

Summary: 2024 Massachusetts Employer Survey (MES) for Employer Sponsored Healthcare



Jeff Bastien

Employee Benefits Broker & Strategic Advisor

June 10, 2025

Introduction

As a fiduciary to the employee benefits marketplace and businesses small and large alike, it is our responsibility to shed light on the trends of Massachusetts health insurance, its future direction, and its key role in an organization's operational and financial health.

Employer-sponsored insurance (ESI) shapes the health insurance market in the state and impacts the demand for the state's public insurance programs, including MassHealth. The MES, a biennial survey of Massachusetts employers, tracks and monitors employer health insurance offerings, employee take-up rates, health insurance premiums, employer contribution amounts, plan characteristics, and employer decision-making.

The 2024 MES provides key insights on how the landscape of workplace health benefits has shifted during a period of challenge and recovery for many businesses. Prior to this year's survey, the MES was most recently fielded in 2021. Key areas of focus:

- ***Employer Insurance: Offer, Take-Up, and Coverage Rates***
- ***Plan Offering and Enrollment***
- ***Cost Sharing Among Employers and Employees***
- ***Health Insurance Decision Making***

With major price disruption on the horizon, it is more important now to partner with a firm that is giving your business and employees its full attention when it comes to managing costs and offering strong benefits that fit employee needs. The [Apex Benefits Partners](#) team is ready to get to work!

Jeff Bastien

Principal & Strategic Advisor, Employee Benefits
Apex Benefits Partner, Inc.

www.apexbenefitsonline.com

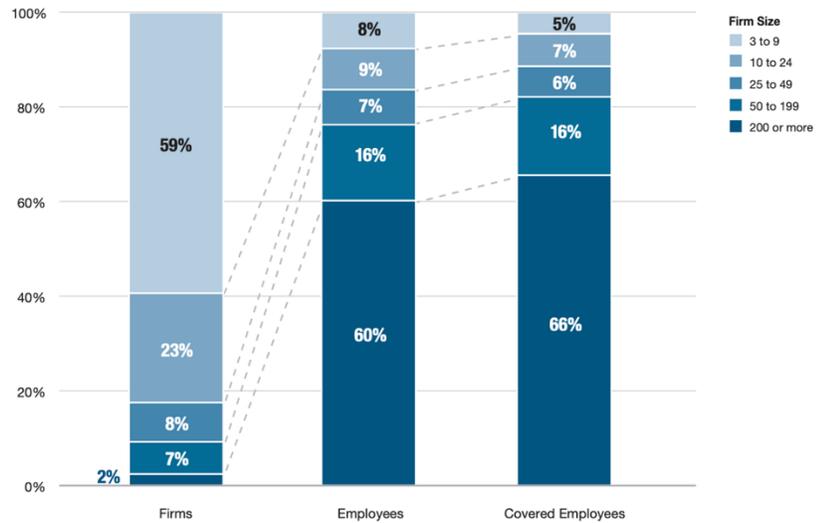
Employer Insurance: Offer, Take-Up, and Coverage Rates

In 2024, 91% of firms in Massachusetts had fewer than 50 employees. While these small firms made up the largest proportion of employers in the state, they accounted for only 24% of all employees in Massachusetts.

About two-thirds (66 percent) of small firms offered health insurance to their employees, compared with 94 percent among large firms.

Apex Insight: While more employees work at Large Businesses (>200 employees), 98% of businesses in MA are considered "Small" (<200 employees). As a broker, it is our job to make healthcare competitive and bring the same resources to small businesses so they can compete for the same talent pool as larger businesses with more resources.

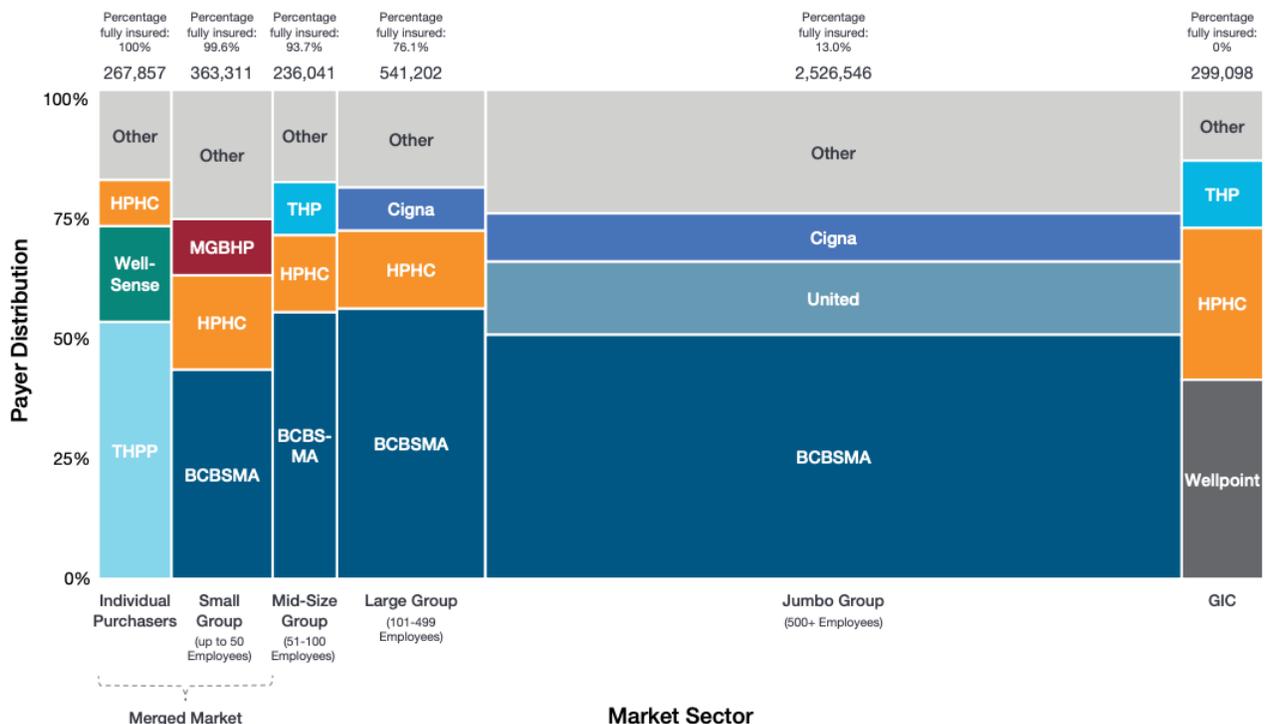
Distribution of Firms, Employees, and Covered Employees by Firm Size
2024



Blue Cross Blue Shield of Massachusetts still retains the largest member share in all market segments. Large national carriers (Cigna, United) support Large Businesses much more than the Small Businesses.

Apex Insight: The entire theme of this MES is that Small Businesses are falling behind their larger counterparts. Apex will bring education and resources to those Small Businesses so they can keep up financially and from a talent standpoint. (I.e. Cigna Association plan for businesses under 100 employees)

Members per Market Sector



In 2024, 83% of Massachusetts employees were eligible for their firms' health insurance (eligibility rate), and 68% of eligible employees enrolled in their employer's health plans (take-up rate).

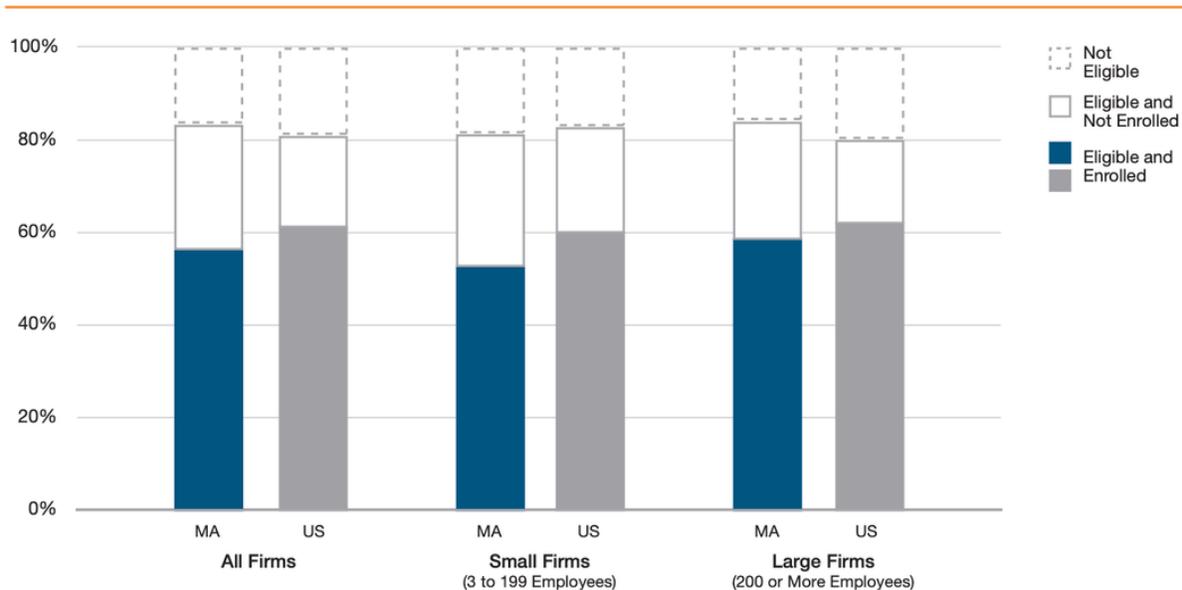
- A smaller share of eligible Massachusetts employees at small firms enrolled in their firm's insurance (65%) compared with employees in small firms nationally (72%).
- Among Massachusetts firms that offered health insurance, more than half of all employees (56%) received health insurance coverage from their employer (coverage rate).
- Employees who do not enroll in their employer's health plan may receive coverage through a family member's employer, unsubsidized non-group coverage, or MassHealth, or they may be uninsured.

Apex Insight: *Less employees are taking their small business' health insurance plans because the rates are simply not affordable. Healthcare affordability is causing employees to seek alternative options, even sometimes leaving for a different work opportunity.*

Health insurance is the No.2 asked about benefit when it comes to recruiting and retention behind only pay scale/salary. It is a business necessity to treat health care as a strategic advantage when comparing to industry peers. *As we will see further down in this study, that is a major difference as to how Large Businesses view health insurance compared to Small.*

Employee Eligibility, Take-Up, and Coverage Rates: Massachusetts vs. United States

2024



	All Firms		Small Firms		Large Firms	
	MA	US	MA	US	MA	US
Eligibility Rate	83%	81%	81%	83%	84%	80%
Take-Up Rate	68%	75%	65%	72%	69%	77%
Coverage Rate	56%	61%	53%	60%	58%	62%

Eligibility rate is the percentage of employees eligible for health benefits offered by their employer.

Take-up rate is the percentage of **eligible** employees enrolled in their employer's offered health insurance plans.

Coverage rate is the percentage of **all** employees covered by their employer's offered health insurance plans.

Plan Offerings and Enrollment

- Most firms in Massachusetts (58 percent) offered only one health plan in 2024, more commonly among small firms than large firms (60 percent vs. 17 percent).
- Together, HMO and PPO plans covered 96 percent of enrolled employees.
- Among firms offering insurance, 71 percent offered at least one high deductible health plan (HDHP). Most small firms (56 percent) and nearly one-third of large firms (31 percent) offered HDHPs exclusively.
- Of firms offering insurance, about a third (34 percent) offered an HDHP with a savings option (HRA or HSA), more commonly at large firms than small firms (55 percent vs. 33 percent).

Apex Insight: As we talked about in our webinar, many times a large renewal can be a mismatch of plan offerings to risk profile of your business and employees. **Simply not giving employees enough options for healthcare is a very simple fix.** From our webinar, a large renewal can often be a mismatch of plan offerings to a business' risk profile:

Plan Design Mismatch

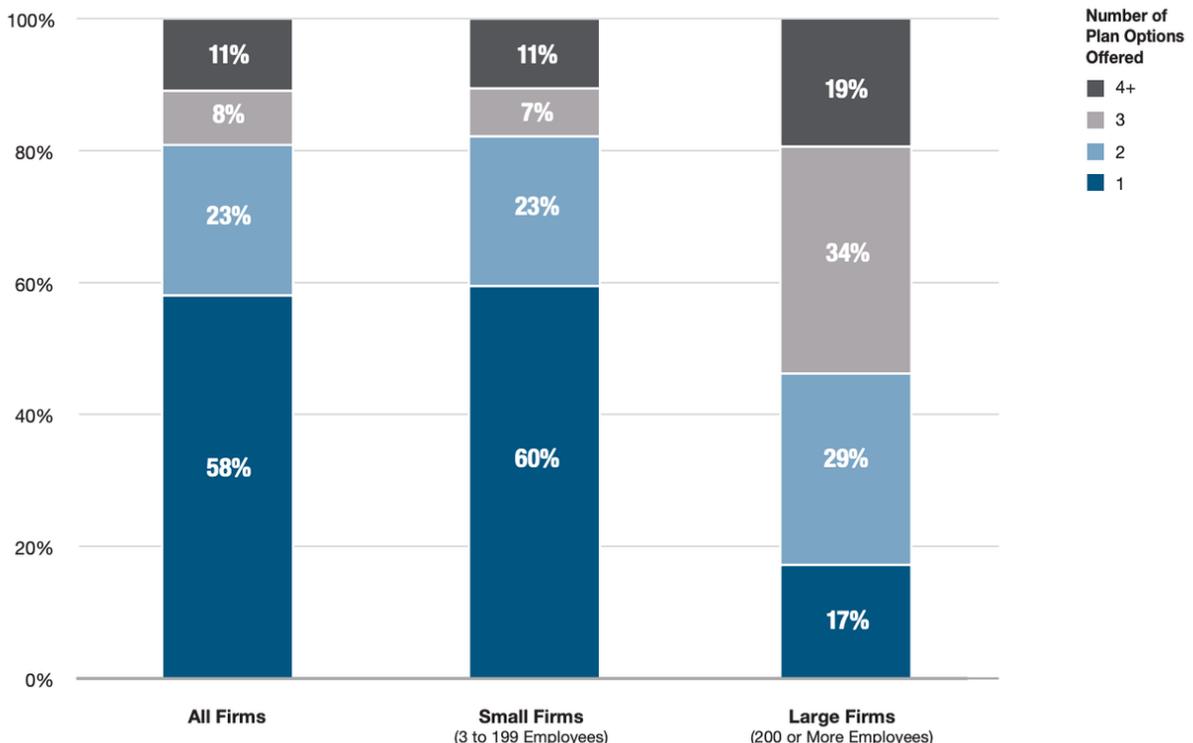
- **Outdated plan structures may not align with current member needs or cost trends.**
- **Limited use of tiered networks, high-deductible options, or value-based care strategies.**

Benefit Misalignment

- **Rich benefits that incentivize overutilization or fail to direct members to high-value care.**
- **Coverage of high-cost drugs without utilization management controls (e.g., prior auth, step therapy).**

Number of Health Plans Offered

2024



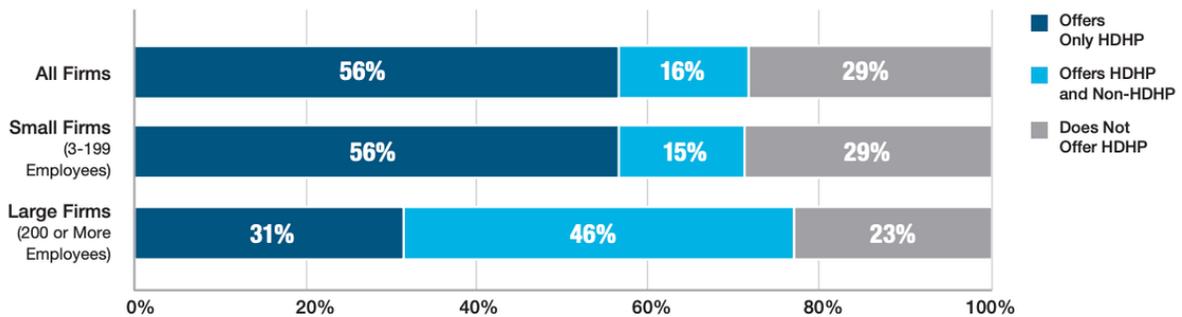
- In 2024, 71% of firms offering health insurance offered an HDHP.
- More than half (56%) only offered HDHPs, and a smaller share (16%) offered both HDHPs and non-HDHPs.
- Small firms exclusively offered HDHPs more often than large firms (56% and 31%, respectively).
- Large firms were much more likely than small firms to offer both an HDHP and a non-HDHP option (46% vs. 15%).
- Among firms offering insurance, more than a third (34%) offered HDHPs with an accompanying savings option—Health Reimbursement Account (HRA) or Health Savings Account (HSA).
- Large firms were more likely to offer an HDHP with a savings option than small firms (55% and 33%, respectively).

Apex Insight: Most small businesses cannot afford solely offering a PPO Plan. We suggest looking at our Association Plan offering with a Cigna PPO plan or our captive with InCap for an EPO offering. If your business is offering a HDHP, look at pairing it with our PFA offering to create sustainability. (43 min mark of the webinar above we go over 3 case studies for these programs). Solely offering an HDHP can be a financial burden on employees.

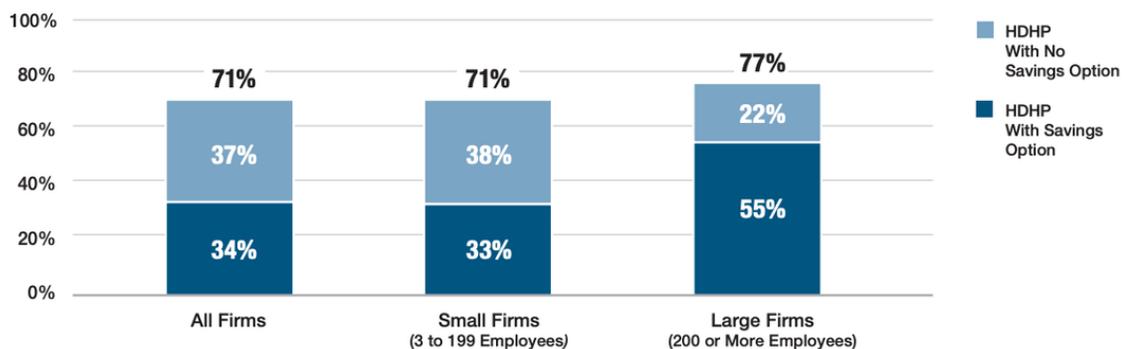
High Deductible Health Plan (HDHP) Offerings

2024

Percent of Firms Offering HDHP and non-HDHP Options Among Firms Offering Insurance



Percent of Firms Offering HDHP Options by Firm Size Among Firms Offering Insurance



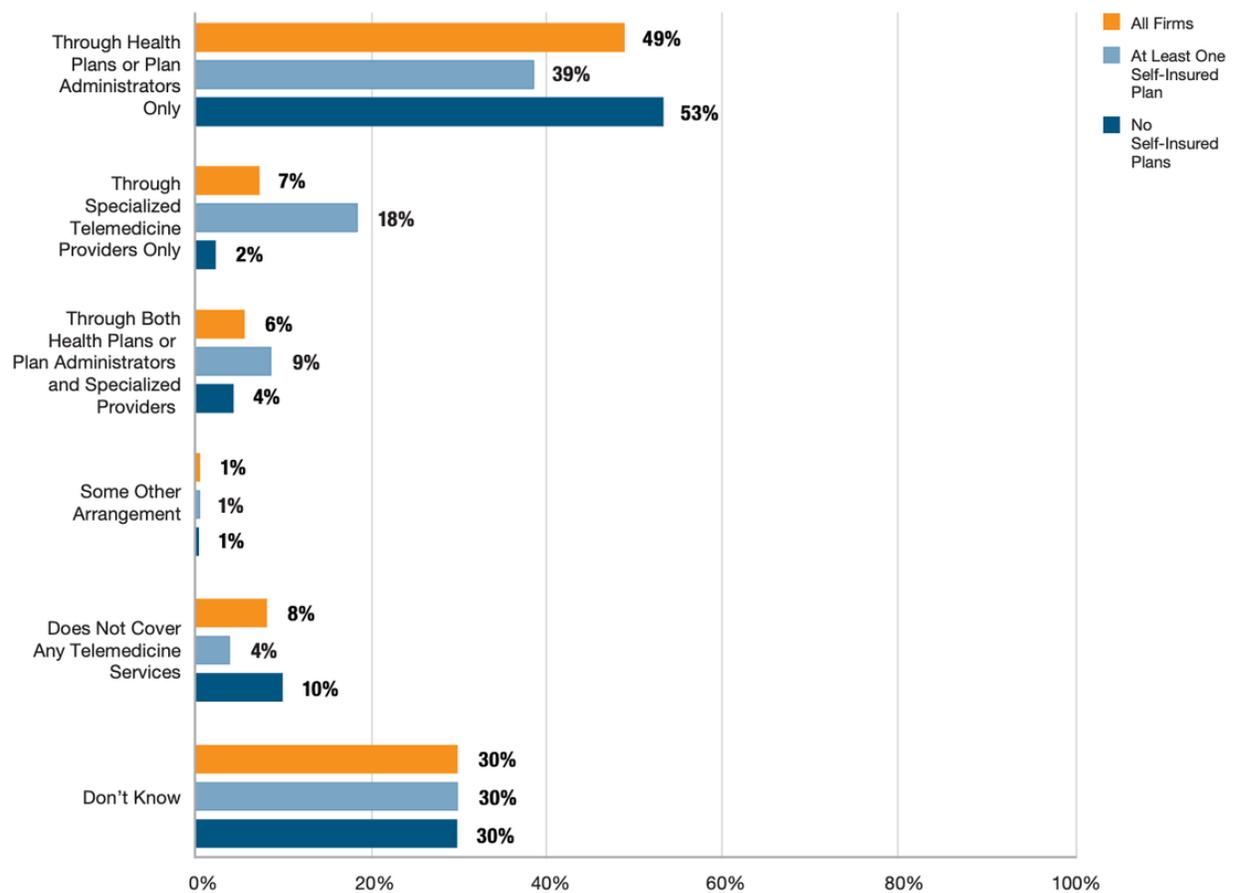
In 2024 firms offering health insurance were asked whether they covered telemedicine services for their employees and how those services were provided.

- Most firms (62%) reported covering telemedicine services, 8% reported they did not, and 30% indicated not knowing if these services were covered.
- Among firms reporting covering telemedicine services, the most common modality was through the firm’s health plans or a plan administrator.
- A smaller share of firms used specialized telemedicine service providers such as Teladoc, Doctor on Demand, or MDLIVE, or offered both arrangements

Apex Insight: This stat is new for the 2024 report. Our most worrisome takeaway: 30% of businesses don't even know if/how they offer telemedicine. This is a failure point for your Broker. If you don't know the services your carrier partners provide your employees, a red flag should be placed next to communication and engagement. At Apex, all of these programs are pulled front and center onto our Apex Explorer platform for employees and highlighted at open enrollment.

Telemedicine Coverage and Modality Among Firms Offering Health Insurance

2024



Cost Sharing among Employers and Employees

Compared with their national counterparts for single coverage, Massachusetts firms and their employees faced a higher average monthly premium (\$789 vs. \$746) and employees contributed a larger share of the premium (24 percent vs. 15 percent).

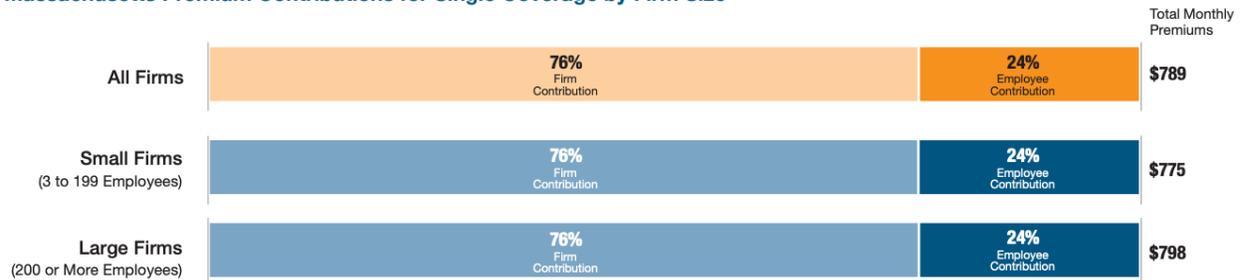
- The average percentage contributed by employees for single coverage was 24% in Massachusetts (\$188 per month) compared with 15% nationally (\$114 per month).

Average monthly premiums for family coverage ranged from \$1,645 for coverage of the employee and spouse to \$2,244 for coverage of the employee, spouse, and dependent(s) in Massachusetts, compared with \$2,131 nationally for any family coverage covering more than one person.

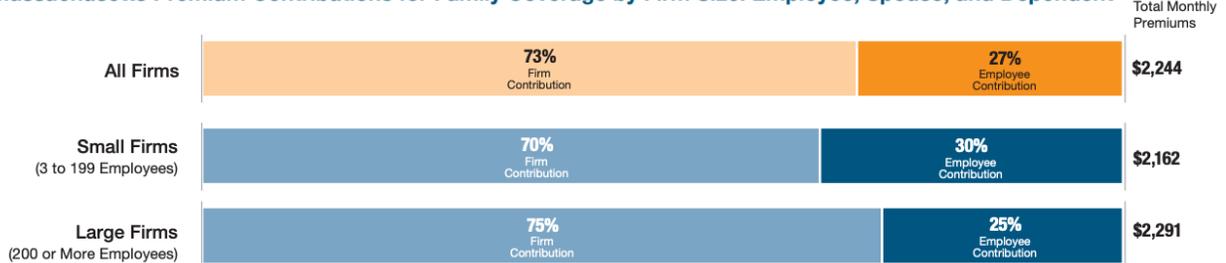
- The average percentage contributed by employees for each of these coverage options was 27% for all firms.
- The average percentage contributed by employees for each of these coverage options was greater at small firms than large firms.

Apex Insight: 2026 rates have been filed by carriers at a 12.9% trend, higher than 2025. Healthcare costs are becoming unsustainable for a business. Offering more affordable healthcare is equivalent to a MAJOR pay increase for employees, as well as controlling a business' major financial liability. Small businesses need options and Brokers willing to bring resources to them regardless of size.

Massachusetts Premium Contributions for Single Coverage by Firm Size



Massachusetts Premium Contributions for Family Coverage by Firm Size: Employee, Spouse, and Dependent



In 2024, the average annual deductible for single coverage was \$1,354, lower than the annual deductible nationally (\$1,787). Massachusetts annual deductibles were more than twice as high at small firms relative to large firms (\$2,129 vs. \$900), a greater difference than was seen nationally (\$2,575 vs. \$1,538).

Overall, Massachusetts employees faced lower out-of-pocket limits than their national counterparts. The average out-of-pocket limit for single coverage in Massachusetts was \$3,993, compared with \$4,409 nationally.

Copayments for medical services were generally higher among plans offered by small firms than those at large firms, particularly for inpatient and emergency department (ED) visits.

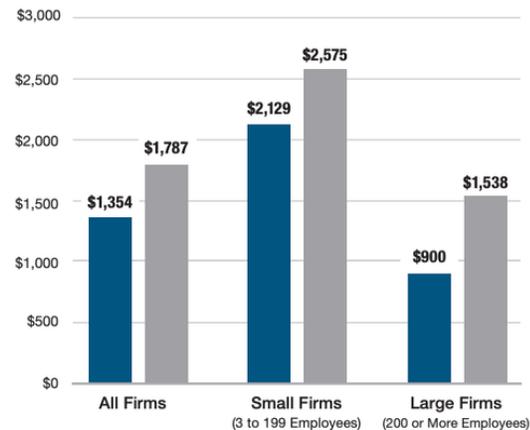
Apex Insight: MA businesses want to offer strong benefits to employees because it is expected. But it is coming at the detriment to a sustainable budget, meaning changes are going to be FORCED, rather than strategically planned. As we mentioned in an above section, the misalignment of benefits can set off a chain reaction that leads to increased premiums and benefit decreases – the exact opposite of what Small Businesses want for their employees.

Don't end up in a position where your hand is forced because of a surprise renewal and your only solution is to cut benefits. Hold your Broker accountable. There are solutions in the small group marketplace, just ask Apex clients!

Annual Deductibles, Out-of-Pocket Limits, and Copayments for Single Coverage: Massachusetts vs. United States

2024

Average Annual Deductibles for Single Coverage by Firm Size



Average Annual OOP Limits for Single Coverage by Firm Size



Copayments by Firm Size

	All Firms	Small Firms	Large Firms
PCP Office Visit	\$24	\$26	\$23
Mental Health Office Visit	\$31	\$31	\$31
ED Visit	\$219	\$282	\$188
Inpatient Visit	\$330	\$473	\$263
Generic Drug	\$12	\$13	\$12
Non-Preferred Brand Drug	\$63	\$78	\$56
Preferred Brand Drug	\$36	\$42	\$33
Specialty Drug	\$97	\$114	\$87

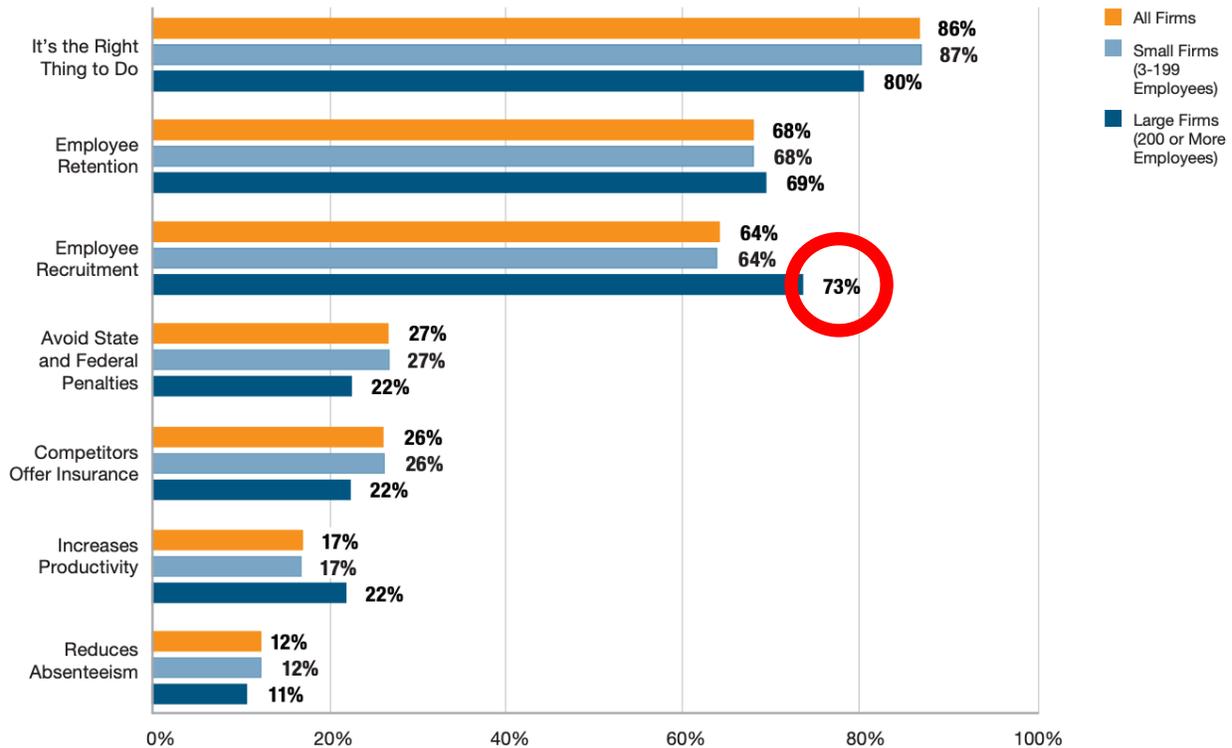
Health Insurance Decision Making

The types of services for which firms used agents, brokers, or consultants varied by firm size, with small firms most commonly reporting comparing prices (93 percent) and large firms reporting negotiating with insurers (92 percent). Nearly a quarter (23 percent) of firms reported increasing member cost-sharing in the past 12 months to manage health insurance costs.

Apex Insight: Within these charts we focus on the biggest DELTA between large and small groups. In this case, there is almost a 10% swing for employee recruitment. **Benefits (and healthcare specifically) are used as a recruiting tool for large businesses.** Back to our first chart, "most employees are employed at large businesses but 98% of businesses are smaller." It's time for small businesses to start THINKING like large businesses and being strategic around health insurance.

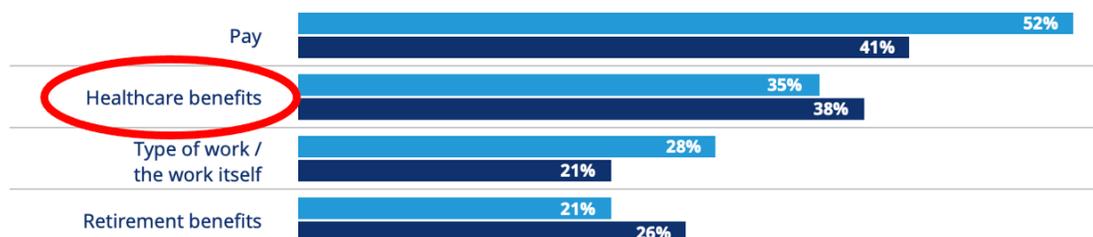
Employer Reasons for Offering Insurance

2024



Why do employees join — and why do they stay?

- **Attract:** Top 3 items found most attractive *initially*?
- **Retain:** Top 3 Items that are most attractive *today*?



New for this report, the 2024 MES asked firms that utilized an **agent, broker, or consultant** about the types of services they obtained from these entities. Overall and among small firms, the top uses of these entities were comparing prices (93%) and network options (80%).

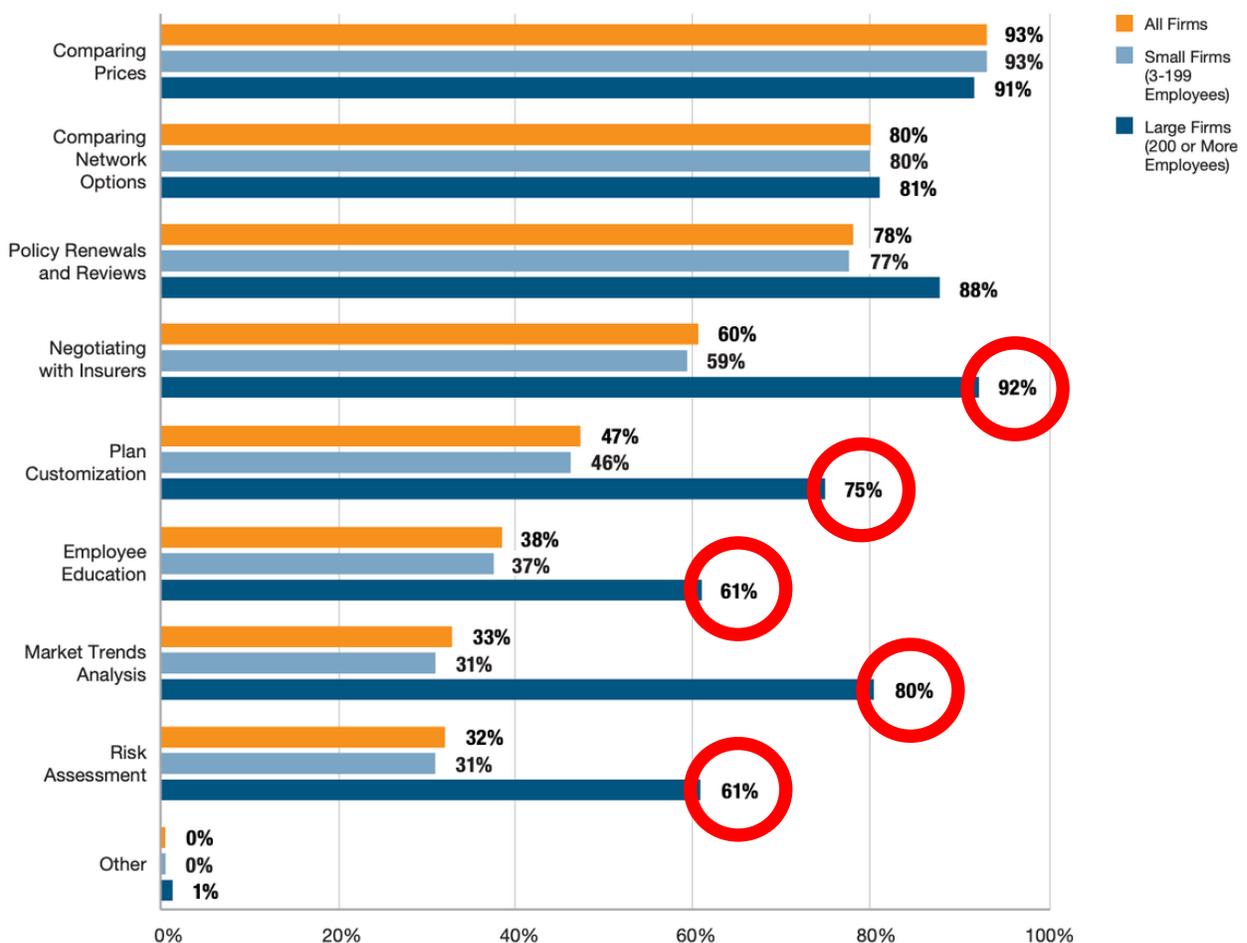
Larger firms tended to report using an agent, broker, or consultant for a wider variety of services than small firms. The top services reported by large firms were negotiating with insurers (92%) and comparing prices (91%).

*Apex Insight: A fitting close, what are Brokers doing these days? According to this survey, it is a wildly different answer for business under 200 employees compared to over 200. Like the analysis of the last graph, our focus is on the areas that are the biggest deltas between Small and Large? The difference in services is **STAGGERING** beyond price/network shopping.*

Why are businesses under 200 employees complacent with paying Brokers when they AREN'T supporting major strategic initiatives within Healthcare and Benefits?

Employer Use of Brokers in Insurance and Benefits Decisions

2024



Why Apex?

Driven by local carrier financial instability and a sharp trend increase already filed for 2026, the health insurance landscape continues to shift, and small businesses are increasingly left behind. The MES reveals brokers prioritize larger groups, leaving smaller employers without the strategic guidance or resources needed to compete for top talent or maintain financial stability.

This imbalance is putting most small [and some large] businesses at a clear disadvantage.

Expect more from your broker.

The team at Apex is uniquely positioned to support smaller employers with exclusive benefits programs, cost-control strategies, and innovative tools that larger groups have long had access to but deemed not financially viable to offer to small business. In today's volatile market, aligning with a partner like Apex isn't just smart, it's essential. Join the movement today!



Jeff Bastien
774-239-4139
jeff@apexbenefitsonline.com
Strategic Advisor



Kelley Bissaillon
774-212-5431
kelley@apexbenefitsonline.com
Client Executive



John Foley
617-909-7783
john@apexbenefitsonline.com
Strategic Advisor



Doan Trinh
508-280-2485
doan@apexbenefitsonline.com
Client Executive



Insurance Brokerage & Advisory Services; Employee Benefits, Commercial, Personal, Private Client Group



Specialized Health Insurance Programs
Small Group Association Plan, PFA, InCap Captive



Technology Management, *Apex Explorer*, It, Data Security, Benefits Administration, HRIS & Payroll



Wellness, Disease Management & Nutrition Programs



Human Resources Consulting, Handbook and Policy Development, Compliance Audits



Leadership, Management & Employee Training
Learning/Development Programs



401k and Retirement Plan Advisory
Financial and Tax Consulting