental, and vision insurance, flex- or remote work options, or more vacation time.<sup>4</sup> Access to well-designed benefits plans provides employees with crucial supports on their health and well-being journey, including challenges—whether struggling with a mental health condition or caring for a loved one with advanced cancer. This reality signifies the value of curating a benefits plan that supports the needs of both current and prospective employees.

<sup>1</sup> Coffin, *C-Suite Challenge 2023: Embracing Flexibility*.

<sup>2</sup> Labour Market Information Council (LMIC), “Job Vacancy.”

<sup>3</sup> Haberl and Stewart, *Benefits Benchmarking 2019: Innovation and Flexibility Lead the Way*.

<sup>4</sup> Fractl, “Employee Benefits Study.”

# Group benefits coverage for employees

In Canada, benefits plans are often organized into “classes” or coverage levels that have been designed for specific groups of employees. Typically, more senior-level employees have access to higher classes of benefits that provide more expansive offerings and larger coverage amounts. Often, this is a tool used by employers to maintain a competitive edge to attract and retain this cohort of employees.<sup>5</sup>

Organizations administer between one and 17 different benefits plans, depending on their size and the needs and wants of different employee groups. On average, employers offer 3.4 different plans, with most offering one (39.3 per cent), two (15.4 per cent), or three (17.1 per cent). These results were consistent across industry and region.

Organizations with fewer than 250 employees reported having one to three different benefits plans, while organizations with 20,000+ employees reported having an average of 7.9 plans. (See Table 1.) Provincial government departments/agencies reported the highest number of benefits plans (8.2) compared to other sectors, which ranged between one and five plans on average. (See Table 2.)

<sup>5</sup> SimplyBenefits, “Employee Health Benefits Coverage Types.”



**Table 1**

Most organizations offer one, two, or three unique benefits plans (number)

FTEs	n	Min	Max	Mean
Fewer than 50	6	1	3	1.3
50–249	22	1	3	1.7
250–1,499	41	1	17	3.2
1,500–4,999	23	1	9	3.4
5,000–19,999	18	1	13	4.4
20,000+	7	1	17	7.9

Note: This information reflects point-in-time responses from March 2023.

Source: The Conference Board of Canada.

**Table 2**

Provincial government departments/agencies reported the highest number of benefits plans (number)

FTEs	n	Min	Max	Mean
Provincial government department/agency	5	2	13	8.2
University/school board	3	2	8	4.7
Private sector corporation	74	1	17	3.5
Crown corporation	14	1	7	2.6
Not-for-profit organization	13	1	7	1.8
Cooperative	6	1	3	1.5

Notes: This information reflects point-in-time responses from March 2023. Insufficient data exist to report for federal government department/agency or municipal government.

Source: The Conference Board of Canada.

## Extended healthcare coverage

### Prescription drug coverage

One-third of the organizations surveyed (29.5 per cent) reimburse prescriptions drugs in full. Of those that have an annual maximum, values range from \$750 to \$100,000, with a median of \$15,000. Lifetime maximums range from \$12,000 to \$2.5 million, with a median of \$1 million. (See Table 3.)

**Table 3**

Prescription drug coverage

	n	Mean	Median	Minimum	Maximum
Reimbursement level (per cent)	61	87.8	85.0	80.0	100.0
Annual maximum per insured (\$)	13	29,615	15,000	750	100,000
Lifetime maximum per insured (\$)	9	1,112,444	1,000,000	12,000	2,500,000
Deductible per prescription (\$)	9	7	5	1	12
Dispensing fee cap (\$)	28	10	10	5	20
Out-of-pocket maximum (\$)	13	1,110	1,000	10	3,500

Source: The Conference Board of Canada.

### Vision care coverage

Two-thirds of organizations (62.1 per cent) reimburse vision care expenses at 100 per cent, up to the plan maximum. Across all vision care subcategories, 24-month maximums are more common than 12-month maximums for both insured adults and dependent children. The median annual 24-month maximum for eye examinations is \$100 per insured adult or dependent child, while the median 24-month maximum for eyeglasses and/or contacts is \$200 for adults and \$250 for children. (See Table 4.)

**Table 4**  
Vision care coverage

	n	Mean	Median	Minimum	Maximum
<b>Vision care</b>					
Reimbursement level (per cent)	29	92.8	100	80	100
12-month maximum per insured adult (\$)	4	231	225	75	400
12-month maximum per insured dependent child (\$)	9	247	250	75	400
24-month maximum per insured adult (\$)	25	228	200	80	750
24-month maximum per insured dependent child (\$)	15	311	250	100	1,000
24-month maximum per family (\$)	3	187	200	160	200
<b>Eye examinations</b>					
Reimbursement level (per cent)	33	95.2	100	80	100
12-month maximum per insured adult (\$)	5	134	125	120	150
12-month maximum per insured dependent child (\$)	14	175	125	75	500
24-month maximum per insured adult (\$)	36	130	100	50	350
24-month maximum per insured dependent child (\$)	20	114	100	50	250
24-month maximum per family (\$)	3	170	160	100	250
<b>Glasses and/or contact lenses</b>					
Reimbursement level (per cent)	21	93.3	100	80	100
12-month maximum per insured adult (\$)	4	194	225	75	250
12-month maximum per insured dependent child (\$)	8	222	225	75	350
24-month maximum per insured adult (\$)	25	238	200	80	750

(continued ...)

	n	Mean	Median	Minimum	Maximum
24-month maximum per insured dependent child (\$)	16	244	250	150	325
24-month maximum per family (\$)	6	218	200	160	300
<b>Laser eye surgery</b>					
Reimbursement level (per cent)	16	89.4	100	50	100
12-month maximum per insured adult (\$)	3	167	200	50	250
12-month maximum per insured dependent child (\$)	5	220	250	50	350
24-month maximum per insured adult (\$)	18	512	275	80	2,500
24-month maximum per insured dependent child (\$)	10	365	300	200	750
24-month maximum per family (\$)	4	313	225	200	600
<b>Glasses, contact lenses, and laser eye surgery (combined)</b>					
Reimbursement level (per cent)	23	94.8	100	80	100
12-month maximum per insured adult (\$)	6	221	225	100	400
12-month maximum per insured dependent child (\$)	14	252	250	100	400
24-month maximum per insured adult (\$)	39	271	250	80	750
24-month maximum per insured dependent child (\$)	30	316	300	150	750
24-month maximum per family (\$)	6	258	250	200	350

Note: Please use caution in interpreting due to small sample size  
Source: The Conference Board of Canada.



### Out-of-country emergency medical coverage

Most of the organizations surveyed (87.2 per cent) reimburse out-of-country emergency medical expenses in full. The median maximum number of days covered per trip is 60. The median maximum amounts of coverage per medical emergency, per trip, per year, and per lifetime for insured individuals and families range between \$2 million and \$3 million. (See Table 5.)

### Paramedical services coverage

One-third of the organizations surveyed (36.4 per cent) reimburse paramedical services at 100 per cent. On average, the reimbursement rate for paramedical services is 87.8 per cent, with a median combined maximum for all services per year of \$1,250. (See Table 6.)



**Table 5**

Out-of-country emergency medical coverage

	n	Mean	Median	Minimum	Maximum
Reimbursement level (per cent)	47	98	100	80	100
Maximum number of days covered per trip	32	89	60	60	365
Per medical emergency per insured (\$ millions)	14	3.29	3.00	0.10	5.00
Per medical emergency per family (\$ millions)	4	3.25	3.00	2.00	5.00
Per trip maximum per insured (\$ millions)	8	2.38	2.00	1.00	5.00
Per trip maximum per family (\$ millions)	3	2.33	3.00	1.00	3.00
Annual maximum per insured (\$ millions)	5	3.20	3.00	0.01	6.00
Lifetime maximum per insured (\$ millions)	29	3.16	3.00	0.05	5.00
Lifetime maximum per family (\$ millions)	5	4.20	5.00	3.00	5.00

Source: The Conference Board of Canada.

**Table 6**

Paramedical services coverage, all services combined

	Reimbursement level (%) (n = 44)	Combined maximum for all services per year (\$) (n = 39)
Mean	87.8	2,846
Median	87.5	1,250
Minimum	50.0	300
Maximum	100.0	11,000

Source: The Conference Board of Canada.

More than 80 per cent of organizations provide coverage for chiropractors, physiotherapy, massage therapy, naturopathy, speech therapy, and podiatry. For these services, the average annual coverage maximum per service is \$500. (See Table 7.)

**Table 7**  
Annual maximums  
(n = 64)

	% that offer	Annual coverage maximum (\$)					Reimbursement level (per cent)				
		n	Mean	Median	Minimum	Maximum	n	Mean	Median	Minimum	Maximum
Certified athletic therapy	39.1	20	719	563	100	2,000	20	88.5	85.0	70.0	100.0
Chiropodist	60.9	33	601	500	250	1,500	33	87.1	80.0	50.0	100.0
Chiropractor	87.5	47	614	500	250	1,500	47	88.0	90.0	50.0	100.0
Chiropractor X-ray	39.1	17	506	500	25	1,400	20	88.8	87.5	70.0	100.0
Coagulotherapy	6.3	3	667	750	500	750	4	90.0	90.0	80.0	100.0
Massage therapist	84.4	46	619	500	250	1,500	48	87.8	87.5	50.0	100.0
Naturopath	84.4	46	581	500	250	1,500	46	88.8	90.0	50.0	100.0
Osteopath	79.7	42	557	500	250	1,400	44	89.7	95.0	50.0	100.0
Osteopath X-ray	29.7	12	573	500	25	1,400	16	89.4	90.0	70.0	100.0
Physiotherapy	87.5	45	674	500	250	2,000	49	89.6	90.0	70.0	100.0
Podiatrist	82.8	45	569	500	250	1,400	46	88.4	87.5	50.0	100.0
Podiatrist surgery	17.2	9	733	500	100	1,500	9	92.2	100.0	80.0	100.0
Podiatrist X-ray	28.1	13	606	500	25	1,400	15	88.7	90.0	70.0	100.0
Radiotherapy	7.8	4	688	750	500	750	5	92.0	100.0	80.0	100.0
Speech therapy	84.4	46	645	500	300	1,500	46	90.1	90.0	70.0	100.0

Note: Please use caution in interpreting due to small sample size.

Source: The Conference Board of Canada.

## Dental care coverage

Almost half of organizations surveyed (41.9 per cent) reimburse basic dental coverage in full, to a median maximum of \$2,000 per insured adult or dependent child per year. Roughly half of organizations reported that insured adults (44.2 per cent) and dependent children (56.0 per cent) must wait six months between visits for basic dental services.

Two-thirds of organizations (62.3 per cent) provide 50 per cent reimbursement for major restorative services, such as dental crowns and dentures, up to a median annual maximum of \$2,000 per insured adult or child. Most organizations (82.0 per cent) provide 50 per cent reimbursement for orthodontic services, with a median lifetime maximum coverage per insured individual of \$2,500. (See Table 8.)

**Table 8**  
Dental care coverage

	n	Mean	Median	Minimum	Maximum
<b>Basic dental services</b>					
Reimbursement level (per cent)	63	90	90	20	100
Number of months between visits per insured adult	52	8	6	4	24
Number of months between visits per insured dependent child	50	8	6	4	24
Annual maximum per insured adult (\$)	41	1,878	2,000	1,000	2,500
Annual maximum per dependent child (\$)	39	1,859	2,000	1,000	2,500
<b>Major restorative services</b>					
Reimbursement level (per cent)	61	58	50	50	90
Annual maximum per insured adult (\$)	47	1,904	2,000	1,000	3,000
Annual maximum per dependent child (\$)	45	1,849	2,000	200	3,000
<b>Combined basic and major restorative dental services</b>					
Annual combined limit for basic and major restorative per insured adult (\$)	50	2,184	2,000	1,000	5,200
Annual combined limit for basic and major restorative per dependent child (\$)	47	2,196	2,000	1,000	5,200
<b>Orthodontics</b>					
Reimbursement level (per cent)	50	54	50	50	100
Annual maximum per insured adult (\$)	8	2,775	2,250	1,500	5,000
Annual maximum per dependent child (\$)	12	2,600	2,250	1,500	5,000
Lifetime maximum per insured adult (\$)	37	2,505	2,500	1,500	6,000
Lifetime maximum per dependent child (\$)	48	2,457	2,500	1,500	6,000

Source: The Conference Board of Canada.

## Life insurance

Most organizations provide life insurance to active employees as a multiple of annual salary; the median amount of life insurance coverage is two times an employee's annual salary. The maximum benefit amounts for group, optional, and dependant life insurance vary greatly, ranging from \$2,000 to \$2 million. (See Table 9.)

**Table 9**

Life insurance coverage

	Coverage amount (number of times salary)				
	n	Mean	Median	Minimum	Maximum
Group life insurance	59	1.9	2.0	0.8	4.0
Optional life insurance	8	2.7	2.8	0.3	4.0
Dependent life insurance	-	-	-	-	-
	Maximum amount of coverage (flat dollar amount)				
	n	Mean	Median	Minimum	Maximum
Group life insurance	49	773,878	600,000	25,000	2,000,000
Optional life insurance	34	558,824	500,000	150,000	1,500,000
Dependent life insurance	45	114,656	10,000	2,000	1,000,000

Note: The symbol "-" indicates there were too few responses to report.

Source: The Conference Board of Canada.

## Accidental death and dismemberment insurance

Organizations that offer dismemberment payments in terms of flat dollars reported that payouts range from \$25 to \$5,000. Those that calculate maximum dismemberment payments as a percentage of salary reported payouts between 75 and 400 per cent, with a median of 200 per cent. (See Table 10.) Accidental death insurance coverage ranged between one and four times an employee's full salary. (See Table 11.)

**Table 10**

Dismemberment insurance coverage

	n	Mean	Median	Minimum	Maximum
Minimum dismemberment payment (\$)	5	10,230	6,000	25	25,000
Minimum dismemberment payment (percentage of salary)	19	32.1	25.0	2.0	100.0
Maximum dismemberment payment (\$)	15	1,067,000	500,000	10,000	5,000,000
Maximum dismemberment payment (percentage of salary)	22	185.2	200.0	75.0	400.0

Source: The Conference Board of Canada.

**Table 11**

## Accidental death insurance coverage

	n	Mean	Median	Minimum	Maximum
Coverage amount (number of times salary)	48	2	2	1	4
Coverage amount (\$ 000s)	8	250	80	5	1,000
Maximum amount of coverage (\$ 000s)	43	708	500	25	3,000

Source: The Conference Board of Canada.

## Critical illness, sick leave, and short- and long-term disability

- Median critical illness insurance coverage reported by organizations is \$15,000, with a median maximum of \$100,000.
- Paid sick leave outside of short- or long-term disability ranges between a small stipend amount (2 per cent of salary) and up to four times the employee's salary.
- Median short-term disability coverage is 80 per cent of an employee's salary, while long-term disability coverage is 70 per cent of salary. (See Table 12.)

**Table 12**

## Critical illness, sick leave, STD, and LTD

	n	Mean	Median	Minimum	Maximum
<b>Critical illness insurance</b>					
Coverage amount (\$)	12	18,167	15,000	3,000	50,000
Maximum amount of coverage (\$)	17	129,118	100,000	10,000	250,000
<b>Paid sick leave (excl. STD and LTD)</b>					
Coverage amount (number of times salary)	13	1.2	1.0	0.02	4.0
<b>Short-term disability (STD)</b>					
Coverage amount (number of times salary)	25	0.8	0.8	0.65	1.0
Coverage amount (\$)	3	14,356	3,000	67	40,000
Maximum amount of coverage (\$)	10	3,898	3,000	850	15,000
<b>Long-term disability (LTD)</b>					
Coverage amount (number of times salary)	33	0.6	0.7	0.5	1.0
Coverage amount (\$)	8	52,149	9,000	60	240,000
Maximum amount of coverage (\$)	36	15,928	12,250	3,000	144,000

Source: The Conference Board of Canada.



## Monthly premiums

### Extended healthcare and dental

Two-thirds of employers reported that they cover 100 per cent of the monthly premiums for extended healthcare plans and dental plans. On average:

- Monthly premiums for extended healthcare plans per insured plan member range between \$17 and \$216 for single coverage and between \$44 and \$547 for family coverage.
- Monthly premiums for dental plans per insured plan member range between \$10 and \$123 for single coverage and between \$24 and \$355 for family coverage. (See Table 13.)



**Table 13**

Monthly premiums for extended healthcare and dental

	n	Mean	Median	Minimum	Maximum
<b>Extended healthcare plan</b>					
Average monthly premiums per insured plan member (including both employee and employer) – SINGLE – (\$)	43	98	96	17	216
Average monthly premiums per insured plan member (including both employee and employer) – FAMILY – (\$)	43	234	222	44	547
Percentage of total premium paid by the employer – SINGLE	50	88.4	100.0	25.0	100.0
Percentage of total premium paid by the employer – FAMILY	48	87.5	100.0	50.0	100.0
<b>Dental plan</b>					
Average monthly premiums per insured plan member (including both employee and employer) – SINGLE – (\$)	42	50	46	10	123
Average monthly premiums per insured plan member (including both employee and employer) – FAMILY – (\$)	42	132	125	24	355
Percentage of total premium paid by the employer – SINGLE	50	87.5	100.0	15.0	100.0
Percentage of total premium paid by the employer – FAMILY	48	86.8	100.0	15.0	100.0

Source: The Conference Board of Canada.

## Life and critical illness insurance

Approximately three-quarters of employers reported that they cover 100 per cent of monthly premiums for group life insurance, critical illness insurance, and accidental death and dismemberment insurance. Median monthly premiums per plan member for group life insurance, critical illness insurance, and short-term disability range from \$21.00 to \$28.42 per insured, while long-term disability coverage has a median cost of \$114. (See Table 14.)

**Table 14**

Monthly premiums for life insurance, ADD, CII, STD, and LTD

	n	Mean	Median	Minimum	Maximum
<b>Average monthly premiums per insured plan member (including both employee and employer, \$)</b>					
Group life insurance	30	35.51	28.42	7.00	204.50
Accidental death and dismemberment insurance	27	10.52	5.00	0.35	58.40
Critical illness insurance	6	22.68	21.50	6.09	50.00
Short-term disability (STD)	7	31.30	21.00	12.00	75.00
Long-term disability (LTD)	28	130.92	114.23	12.00	454.75
<b>Percentage of total premium paid by the employer</b>					
Group life insurance	36	90.1	100.0	40.0	100.0
Accidental death and dismemberment insurance	30	91.4	100.0	40.0	100.0
Critical illness insurance	8	87.5	100.0	50.0	100.0
Short-term disability (STD)	17	92.9	100.0	50.0	100.0
Long-term disability (LTD)	25	84.5	100.0	33.0	100.0

Source: The Conference Board of Canada.

## Average monthly rates per amount of coverage

For employee and employer combined, average monthly rates per insured plan member range from \$0.06 to \$202.00 per \$1,000 of coverage for group life insurance and from \$0.01 to \$15.00 for accidental death and dismemberment insurance. The median average monthly rate per insured plan member for long-term disability is \$4.82. (See Table 15.)

**Table 15**

Average monthly rates per amount of coverage  
(\$ per \$1,000 of coverage)

	n	Mean	Median	Minimum	Maximum
Group life insurance	31	11.75	0.20	0.06	202.00
Accidental death and dismemberment insurance	19	1.34	0.03	0.01	15.00
Long-term disability (LTD)	21	82.92	4.82	1.58	1185.00

Source: The Conference Board of Canada.



**Table 16**

Nearly all respondent organizations provide benefits coverage for full-time employees  
(per cent; number)

	All have benefits coverage	Some have benefits coverage	None have benefits coverage	Yes, with conditions*	N/A**	Unsure	Where only some have coverage (n)	Where conditions apply, hours per week (n)
Permanent full-time (n = 126)	97.6	0.8	0.0	1.6	0.0	0.0	–	–
Permanent part-time (n = 124)	50.8	8.9	4.8	28.2	7.3	0.0	65.1 (11)	20.5 (30)
Non-permanent, full- or part-time (n = 123)***	8.9	32.5	39.0	12.2	4.9	2.4	40.9 (31)	19.7 (10)
Retirees (n = 121)	18.2	27.3	38.0	3.3	9.9	3.3	41.2 (23)	–

Notes: This information reflects point-in-time responses from March 2023. The symbol “–” indicates there were too few responses to report.

\*must work a certain number of hours per week, for example

\*\*category of employee nonexistent in organization

\*\*\*includes contract, seasonal, or casual employees but excludes independent contractors

Source: The Conference Board of Canada.

**Table 17**

Some employees required to work 20 hours per week to maintain benefits coverage  
(number)

	Has benefits coverage with conditions*	Required hours worked per week
Permanent full-time (n = 126)	1.6	–
Permanent part-time (n = 124)	28.2	20.5 (30)
Non-permanent, full- or part-time (n = 123)**	12.2	19.7 (10)
Retirees (n = 121)	3.3	–

Notes: This information reflects point-in-time responses from March 2023. The symbol “–” indicates there were too few responses to report.

\*must work a certain number of hours per week, for example

\*\*includes contract, seasonal, or casual employees but excludes independent contractors

Source: The Conference Board of Canada.

## Coverage differences between full-time and part-time employees

Nearly all respondent organizations (97.6 per cent) said that they provide benefits coverage for all their permanent full-time employees, while just over half (50.8 per cent) offer benefits coverage to their permanent part-time employees as well. (See Table 16.)

Some organizations offer their employees benefits coverage on the condition that they work at least a set number of hours per week. On average, these organizations require their permanent part-time and non-permanent employees to work approximately 20 hours per week to maintain their benefits. (See Table 17.)

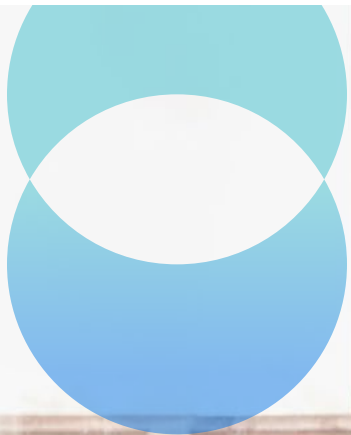


## Coverage for permanent part-time employees

About one-half (50.8 per cent) of employers offer benefits to their permanent part-time employees. However, some organizations choose to offer full-time and part-time employees the same amount of coverage, while others pro-rate the amount of coverage based on the number of hours worked.

Roughly three-quarters of employers provide the same amount of extended healthcare and dental care coverage for permanent part-time and permanent full-time employees.

Just over half of organizations reported that they offer the same paid sick time, short-term disability (STD), and long-term disability (LTD) to their permanent part-time employees as their full-time employees, while nearly a quarter of respondents do not offer this coverage to part-time employees in any capacity. Results were consistent across industries, but there were differences across sectors and regions. (See detailed tables in Appendix B.) Consequently, when employees without access to paid sick days or disability coverage become ill, they must decide whether to ignore their health concerns and show up at work—thus risking the spread of contagion within the workplace—or to stay home and forgo their pay. Additionally, many organizations do not provide long-term care insurance (58.3 per cent) or critical illness insurance (36.9 per cent) to their permanent part-time employees. (See Table 18.)



**Table 18**

Nearly a quarter of organizations do not offer paid sick time to part-time employees

(per cent)

Benefit	n	Same coverage as full-time benefit	Coverage pro-rated to full-time benefit	Independent plan for part-time employees	Other	Not offered to part-time employees
<b>Extended health care</b>						
Prescription drug coverage	122	78.7	4.1	6.6	3.3	7.4
Vision care	121	76.0	3.3	5.8	3.3	11.6
Hospital accommodation	120	79.3	3.3	5.0	3.3	9.1
Out-of-country medical care coverage	120	78.7	3.3	4.1	3.3	10.7
Paramedical services*	119	79.0	3.4	5.0	3.4	9.2
<b>Dental care</b>						
Dental care – basic services**	121	78.5	3.3	6.6	3.3	8.3
Dental care – major services***	122	78.7	3.3	5.7	3.3	9.0
Orthodontics	121	75.2	3.3	4.1	2.5	14.9
<b>Life and accident insurance</b>						
Group life insurance	121	64.5	13.2	5.8	5.8	10.7
Optional life insurance	119	68.6	8.3	4.1	4.1	14.9
Dependant life insurance	116	65.5	2.6	3.4	6.0	22.4
Accidental death and dismemberment insurance	119	65.0	11.7	4.2	5.0	14.2
Critical illness insurance	111	49.5	4.5	2.7	6.3	36.9
Long-term care insurance	107	30.6	2.8	0.9	7.4	58.3
<b>Critical illness, long-term care, and disability</b>						
Paid sick leave (excluding STD and LTD)	120	51.7	20.8	2.5	4.2	20.8
Short-term disability (STD)	118	50.4	17.6	2.5	5.9	23.5
Long-term disability (LTD)	121	53.7	16.5	2.5	4.1	23.1

Note: This information reflects point-in-time responses from March 2023.

\*massage therapy, chiropractic coverage, psychological services, etc., for example

\*\*preventative and minor restorative, for example

\*\*\*dentures, caps, crowns, bridges, for example

Source: The Conference Board of Canada.

## Coverage for employees and their families

Most employers provide extended healthcare coverage, such as prescription drug coverage, vision care, and paramedical services, to full-time employees and their spouses and dependants. Almost all organizations (98.4 per cent) offer basic and major restorative dental care to employees and their families, but they are less likely to cover orthodontics for employees (64.5 per cent) than they are to cover this for their employees' dependant children (91.1 per cent).

Differences in coverage amounts between an employee and their spouse and dependants vary greatly with regard to life, accident, critical illness, and long-term care insurance. While most employers offer group (99.2 per cent) and optional (91.7 per cent) life insurance to their employees, only 20 to 70 per cent of organizations offer that coverage to spouses and dependents. Similarly, while over half of employers (61.2 per cent) offer critical illness insurance to employees, approximately one-third extend coverage to employees' family members. Two-thirds of organizations reported that they do not offer long-term care insurance to anyone, but nearly all those that do offer this coverage provide it only to the employee. (See Table 19.)



**Table 19**

Almost all organizations offer basic and major restorative dental care to employees and their families  
(per cent)

<b>Benefit</b>	<b>n</b>	<b>Employee</b>	<b>Spouse of employee</b>	<b>Dependent children of employee</b>	<b>Not offered</b>
<b>Extended health care</b>					
Prescription drug coverage	124	100.0	98.4	98.4	0.0
Vision care coverage	124	95.2	93.5	93.5	4.8
Hospital accommodation	123	100.0	99.2	99.2	0.0
Out-of-country medical care coverage	123	100.0	99.2	99.2	0.0
Orthopedic supports	121	97.5	95.9	95.0	2.5
Paramedical services*	124	100.0	97.6	96.8	0.0
<b>Dental care</b>					
Dental care – basic services**	125	100	98.4	98.4	0.8
Dental care – major services***	124	100	98.4	98.4	0.8
Orthodontics	124	64.5	61.3	91.1	6.5
<b>Life and accident insurance</b>					
Group life insurance	125	99.2	20.8	17.6	0.8
Optional life insurance	120	91.7	68.3	50.8	9.2
Dependant life insurance	113	46.9	55.8	58.4	19.5
Accidental death and dismemberment insurance	123	97.6	41.5	35.8	2.4
<b>Critical illness, long-term care, and disability</b>					
Critical illness insurance	116	61.2	32.8	26.7	38.8
Long-term care insurance	105	35.2	1.0	1.0	66.7
Paid sick leave (excluding STD and LTD)	119	89.9	n/a	n/a	10.1
Short-term disability (STD)	121	90.9	n/a	n/a	9.1
Long-term disability (LTD)	124	99.2	n/a	n/a	0.8

Note: This information reflects point-in-time responses from March 2023.

\*massage therapy, chiropractic coverage, psychological services, etc., for example

\*\*preventative and minor restorative, for example

\*\*\*dentures, caps, crowns, bridges, for example

Source: The Conference Board of Canada.

# Virtual care for physical and mental health is increasingly important

The pandemic placed significant pressure on Canada's already strained healthcare system. COVID-related restrictions limited people's ability to have in-person appointments with their healthcare providers, and as a result, between 2020 and 2021, physicians provided nearly 8 per cent fewer health services overall.<sup>6</sup> Moreover, between 2019 and 2021, the average annual growth in supply of primary care physicians dropped to 1.3 per cent, down from 3.4 per cent between 2012 and 2014.<sup>7</sup> It is estimated that about 22 per cent of Canadian adults (6.5 million people) did not have a regular family doctor in the fall of 2022.<sup>8</sup> The situation is slightly less concerning in Ontario, with 13.0 per cent of Ontarians lacking a family physician. More pressing, roughly a third of those in British Columbia (27.0 per cent), Quebec (31.0 per cent), and the Atlantic provinces (31.0 per cent) are without a family doctor.<sup>9</sup>

While virtual healthcare options were already being explored, implemented, and used by Canadians and primary and acute care clinics prior to the pandemic,<sup>10</sup> these pandemic-driven issues in accessing care have made it clear that the provision of virtual healthcare services is even more important now to ensure that Canadians have access to the care they need.

Almost half (46.0 per cent) of Canadian organizations reported that their current benefits plan includes a virtual component for physical and/or mental health services, while 20.2 per cent of employers reported that their plan's virtual component covers only mental health-related services. (See Chart 1.) Just over one-quarter of Canadian organizations reported that they do not offer virtual healthcare in any capacity.

Looking at virtual coverage by region, organizations in New Brunswick (75.0 per cent) and British Columbia (62.5 per cent) are more likely to provide virtual coverage for services related to both mental and physical health than organizations in Manitoba (30.0 per cent) or Quebec (28.6 per cent). Meanwhile, Manitoba-based organizations are most likely to offer coverage strictly for virtual mental health services (40.0 per cent), while organizations in Quebec are more likely to offer coverage for physical health services (42.9 per cent). (See Table 20.) Virtual healthcare coverage did not differ by organization size, sector, or industry.

6 Canadian Institute for Health Information, "Ongoing Pandemic-Driven Pressures Impact Activities and Workload of Health Care Workers across Canada."

7 Ibid.

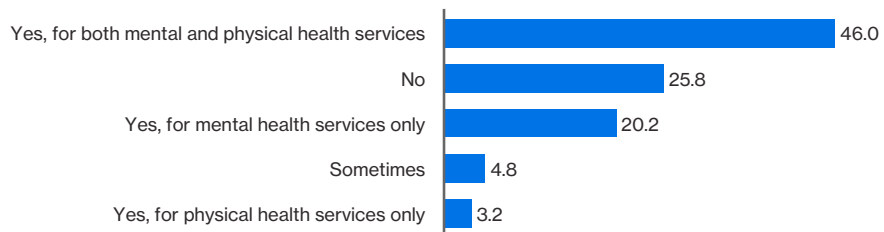
8 Pham and Kiran, "More Than 6.5 Million Adults in Canada Lack Access to Primary Care."

9 Ibid.

10 Haberl and Stewart, *Benefits Benchmarking 2019: Innovation and Flexibility Lead the Way*.

**Chart 1**

Nearly half of organizations offer virtual services for physical and mental health  
(n = 124; per cent)



Note: This information reflects point-in-time responses from March 2023.  
Source: The Conference Board of Canada.



**Table 20**

Virtual healthcare coverage varies by province  
(per cent)

	Yes, for both mental and physical health services	Yes, for mental health services only	Yes, for physical health services only	Sometimes	No
New Brunswick (n = 4)	75.0	25.0	0.0	0.0	0.0
Quebec (n = 7)	28.6	0.0	42.9	0.0	28.6
Ontario (n = 50)	40.0	16.0	2.0	10.0	32.0
Manitoba (n = 10)	30.0	40.0	0.0	0.0	30.0
Saskatchewan (n = 15)	53.3	26.7	0.0	0.0	20.0
Alberta (n = 20)	55.0	20.0	0.0	5.0	20.0
British Columbia (n = 16)	62.5	18.8	0.0	0.0	18.8

Notes: This information reflects point-in-time responses from March 2023. Insufficient data exist to report on other provinces and territories.  
Source: The Conference Board of Canada.

# More employers are now offering flexible benefits plans

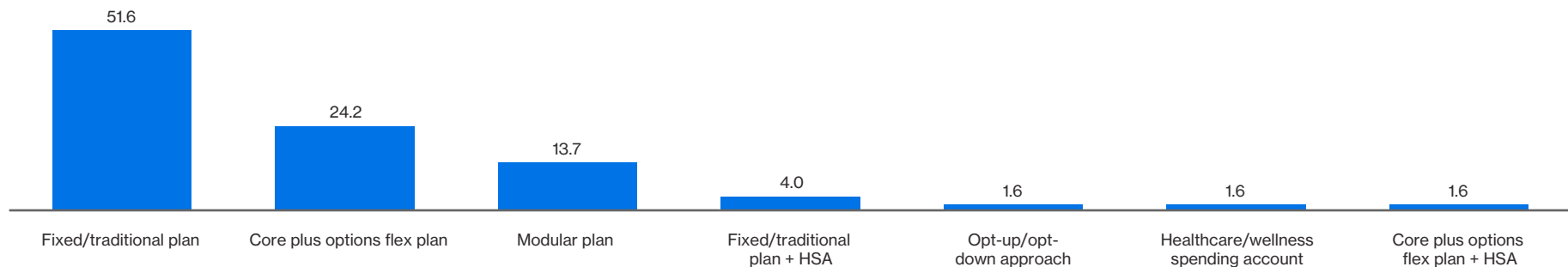
For employees, having the option to customize their benefits plan to suit their needs and wants, and the requirements of their family, is an enticing prospect, and employers are taking note. The share of organizations that offer flexible benefits plans to their employees has increased in recent years, from 30.0 per cent in 2019<sup>11</sup> to 39.5 per cent in 2023. Roughly a quarter (24.2 per cent) of organizations provide flexible benefits plans that provide a compulsory level of coverage for key benefits such as life insurance and disability insurance, together with core-plus options that allow employees to purchase additional benefits coverage at a subsidized rate.<sup>12</sup>

Modular plans, which allow employees to choose from a number of different benefits packages or modules, are also popular, with 13.7 per cent offering these plans. (See Chart 2.) The proportion of organizations that offer flexible benefits plans was consistent across industry, sector, organizational size, and region of operation.

For more information on the nuances of flexible benefits plans, please refer to our Benefits Benchmarking 2019 report, pages 12 to 14.

## Chart 2

Nearly half of organizations offer flexibility in their benefits plans  
(n = 124; per cent)



Note: This information reflects point-in-time responses from March 2023.  
Source: The Conference Board of Canada.

<sup>11</sup> Ibid.

<sup>12</sup> Sun Life, "Flex Benefits."

# Employees need to be aware of all accessible benefits

Organizations recognize that employees may not understand what their benefits packages offer, how to identify and access the supports they need, and how to make good use of them. Consequently, organizations need to provide clear and frequent communications to help bridge this awareness gap so that employees can make effective use of their benefits.

## Communicating traditional benefits offerings

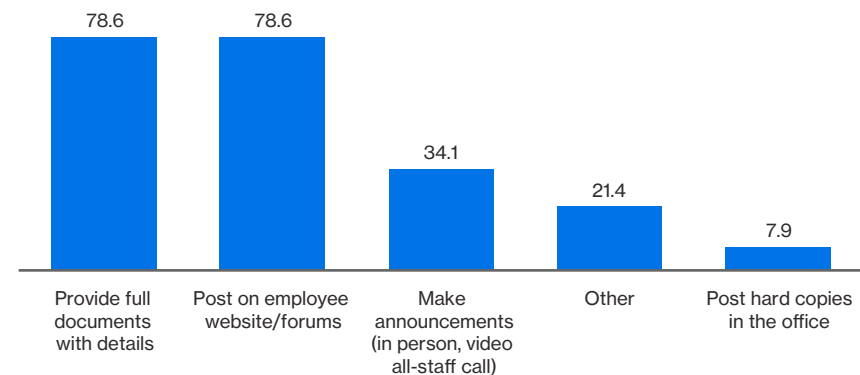
The most common approaches organizations take to increase employee awareness of their benefits plan are providing formal, detailed documents from the benefits provider to employees and posting relevant information on an employee website. (See Chart 3.)

While most organizations communicate their benefits offerings during onboarding (72.0 per cent), 56.3 per cent of organizations also offer training on how to access, navigate, and understand their benefits system during the onboarding period. Just over half (59.3 per cent) of respondent organizations remind employees of their benefits plan offerings annually, while 17.8 per cent do so more than twice per year.

**Chart 3**

Most organizations communicate their benefits plans through documents and internal websites

(n = 126; per cent)



Note: This information reflects point-in-time responses from March 2023.

Source: The Conference Board of Canada.

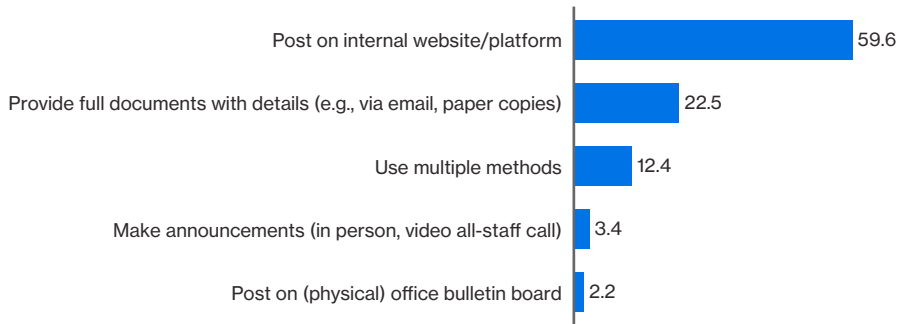


## Communicating virtual benefits offerings

As virtual healthcare options are relatively new to the world of group benefits, it is critical that employees know what virtual coverage is available to them and how to access it to meet their care and wellness needs. Most organizations (85.4 per cent) reported that they explicitly communicate their virtual healthcare coverage to employees, the most common method being posting information on their website/platform (59.6 per cent). (See Chart 4.)

### Chart 4

Virtual healthcare coverage is communicated most often on internal websites (n = 89; per cent)



Note: This information reflects point-in-time responses from March 2023.  
Source: The Conference Board of Canada.



# Over half of employers forgo the benefits waiting period

A benefits waiting period refers to the qualifying period during which the employee is not eligible to claim any of their benefits. Newly hired employees at companies that enforce waiting periods may find themselves without health insurance for 30 to 90 days, and as a result, some new employees may have to pay for time-sensitive procedures out of pocket or defer appointments until after the waiting period has ended.

Just over half of respondent organizations in 2023 reported that they do not enforce the waiting period for extended health (59.2 per cent) and dental (56.8 per cent) care benefits for new employees, an increase from 2019, where 49.0 per cent and 46.0 per cent of organizations did not enforce waiting periods for extended health and dental care, respectively.<sup>13</sup>

Benefits such as paid sick leave (27.8 per cent) and critical illness insurance (36.0 per cent) are the least likely to have a waiting period. (See Table 21.) On average, organizations that have a waiting period require employees to wait three months before receiving benefits. This finding does not differ significantly by region, organization size, or sector.

In terms of industry, retail trade organizations are most likely to have a waiting period for benefits coverage (62.5 per cent), whereas organizations in professional, scientific, and technical services (33.3 per cent) and in finance and insurance (18.8 per cent) are least likely to enforce them.

**Table 21**

Over half of organizations do not enforce the waiting period for extended health or dental benefits  
(per cent; months)

	n	Proportion with waiting period	Waiting period			
			n	Min	Max	Mean
Extended healthcare plan	125	40.8	49	1	6	2.9
Dental plan	125	43.2	50	1	6	3.0
Life insurance plan	124	41.9	48	1	6	2.9
Accidental death and dismemberment	119	41.2	44	1	6	3.0
Critical illness insurance	75	36.0	26	1	6	3.0
Long-term care insurance	50	40.0	19	1	6	3.0
Paid sick leave (excluding STD and LTD)	108	27.8	29	1	6	3.0
Short-term disability (STD)*	108	44.4	46	1	6	2.8
Long-term disability (LTD)*	120	50.8	61	1	12	3.3

Note: This information reflects point-in-time responses from March 2023.

\*for STD and LTD, excludes the time that an employee must be absent before accessing these benefits

Source: The Conference Board of Canada.

<sup>13</sup> Haberl and Stewart, *Benefits Benchmarking 2019: Innovation and Flexibility Lead the Way*.

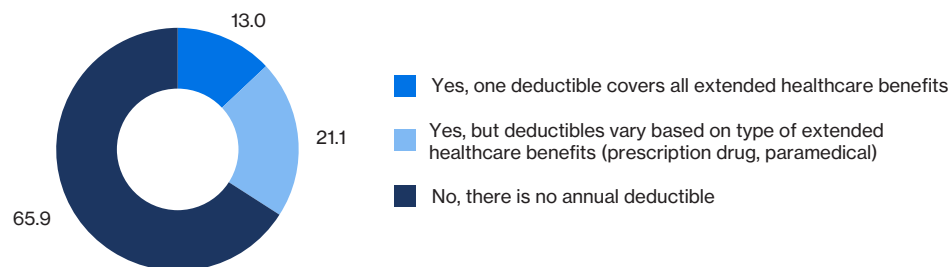


# Most employers do not have deductibles for extended healthcare benefits

Almost two-thirds of organizations (65.9 per cent) reported that they do not have an annual deductible that employees must pay if they use their extended healthcare benefits. Approximately one-third of employers place a deductible on extended health benefits, with the majority (21.1 per cent) only requiring them if employees use certain benefits, such as prescription drugs or paramedical services. (See Chart 5.)

**Chart 5**

Over half of organizations do not ask employees to pay an annual deductible to use their benefits  
(n = 123; per cent)



Note: This information reflects point-in-time responses from March 2023.  
Source: The Conference Board of Canada.

# Conclusion

Job applicants perceive health benefits as an indication of how an employer treats their employees.<sup>14</sup> Almost all Canadian employers surveyed provide benefits coverage to all their permanent full-time employees, while just over half do so for their permanent part-time employees. Organizations recognize that strengthening their health benefits plan can help to increase attraction and retention. An additional 9.5 per cent of organizations are offering flexible health benefits plans compared to 2019. In addition, more than half of respondent employers are forgoing the waiting period for benefits to ensure that new employees are not without healthcare coverage. Clearly, offering health benefits plans designed to meet the needs of current and prospective employees can give an employer the advantage in today's competitive labour market.

<sup>14</sup> Dujay, "Employees Feel Entitled to Their Health Benefits."



## Appendix A

# Benefits definitions

**Accidental death and dismemberment insurance:** Offers on- and off-the-job financial protection to an employee and their family in the event of the employee's accidental death or dismemberment.

**Critical illness insurance:** Critical illness insurance typically pays the insured a lump sum amount upon diagnosis of one of the covered illnesses, such as cancer or a heart attack. This benefit is distinct from short- and long-term disability benefits.

**Dental care:** This can include services such as basic dental services (e.g., exams, X-rays, cleaning, fillings), supplementary basic services (e.g., root canals, gum surgery), major services (e.g., crowns, dentures), and orthodontics. (Sources: Morneau Shepell and The Conference Board of Canada.)

**Dependant life insurance:** This is typically offered as an insurance to pay for funeral expenses upon the death of a spouse or dependent child.

**Extended healthcare:** This operates as a second payer to the provincial medical program, typically covering/supplementing prescription drugs, hospital, medical services and supplies, emergency out-of-province, and vision care. (Source: Morneau Shepell.)

**Flexible benefits plans (or flex plans):** These permit employees to choose a package of benefits from a selection of choices provided by the employer. In some plans, employees receive credits from the employer to purchase the benefits of most value to them. Semi-flexible benefits may include a core set of benefits and provide options for employees to purchase additional levels of coverage, or they may be modular plans, where employees can choose among several predetermined benefits packages.

**Group life insurance:** This type of insurance pays a cash benefit to an employee's beneficiaries if the employee dies.

**Long-term care insurance:** Long-term care insurance covers the costs of long-term care (can be available either in the home or in a facility) should the insured become unable to care for themselves. To be considered unable to care for themselves, the insured must typically require constant supervision due to a loss in mental capabilities or loss of the ability to perform two or more of the following activities of daily life: bathing, dressing, feeding, toileting, transferring (e.g., moving from bed to wheelchair), or continence. Long-term care insurance typically covers expenses not covered by provincial healthcare, such as nursing services, assistance with exercise, home management services, medication administration, and adult daycare. This benefit is distinct from short- and long-term disability benefits.

**Long-term disability (LTD):** This form of insurance provides monthly benefits (usually about 65 per cent of pre-disability income) if the plan member is unable to work because of illness or disability. To be eligible, the member must have exhausted their STD credits. If the disability is permanent, payments can last until age 65.

**Optional life insurance:** This is additional life insurance that plan member employees can purchase.

**Paid sick leave (excluding STD and LTD):** This refers to paid absences from work because of personal illness or injury. The employee is paid 100 per cent of their regular wages. Across Canada, the number of paid sick days is largely determined by the employer and/or union collective agreements.

**Short-term disability (STD):** This form of insurance provides income replacement (17 or 52 weeks, depending on the plan) when a plan member is unable to work for a brief period due to hospitalization, an accident, or becoming ill. STD generally provides coverage for common situations such as recovery following major surgery, an injury, or accident. Employees unable to return to work at the end of the STD period may be eligible to transition to LTD insurance if they are covered for this benefit.

## Appendix B

# Sectoral and regional differences in part-time employee benefits

Sectoral and regional differences were found in some part-time employee benefits. (See Tables 22 and 23.) There were no significant differences in part-time employee offerings based on organization size or industry.

- Cooperatives were less likely to offer critical illness insurance to part-time employees than organizations in other sectors.
- Government organizations (provincial and crown) were more likely to provide part-time employees with long-term care insurance than non-government organizations.

- While most organizations reported that they provide their part-time employees with the same coverage as full-time employees, those in New Brunswick (50.0 per cent) and Saskatchewan (57.1 per cent) were less likely to do so. Those in Manitoba (100.0 per cent) and British Columbia (93.8 per cent) were the most likely to do so.
- Organizations in Manitoba were the most likely to provide their part-time employees with the same STD (90.0 per cent) and LTD (90.0 per cent) coverage as their full-time employees.

**Table 22**

Prescription drug, life insurance, STD, and LTD coverage varies by province (per cent)

	Prescription drug coverage			Group life insurance			STD			LTD		
	Same coverage as full-time benefit	Coverage pro-rated to full-time benefit	Not offered to part-time employees	Same coverage as full-time benefit	Coverage pro-rated to full-time benefit	Not offered to part-time employees	Same coverage as full-time benefit	Coverage pro-rated to full-time benefit	Not offered to part-time employees	Same coverage as full-time benefit	Coverage pro-rated to full-time benefit	Not offered to part-time employees
New Brunswick (n = 4)	50.0	0.0	50.0	25.0	0.0	50.0	0.0	0.0	100.0	25.0	0.0	75.0
Quebec (n = 7)	85.7	0.0	0.0	42.9	28.6	14.3	57.1	28.6	0.0	42.9	28.6	14.3
Ontario (n = 50)	74.0	0.0	12.0	63.3	8.2	16.3	39.6	18.8	31.3	44.0	14.0	34.0
Manitoba (n = 10)	100.0	0.0	0.0	90.0	10.0	0.0	90.0	10.0	0.0	90.0	10.0	0.0
Saskatchewan (n = 14)	57.1	21.4	0.0	50.0	28.6	0.0	46.2	23.1	23.1	53.8	23.1	7.7
Alberta (n = 20)	85.0	5.0	5.0	65.0	15.0	10.0	70.0	10.0	15.0	70.0	10.0	15.0
British Columbia (n = 16)	93.8	6.3	0.0	87.5	6.3	0.0	53.3	26.7	6.7	56.3	25.0	18.8

Note: This information reflects point-in-time responses from March 2023. Insufficient data exist to report for Nova Scotia; no data exist for other regions.  
Source: The Conference Board of Canada.

**Table 23**

Critical illness and long-term care insurance coverage varies by sector

(per cent)

	Critical illness insurance			Long-term care insurance			Paid sick leave (excluding STD and LTD)		
	Same coverage as full-time benefit	Coverage pro-rated to full-time benefit	Not offered to part-time employees	Same coverage as full-time benefit	Coverage pro-rated to full-time benefit	Not offered to part-time employees	Same coverage as full-time benefit	Coverage pro-rated to full-time benefit	Not offered to part-time employees
Private sector corporation (n = 74)	52.8	4.2	34.7	30.4	2.9	58.0	52.7	16.2	25.7
Provincial government department/agency (n = 5)	50.0	0.0	50.0	50.0	0.0	50.0	40.0	20.0	40.0
Not-for-profit organization (n = 15)	50.0	7.1	28.6	28.6	7.1	57.1	46.7	33.3	13.3
Crown corporation (n = 13)	60.0	10.0	30.0	50.0	0.0	50.0	53.8	23.1	15.4
Cooperative (n = 7)	28.6	0.0	71.4	16.7	0.0	83.3	42.9	42.9	0.0

Note: This information reflects point-in-time responses from March 2023. Insufficient data exist to report for federal government department/agency, municipal government, or university/school board.

Source: The Conference Board of Canada.

## Appendix C

# Methodology

*Benefits Benchmarking 2023: Employer-Sponsored Benefits Plans* summarizes part of the data from the first module of the Benefits Benchmarking 2023 survey, which explored both group benefits and inclusive benefits. An issue briefing on inclusive benefits will be published later this year.

The survey, which was open March 13–31, 2023, was sent to human resources professionals in Canadian organizations operating in a variety of regions, sectors, and industries. A total of 159 organizations participated in this module. All data was analyzed using SPSS statistical software.

Continuous variables that were skewed (e.g., number of benefits plans) were cleaned to reduce skewness. This allowed for the use of statistics with normality assumptions to test for group differences.

A follow-up survey, which asked organizations to report on their monthly benefits premiums and maximum coverage amounts for extended health care, dental care, life and accidental insurance, critical illness, and disability, was sent to participants of the Benefits Benchmarking Module 1 survey in August and September of 2023. A total of 64 organizations participated in the follow-up module, which represents a 40.3 per cent response rate. All data was analyzed using SPSS statistical software.

## Appendix D

# Participating organizations

A total of 159 organizations participated in the March 2023 Canadian Benefits Benchmarking Survey. The following participating organizations have authorized the publication of their name:

A&W Food Services of Canada Inc.	CAAT Pension Plan
Acadia Construction Inc.	Canada Post Corporation
Affinity Credit Union	Canadian Air Transport Security Authority (CATSA)
Agnico Eagle Mines Limited	Canadian Life & Health Insurance Association Inc.
Air Canada	Canadian Medical Protective Association
Alberta Blue Cross	Capital Power
Alberta Central	CapitalCare
Alberta Children's Hospital Foundation	Cashco Financial Inc.
Alberta Health Services	Champlain Seafood/ Wawanesa Insurance
Alberta Motor Association	City of Edmonton
Alberta New Home Warranty Program, The	Concordia University
Alectra Utilities	CORE Linepipe Inc.
Alterna Savings & Credit Union Ltd.	Cowan Insurance Group
Arctic Beverages LP	Creative Options Regina
Assiniboine Credit Union	Credit Union Central of Manitoba
Association québécoise des pharmaciens propriétaires (AQPP)	CRH Canada Group Inc.
ATCO Ltd.	CSA Group
B. A. Robinson Co. Ltd.	Defence Construction Canada
Baycoat Ltd.	Dentons Canada
BC Transit	Dexterra Group
British Columbia Institute of Technology	Ducks Unlimited Canada
British Columbia Lottery Corporation (BCLC)	Dynacare
Brookfield Properties	EfficiencyOne
	Enbridge Inc.



Engineered Solutions Group	Kenaidan Contracting Ltd.	Oshawa Community Credit Union	SMS Equipment
ERCO Worldwide	Kingston Midstream	Ottawa Catholic School Board	Steinbach Credit Union
Ernst & Young Canada	Kuntz Electroplating Inc. (KEI)	Parkland Corp.	St. Lawrence Seaway Management Corporation
Export Development Canada	Lawyers' Professional Indemnity Company (LawPRO)	Peavey Industries LP	Sudbury Credit Union
Farmers Edge Inc.	Ledcor Group	People Corporation	Sun Life
Fast-Sexing Technologies	Lindt & Sprungli (Canada), Inc.	Pizza Hut Canada Company	Svante Technologies Inc.
Federated Co-operatives Limited	Liquor Control Board of Ontario (LCBO)	Pratt & Whitney Canada	Taylor McCaffrey LLP
FedEx Express Canada	Loblaw Companies Limited	Procter & Gamble Inc.	TCU Financial Group
First Capital REIT	Lockheed Martin Canada	PSP Investments	TELUS
First Nations Health Authority	Lone Tree Inc.	R.C. Purdy Chocolates Ltd.	Trans Mountain Corporation
First West Credit Union	Manitoba Hydro	Regional Municipality of Peel	TransLink
FortisBC	Maple Leaf Foods Inc.	Regional Municipality of York	Treasury Board of Canada Secretariat
GE Canada	Maple Leaf Property Management (MLPM)	Richardson International Limited	Triovest Realty Advisors Inc.
General Dynamics Mission Systems – Canada	Marriott Hotels of Canada	ROSEN Canada Ltd.	TuGo
GHD Group	Mayfair Diagnostics	Royal Canadian Mint	Unity Credit Union Limited
Gore Mutual Insurance Company	Medavie Blue Cross	Saddlebrook Management Consultants Inc.	University of Alberta
Government of Alberta	Metro Toronto Convention Centre	Saskatchewan Government Insurance (SGI)	University of British Columbia
Government of Saskatchewan	Microsoft Canada	Saskatchewan Workers' Compensation Board	Urban Systems Ltd.
Halifax Regional Municipality	MNP LLP	SaskEnergy	Ursula Franklin Academy (UFA)
Healthcare of Ontario Pension Plan (HOOPP)	Moosehead Breweries Ltd.	SaskPower	VersaBank
Home Hardware	NFP Canada Corp.	Secrétariat du Conseil du Trésor (Québec)	VHA Home HealthCare
HUB International	Northern Inter-Tribal Health Authority	Segal GCSE LLP	Viterra Canada Inc.
iA Financial Group	NOVA Chemicals	Servus Credit Union	Walmart Canada
Insurance Corporation of British Columbia (ICBC)	Ontario Dental Association	SGS Canada Inc.	Wawanesa Insurance
Investment Management Corporation of Ontario (IMCO)	Ontario Lottery and Gaming Corporation	Shell Canada	Werklund Family Office Inc.
J.D. Irving, Limited	Ontario Medical Association	Silent Partner Software	Westland Insurance
K+S Potash Canada GP	Ontario Pension Board	Sleeman Breweries Ltd.	Wilkinson & Company LLP
	Ontario Power Generation		WorkSafeBC
	Orano Canada Inc.		WorkSafeNB

## Appendix E

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