



“Urgent Healthcare Macro Trends That Will Surprise Directors”
Las Vegas, Nevada | September 11, 2025 at Deloitte

High-Level Summary Provided by Sponsor, Financial Profiles

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Healthcare is a board-level issue that directly affects workforce stability, cost structure, and enterprise value. Over the next three to five years, directors should anticipate disruptive shifts in costs, access, and care delivery that will impact budgets, talent, and performance. Boards should conduct scenario planning for healthcare costs, a concise dashboard of workforce health indicators, and an explicit plan to address access disparities across locations and roles. Directors should also ensure preparedness for cost spikes—such as specialty pharmacy and network changes—and confirm that HR, Finance, and Risk are aligned on ownership, metrics, and mitigation. The bottom line is that proactive governance matters: elevate healthcare on the agenda, track a few meaningful measures, refresh assumptions regularly, and be positioned to respond before pressures become crises.

Questions directors should be asking include:

1. How are we incorporating stress tests for potential health care shocks (e.g., specialty pharmacy spikes, network/provider changes, consolidation) into our 3 to 5 year scenario planning?

2. Can we get a concise workforce-health dashboard that includes utilization, absenteeism, chronic-condition trends, and outcomes to monitor leading indicators, not just premium increases?
3. How are we addressing access disparities across locations and roles, particularly in rural or low-income areas. What impact are solutions like telehealth and care coordination having?
4. How are HR, Finance, and Risk aligned on our healthcare strategy, and how is this strategy integrated into our enterprise risk management and long-range planning?
5. What governance measures are in place to evaluate vendors and plan design, and how transparent are we about pharmacy and network economics?
6. How are we scrutinizing virtual and primary-care models for cost, quality, and employee experience?
7. How are we linking our benefits to our talent strategy? How are we benchmarking competitiveness, tracking retention/engagement impacts, and incorporating employee feedback into plan adjustments?
8. How is healthcare oversight integrated into our ESG and stakeholder communications? Are we prepared to explain our strategy, metrics, and progress to investors, regulators, and employees?
9. What tabletop exercises have we run for healthcare disruptions (e.g., sudden cost escalations, provider exits, benefit backlash, or data/privacy incidents)? How effective are our internal controls and communications?
10. What is our regular board cadence for updates on health care, and how do we ensure that emerging surprises are surfaced early, and the board remains forward-looking?