



Employees, Employers & the Evidence... The Case for Expanding Coverage for Psychological Services in Canada



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About the CPA

The Canadian Psychological Association (CPA) is the national voice for the science, practice and education of psychology in the service of the health and welfare of Canadians. With more than 7,000 members, the CPA is Canada's largest association for psychology and represents psychologists in public and private practice, university educators and researchers, as well as students.

Psychologists are one of the largest groups of regulated and specialized mental health providers able to diagnose and treat mental disorders, making our profession a key resource for the mental health treatment Canadians need.

Vision

A society where understanding of diverse human needs, behaviours and aspirations drive legislation, policies and programs for individuals, organizations and communities.

Mission

Advancing research, knowledge and the application of psychology in the service of society through advocacy, support and collaboration.

**For more information, please visit
our website at: www.cpa.ca.**

Executive Summary

With the COVID-19 global pandemic affecting all facets of our lives, the importance of one's mental health and the need for timely access to mental health care has never been more important or more clearly defined in the public's mind.

However, the reality is that most Canadians access mental health care providers, like psychologists, through their employer's health benefit plan or pay out-of-pocket. As much as there is a growing public conversation about the need for expanded coverage of mental health services, like psychotherapy, to be part of our publicly-funded health care system, we are not yet there. More work needs to be done.

Knowing this, the Canadian Psychological Association (CPA) thought it was important to better understand where employees stood in terms of the importance and value placed on accessing mental health care services provided by psychologists. At the same time, it was essential to know where employers stood in terms of how they perceived the value of their employee health benefit plans.

To support this analysis, the CPA summarized the available clinical evidence in support of psychological services, such as psychotherapy, and the business case for employer investment in the context of a return-on-investment. The report concludes by identifying a number of leading practices that have been adopted by employers.

Based on the Contents of the Report, There are Several Important Findings:

- 1. As we emerge from the COVID-19 global pandemic, Canadians will need more access to evidence-based psychotherapies, not less.*
- 2. Timely access to psychotherapies has both an evidence-based case and a business case with a clear return-on-investment (ROI).*
- 3. There is significant room for most employers to expand coverage to their employees for evidence-based psychological care.*
- 4. Across the public and private sectors, psychologists have an essential role to play in assessing and treating the people of Canada who have mental health problems. In the privately-funded health care space, psychologists (along with psychiatrists) are the only regulated providers whose scope of practice includes assessment and diagnosis of mental disorders in addition to psychological interventions like psychotherapy.*
- 5. Moving forward, it will be important for the public and private sectors to exchange information, and where possible, coordinate policy decisions.*

As we go ahead, it is expected the people of Canada will need more mental health care services, not less. In this context, it will be important for both the public and private sectors to find ways to improve timely access to mental health care for their residents and employees.

The CPA looks forward to working collaboratively with the federal, provincial and territorial governments, insurers and employers, and others to ensure the people of Canada get the timely care they need, when they need it.

There is no health without mental health.

1. Improving Access to Evidence-Based Psychological Care

While the COVID-19 global pandemic has cast a strong light on the importance of our mental health, public opinion polls have consistently identified the collective decline of our mental health and the need for a broader range of mental health care and psychological services within and across the public and private sectors. Consider:

- 42% of Canadians believe the pandemic will have a lasting impact on their mental health.¹
- 54% of Canadians say their mental health has worsened over the past two years, particularly for women 18-54 years of age; more than 60% say their mental health has worsened.²
- Canadians self-rated mental health (excellent or very good) consistently declined from 2018 to 2022, from 67% to 58%.³
- While anxiety and depression levels are improving (anxiety 21% to 11%; depression 14% to 9%) they remain above pre-pandemic levels (7% anxiety and 6% depression).⁴

The need to increase timely access to mental health services in Canada is considerable. One in five Canadians (20% or 7.6 million) will experience a mental health problem in a given year,⁵ and only half report that they have sought and received the care they need.⁶ Furthermore, roughly two of every nine workers (22%) will experience a mental illness that could affect their productivity.⁷

In Canada, access to mental health care services, such as psychotherapy, is provided through a limited combination of publicly funded programs, services and supports, and employee coverage via employers' extended health benefits programs.

In the former, most publicly funded coverage is accessible through general and family practitioners and psychiatrists and care that is provided by mental health care professionals, such as psychologists, social workers and mental health nurses within publicly funded institutions and organizations (e.g., hospitals, community health centres). In the latter, those who require mental health care either have some degree of coverage through their employers' extended health benefit plan and/or pay out-of-pocket. Based on the most recent 2022 data:⁸

- The median annual maximum employer coverage for mental health counselling is \$750, unchanged from 2021 and down 25% (from \$1,001 in 2020).
- The average annual maximum for mental health counselling was \$2,006, up significantly from \$1,294 (2021).
- 24% of employers recently increased their maximum level of coverage for mental health counselling (a modest gain from 19% in 2021 and 18% in 2020).
- 28% of employers said they plan to increase the maximum coverage for mental health counselling, up from 18% (2021) and 25% (2020), and 47% did not.
- 61% of employers have a maximum coverage for mental health counselling between \$0-\$1,000; 29% more than \$1,000, and 4% exceeding \$10,000.

Most of the current level of employer coverage for mental health care falls significantly short of the Canadian Psychological Association's (CPA) recommendation that employers provide their employees with stand-alone coverage for psychological services between \$3,500 - \$4,000 per year.⁹ This represents the approximate cost of a course of psychotherapy for the average person who needs it. The CPA was pleased to see this recommendation acknowledged by the Conference Board of Canada ("Consider increasing the maximum coverage for psychological services for traditional benefits plans or as an opt-in for employees with flexible benefit plans. The amount offered should align with level of coverage recommended by the Canadian Psychological Association").¹⁰

Furthermore, to offset some of the costs associated with expanded employer health benefit coverage for psychological care and to act as an incentive for employers to increase coverage for their employees and attract/retain employees, the CPA has called on the federal government to provide employers with a 25% tax credit if they provide coverage for psychological services at the recommended level – a level which enables someone to access an evidence-based dose of care.¹¹

Currently, there are 128 carriers that provide health insurance of which 90% is purchased through a group plan, however, what is included varies by employer. In 2021, approximately 27 million Canadians had access to these plans that paid out \$30.4 billion in supplementary health benefits of which \$600 million (or 2%) accounted for mental health/psychology-related benefits; up 45% from 2020 and 75% since 2019.¹²

While extended health benefits plans usually cover medications and dental care, only some include psychological care. While medication coverage isn't usually capped, there are significant caps on coverage for psychological care; even though evidence-based psychological interventions are less expensive than, and at least as effective as, medication in treating common mental health problems (e.g., depression and anxiety).¹³

Those who cannot afford to pay for private psychological care face long wait lists, get less than optimal help, or simply do not get help at all. At the same time, mental health service delivery within the publicly funded system face a number of ongoing challenges in terms of growing demand for care exceeding the capacity to provide timely care, resulting in long wait times.¹⁴ That said, a number of provinces (e.g., Newfoundland and Labrador, Nova Scotia, Quebec, Ontario, Alberta, British Columbia) are either actively considering or implementing new models of mental health care that expand public coverage of psychological services. This is a needed and welcome development.

Of interest, in February 2022, the Ontario government established a Portable Benefits Advisory Committee to provide advice on the design and implementation of portable benefits program for workers who fall outside of traditional employer provided benefits – with a focus placed on securing access to supplementary medical, dental and possibly mental health needs.¹⁵

Clearly, more needs to be done by both the public and private sectors to improve timely access to evidence-based psychological care. Given the fact that access to mental health care services is an issue that straddles both the public and private sectors, the Canadian Psychological Association (CPA) has made a series of recommendations that focus on the relationship between the public and private sectors,¹⁶ and the need to accelerate the integration of psychological services in our publicly funded primary health care system.^{17 18 19}

While issues of access to care are vital, the CPA fully recognizes that employer-based mental health programs, services and supports are likely to have more impact "when they support employees along the entire spectrum of mental health, from promotion to well-being to intervention and care, as well as the hazards that could psychologically harm an employee."²⁰



2. Purpose of Report

When it comes to effective policy-making, the CPA strongly believes that more needs to be known and understood about the value of mental health care services, such as psychotherapy (in particular, the clinical evidence and business case in the context of a return-on-investment), and the perspectives of employees and employers when it comes to the decisions that are made to (not) provide timely access to such coverage.

Drawing heavily on a range of publicly available documents, the remainder of this report identifies the evidence supporting the clinical value of psychotherapy and speaks to the return-on-investment that comes from broadened public and private sector coverage of psychotherapy.

The report also identifies a range of survey data on mental health coverage from an employee and employer perspective and concludes by identifying a number of positive policy decisions by employers that have expanded coverage of psychological services for their employees.

Based on the contents of this report, there are several important findings:

1. As we emerge from the COVID-19 global pandemic, Canadians will need more access to evidence-based psychotherapies, not less.
2. Timely access to psychotherapies has both an evidence-based case and a business case with a clear return-on-investment (ROI).
3. There is significant room for most employers to expand coverage to their employees for evidence-based psychological care.
4. Across the public and private sectors, psychologists have an essential role to play in assessing and treating the people of Canada who have mental health problems. In the privately funded health care space, psychologists (along with psychiatrists) are the only regulated providers whose scope of practice includes assessment and diagnosis of mental disorders in addition to psychological interventions like psychotherapy.
5. Moving forward, it will be important for the public and private sectors to exchange information, and where possible, coordinate policy decisions.

As we move ahead, it is expected that the people of Canada will need more mental health care services, not less. In this context, it will be important for both the public and private sectors to find ways to coordinate and improve timely access to mental health care for their residents and employees.

The CPA looks forward to working collaboratively with the federal, provincial and territorial governments, insurers and employers, and others to ensure the people of Canada get the timely care they need, when they need it. There can be no health without mental health.



3. Psychological Treatments – What is the Clinical Evidence?

Psychologists are experts in providing psychological treatments (e.g., Cognitive Behavioural Therapy [CBT], Interpersonal Therapy [IPT] and other evidence-based forms of individual and group psychotherapy to their clients.^{21 22} The research on psychological treatment is clear:²³

1. It is effective with a wide variety of mental health disorders such as depression,²⁴ anxiety, eating disorders, and substance use disorders; there is also good evidence that CBT and group psychotherapy reduce the negative symptoms of psychotic disorders as well as traumatic brain injury.
2. It is less expensive than, and at least as effective as, medication for the most frequent mental health conditions affecting Canadians. For conditions like depression and anxiety, psychological treatment often has a more enduring impact and higher adherence.²⁵
3. Psychotherapy alone is more effective in the long run than medications alone. Combining medications and therapy is effective in the long run and adding therapy to medications for those who do not respond to medications leads to improvements.²⁶
4. It works better than most medication(s) for most types of anxiety.
5. It leads to less relapse of depression when compared to treatment with medication alone.
6. It leads to patients who are more likely to follow through on treatment, feel less burdened by their illness and have lower suicide rates when used with medication to treat bipolar disorder.
7. It helps to prevent relapse when included in the services and supports for persons living with schizophrenia.
8. It reduces depression and anxiety in people with chronic conditions like heart disease, which leads to lower rates of disease-related deaths when combined with medical treatment. Psychological interventions to treat the mental health conditions that can co-occur with diabetes (e.g., depression, anxiety) can have positive impacts on adherence to diabetes treatment as well as on the development and progression of the diabetes itself.²⁷
9. It leads to savings of 20%-30% in health care costs.

While there is a mature literature detailing the clinical effectiveness of psychological treatments as outlined above, it is critical that governments continue to invest in psychological treatment research. Pre-eminent psychotherapy researchers in Canada include Dr. Paul Hewitt (University of British Columbia) and Dr. Giorgio Tasca (University of Ottawa). Dr. Tasca has developed the Psychotherapy Practice Research Network (PPRN) which is a valuable resource to clinicians, educators, and policy makers interested in what psychotherapy research has to say about clinical practice.²⁸

4. Investing in Mental Health Care & Psychological Services – What is the ROI?

While the clinical evidence on psychotherapy is not in dispute, policymakers, employers and others are increasingly focused on the return-on-investment (ROI) that comes from expanded access to psychotherapy. In other words, how do the benefits of psychotherapy stack up in relation to its costs?

That timely access to quality mental health care is essential is underscored by the fact that 500,000 Canadians miss work due to mental illness,²⁹ the annual economic cost of mental health problems is \$51 billion of which \$20 billion stems from the workplace,³⁰ and mental health accounts for 30% percent of short- and long-term disability claims and 70% of workplace disability costs.³¹

A recent survey noted that 42% of senior leaders/decision-makers were very familiar with the data/evidence on ROI for psychological services, and 60% were very confident/confident that coverage for psychological services provided a good ROI.³² While this is movement in the right direction, a recent report noted that there is room for improvement: “To strengthen the business case for investing in workplace mental health programs, employers must understand the financial and nonfinancial benefits of those programs and establish mechanisms to measure and maximize programs in order to realize those benefits.”³³ A recent survey of employers found that only 54% of organizations measured return on investment for health initiatives.³⁴

At the same time, a report from a global association of insurance companies defines mental health and the scale of the burden posed by poor mental health; examines the current role of life and health insurance in addressing mental health; and recommends steps to boost insurers’ contributions to promoting mental well-being from prevention to active case management.³⁵

Below captures some recent findings by thematic area in chronological order:

Mental Health System/Societal Impact

- Extending universal basic mental health care (i.e., access to evidence-based psychotherapies) to all Ontarians would save \$1.78 for every \$1 invested. The full economic impact of a universal mental health program would be a savings to Ontarians of nearly \$10 billion over the next 5 years.³⁶
- Studies of Canada and other jurisdictions such as the United Kingdom and France demonstrate approximately 2:1 savings for society from investment in a basic level of mental health care.³⁷
- Cognitive-based therapy (CBT) along with care management could yield anywhere from \$0.39 to \$3.35 for every dollar spent after one year.³⁸
- \$1 invested in mental healthcare yields, on average, \$2 in savings to society by alleviating costs to the health system, productivity, and overall wellbeing. Public healthcare coverage for psychotherapy “would pay for itself”.³⁹
- The World Health Organization projects a return of US\$5 for every US\$1 spent on increasing coverage for common mental health conditions, thanks to productivity gains.⁴⁰
- In France, they estimated a cost-benefit ratio ranging between 1.14 and 1.95.⁴¹

- In the United Kingdom, Layard and colleagues' cost-benefit analysis of the Improving Access to Psychological Treatments (IAPT) program showed that the program would pay for itself within five years.^{42,43}

Workplace Impact

- Every dollar invested in workplace cognitive-based therapy (CBT) could return about \$1.79 per participating employee after one year.⁴⁴
- Organizations with comprehensive mental health strategies perform better on average in all areas – from health and safety to shareholder returns.⁴⁵
- Deloitte Canada found that companies with mental health programs in place for one year had a median annual return on investment of (ROI) of 1.62 for every \$1 invested; it increases to \$2.18 if the programs have been in place for at least 3 years.⁴⁶
- In 2018, Bell Canada's return on investment (ROI) for workplace health programs for every dollar invested was \$4.10.⁴⁷

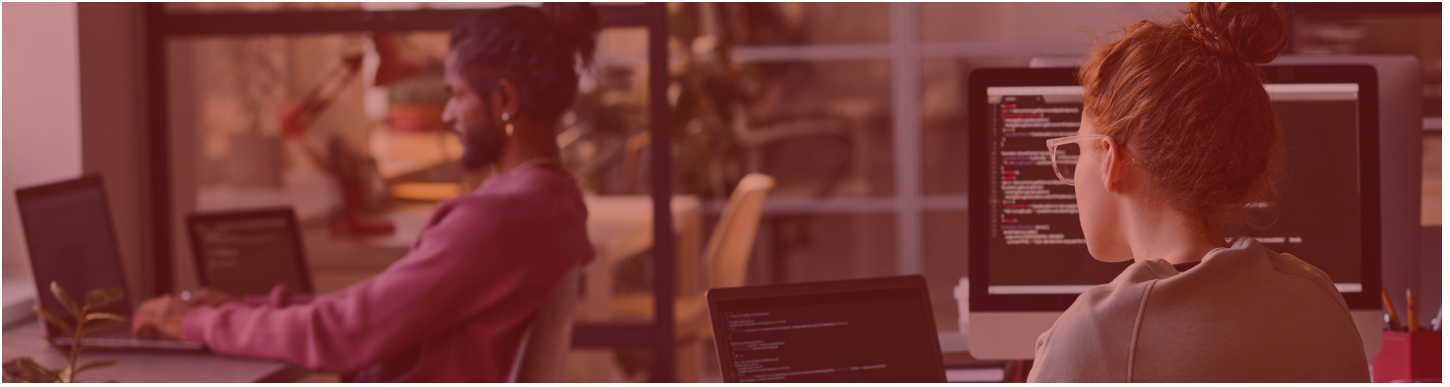
5. Recent Employee and Employer Perspectives on Coverage for Mental Health Care & Psychological Services

Although there is a significant public consensus about the need for the people of Canada to have timely access to mental health care programs, services and supports,⁴⁸ more needs to be known and understood about the breadth of coverage from the perspective of employees and employers. Each is addressed by thematic area in chronological order.

1. Employee Perspectives on Mental Health/Coverage

Employee Mental Health

- 32% of employees reported increased feelings of anxiety or sadness/depression.⁴⁹
- At 22%, mental illness (such as depression or anxiety) is the #1 chronic disease for employees since 2019.⁵⁰
- In June 2022, 33% of working Canadians have a high mental health risk, 43% have a moderate mental health risk, and 23% have a low mental health risk. Individuals who are self-employed have the highest mental health risk score, while those working for companies with 501-1,000 employees have the lowest mental health risk score.⁵¹
- The top 5 issues (anxiety, depression, family issues, work issues, COVID stress) accounted for 70% of the reasons why employees or a family member sought access to psychological services.⁵²
- Half (49%) of younger working Canadians say that their employer's benefit plans have not adequately met their health and wellness needs in the past year.⁵³
- A majority (68%) of Canadians say they would take a job with a good benefits plan over another job that pays more but does not have a benefits plan.⁵⁴
- 54% of working Canadians consider depression to be a disability, and 44% consider anxiety to be a disability – the highest figures since 2019.⁵⁵



- Canadians reporting poor mental health (32%) were more likely to take time off due to disability than those who report good mental health (12%).⁵⁶
- 59% of employees with a mental health condition missed work and/or found it harder to do their job due to their condition and/or pain.⁵⁷
- Employees working in health care (30%) or education (36%) reported much higher rates of mental health diagnosis.⁵⁸
- Female employees (26%) reported higher rates of mental health diagnosis compared to male employees (15%).⁵⁹
- At 26%, employees 18-34 years of age were more likely to report a mental health condition.⁶⁰

Coverage for Mental Health/Psychological Services

- 30% of Canadian workers say they would consider switching employers for better mental health supports and resources. 57% would like their employers to offer expanded mental health benefits, such as employee assistance programs and access to free therapy.⁶¹
- Employees were much more likely to describe the quality of their health benefits plan as excellent or good when workplace mental health supports are available (84% vs. 54%).⁶²
- 80% of employees who said their employer is not effective in managing their mental health conditions if their work environment did not support mental health.⁶³
- When employees were asked about depression, anxiety or other mental health conditions, a gap emerges; 49% of employees (compared to 75% of employers) said their employer effectively helps them manage these conditions. 10% of employees did not know, leaving 40% who felt their employer is not effective.⁶⁴
- 73% of young Canadians (18-34) and 69% of those 35-44 years of age are significantly more likely to leave their current employer for another that is offering what they would consider to be better benefits, with mental health (88%) being the most important.⁶⁵
- Canadians with employer-provided benefits are significantly more likely to rate their mental health higher at 60%, 7% higher than those without benefits.⁶⁶

- 80% of employees (whether they received psychological services or not) felt that the coverage through their extended health benefit plan was inadequate. More females (82%) than males (50%) who received psychological services thought their extended health benefit plan was not adequate.⁶⁷
- Most had timely access to a psychologist: 36% of employees with an extended health benefit plan were able to see a psychologist within two weeks, 72% within a month. 70% said the service relieved but did not completely take the problem away; 18% said their problem stayed the same.⁶⁸
- In addition to psychological services, 73% said they used the Employer and Family Assistance Program, 16% used self-directed online programs or apps, and 7% accessed peer support. 32% said that such services relieved their problem but did not completely take the problem away, 41% said the problem stayed the same, and 9% indicated that it got worse.⁶⁹
- Among those who have a group benefits plan through their work, 60% say their mental health is excellent/good compared to those who do not have a plan through their work (49%).⁷⁰
- When it comes to mental health support, 24% of Canadians with benefit plans indicate that the mental health support available in their benefit plan is insufficient. A further 16% indicate they do not have mental health support through their benefit plan, and 17% are not aware of their benefit plan's mental health resources. This suggests that there's an opportunity to review how mental health support is provided through benefit plans, making sure it's sufficient, and that employees need to be educated about the supports that are available to them.⁷¹
- 20% of Canadians with employee benefit plans are not aware of the benefits available to them; and 26% don't know how to access the benefits available to them (e.g., via an app, a toll-free number, etc.).⁷²
- 32% of Canadians with employee benefit plans indicate not having, or not being aware of, an employee assistance program (EAP – legal, family, career counselling, mental health support, and more).⁷³
- 21.9% of employees with a benefits plan had full coverage, 61.5% had partial coverage and 6.7% had no coverage (9.9% were unsure).⁷⁴
- Among those who have access to an Employee Assistance Program (EAP), 57% never accessed it.⁷⁵
- 21.5% of employees spend part of their Health Savings Account on mental health services (psychology, counsellor, etc.).⁷⁶
- Over the 2019-20 period, the number of employees who made mental health-related claims increased by 2.89% for psychologists, 49.3% for psychotherapists and 12.3% for social workers.⁷⁷
- 27% of employees have access to an Employee Assistance Program, 6% are covered by someone else in their household.⁷⁸
- 38% of employees have benefits that cover mental health providers to some degree, 15% are covered by someone else in their household.⁷⁹
- 60% of employees would leave their current job for one that offered them better support for their well-being (even if they offered less money).⁸⁰



2. Employer Perspectives on Coverage

Coverage for Mental Health/Psychological Services

- Surveyed organizations have increased their focus on mental health services in recent years with 93% providing coverage for psychological services. In the last two years, a third of surveyed organizations have increased their coverage levels for these services and another 16% aim to do so within the next year. On average, the maximum coverage is \$2,365 per employee.⁸¹
- The median annual maximum employer coverage for mental health counselling is \$750, unchanged from 2021 and down 25% (from \$1,001 in 2020).⁸²
- The average annual maximum for mental health counselling was \$2,006, up significantly from \$1,294 (2021).⁸³
- 24% of employers recently increased their maximum level of coverage for mental health counselling (up marginally from 19% in 2021 and 18% in 2020).⁸⁴
- 28% of employers said they plan to increase the maximum coverage for mental health counselling, up from 18% (2021) and 25% (2020), and 47% did not.⁸⁵
- 61% of employers have a maximum coverage for mental health counselling between \$0-\$1,000; 29% more than \$1,000, and 4% exceeding \$10,000.⁸⁶
- 58% of employers have training programs to help managers and/or employees recognize and respond to signs of depression or other mental health conditions. This up from 48% (2021) and 37% (2018).⁸⁷
- 87% of employers reported that timely access to mental health services provided by psychologists was “extremely important” or “very important”.⁸⁸
- 29% of employers increased their coverage of psychological services during the COVID-19 pandemic due to employee needs and concerns about the impact of the pandemic. 47% did not increase their coverage, with the most frequent reasons being cost or a belief that the coverage was adequate.⁸⁹
- Among those employers citing finances as a reason for not increasing coverage (e.g., difficult financial situation, could not afford premium increases, employees could not afford increased premiums), there was more than a sixfold difference between small to medium-sized organizations (13%) than large (2%).⁹⁰

- Fewer small to medium-sized companies (19%) increased their coverage for psychological services than large organizations (54%). Just 13% of organizations with less than 50 employees increased their coverage, while 50% with more than 1,000 employees did so.⁹¹
- 36% of employers had “full flexibility” or “some flexibility” (30%) in negotiating their health benefits package prior to renewal.⁹²
- 14% of employers said they would invest additional resources to help employees with substance use. This increased to 23% for those with a unionized workforce, and more than 500 employees.⁹³
- After the Employer Assistance Program (EAP), the highest net increase in utilization occurred for mental health services (31%).⁹⁴
- Considering COVID-19, 64% of employers thought mental health issues among employees (excluding those sick with COVID-19) will have the largest impact on benefit costs over the next 5 years. This was followed by mental health issues among employee’s dependents (47%).⁹⁵
- Ensure that all employees are familiar with all (health benefits) programs, but especially with mental health offerings.⁹⁶

Familiarity with Impact of Covering Mental Health/Psychological Services

- Less than half of senior leaders/decision makers (42%) reported they were “very familiar” or “familiar” with the data or evidence on their organizations’ ROI for covering psychological services. However, 60% were very confident or confident that the coverage for psychological services for all employees provided a good ROI.⁹⁷
- In private and non-profit organizations, about 20% of respondents said their senior leaders were not familiar with the ROI of covering psychological services, compared to 7% among public organizations.⁹⁸

6. How are Employers Responding?

As the stigma around mental health continues to recede, employers keenly understand, particularly as we emerge from the COVID-19 global pandemic, they must continue to invest in their most valuable assets – their employees. Knowing that the clinical evidence for psychotherapy is clear, and the business case for investing is becoming increasingly compelling, some employers have taken some bold steps when it comes to increasing coverage for mental health care and access to psychological services. Consider:

In 2022, **Bell Canada** enhanced its benefits plan to offer unlimited mental-health coverage for employees and their families, with covered practitioners including licensed psychologists, psychotherapists, family therapists, counsellors and social workers.⁹⁹

In 2022, the **TD Bank Group** increased its maximum coverage for mental health practitioners to \$5,000 per benefit year and removed the deductible for mental health claims.¹⁰⁰

Telus Communications Inc., in 2022, enhanced its extended health coverage for mental health claims to \$5,000 per eligible family member, which is unbundled from other paramedical practitioners.¹⁰¹



Effective July 1, 2023, the **Treasury Board of Canada** will increase coverage for psychologists and other mental health providers from \$2,000 to \$5,000 for the Public Service Health Care Plan.¹⁰²

On April 1, 2022, the **Bank of Nova Scotia** will increase its mental health coverage to \$10,000 annually for eligible employees and their dependents, up from its current limit of \$3,000. The plan will include coverage for clinical counsellors, cognitive behavioural therapy, and psychologists. The bank also moved mental health coverage into its own separate category, rather than have it grouped together with other services, such as massage therapy or chiropractic services, which can deplete the benefit limit.¹⁰³

In 2022, as part of **KPMG's** evolving approach to mental wellness the offered their employees \$2,000 in annual mental health coverage.¹⁰⁴

Coca Cola Bottling Ltd, in response to the COVID-19 pandemic implemented several mental health initiatives including: (1) information sessions about its EAP; increased coverage for psychological services from \$1,500 to \$5,000 annually and expanded coverage to include social workers and psychotherapists in addition to psychologists. As a result, they saw double their claims paid for psychologists, indicating employees and their dependents were using this benefit.¹⁰⁵

Starbucks was among the first companies in Canada to expand its list of practitioners in 2020 to include psychotherapists, social workers, guidance counsellors, marriage counsellors, and couple and family therapists, in addition to psychologists. The company was a trailblazer in mental health coverage, increasing its annual limit to \$5,000 per year for employees in Canada in 2016.¹⁰⁶

Corus Entertainment took a long look at their mental health benefits for their union and non-union staff. They removed the cap for non-union employees, and decided to also make a (extraordinary) decision to remove the cap as a non-negotiated benefit for 2021 given the unique (COVID-19) situation they were in.¹⁰⁷

In 2020 **Shopify** had carved out a \$2,500 cap for mental health related paramedical services, available to all employees in Canada.¹⁰⁸

IMG Financial, a year before the COVID-19 global pandemic, enrolled in a pilot project for a mobile health and wellness app. In April 2020 the project, which already provided its 4,000 Canadian employees and advisors with an employee assistance program, expanded support by launching an internet-based cognitive behavioural therapy program at no cost to employees (noting the service was already available through Manitoba's and Ontario's publicly-funded health care systems).¹⁰⁹

In 2020, the **CSA Group** increased its mental health coverage from \$1,000 to \$5,000 annually. Looking at their health care spending account, they also noticed that employees were running out of coverage as they used the account for psychology-related benefits. In 2021, they started to think about increasing their maximum again. “People have so many cost pressures in their lives, we don’t want mental health to be one of them for our employees or their dependents.”¹¹⁰

Cenovus Energy, in the fall of 2019, increased its psychology benefit maximum, from \$1,000 to \$6,000 for its basic plan, and \$1,500 to \$10,000 for its enhanced plan. The organization reached out to the Psychologists’ Association of Alberta to find out the costs of treating simple mental health issues. Many disorders, such as anxiety or depression require an average of 20 sessions of cognitive-based therapy (CBT). So they built their mental health strategy and coverage limits around making sure they were offering coverage for an evidence-based dose of treatment.¹¹¹

In 2016, **Sun Life** increased the annual coverage of mental health services for their own employees to \$12,000 per person, and expanded the list of eligible mental health practitioners that employees could access.¹¹²

In 2017, **Manulife** provided more mental-health support to employees by increasing their annual coverage of mental-health services to \$10,000 per person. Previously, employees could claim up to \$1,000 each year on professional services provided by licensed practitioners, including mental-health services. Under their redesigned plan, Manulife has separated the coverage for mental-health practitioners and allocated the new amount of \$10,000, which includes services for family members.¹¹³

7. Final Comments

Given the growing focus on the importance of one’s mental health – particularly as we emerge from the global COVID-19 pandemic – this report looks to capture a broad array of data sources that focus on employee and employer perspectives when it comes to coverage for mental health and psychological care, and the intersection between the clinical and business case for investing in mental health coverage. Moving forward, and given the dynamic nature of the sector, the CPA hopes to keep this report au courant with periodic updates.



End Notes

¹ KPMG, *Survey of Canadians*, 2021.

² Angus Reid Institute. *Two Years of COVID-19: Half of Canadians say their mental health has worsened; women under 55 hit hardest*. March 10, 2022.

³ Statistics Canada. *Self-rated mental health decreases after another year of the COVID-19 pandemic*. June 7, 2022.

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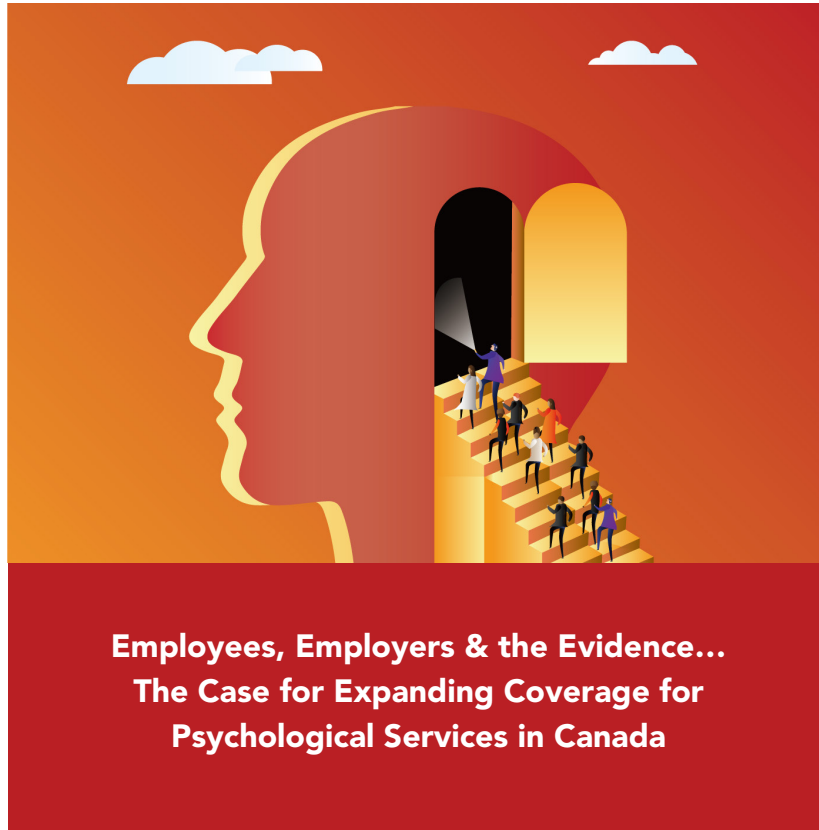
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