

Equipsme and Fruitful Insights:  
**Calculating the return  
on investment for Equipsme  
health insurance plans**

Version 2.0 February 2026



# Evidencing ROI is now more important than ever



**Matthew Reed**  
Chief Executive Officer  
Equip sme

Last year, we set out to create the industry's first Return on Investment figure for health benefits. It's been the missing piece of the puzzle for HR and Rewards teams for some time, as they've come under increasing pressure from price and value-sensitive Boards and financial controllers to deliver a robust business case for their benefit investment – both old and new.

It's no longer enough to cite 'softer' impacts like employee engagement or retention and recruitment advantages. What businesses are increasingly looking for is value that can be calculated in hard-and-fast pounds-and-pence: If we put this much in, what do we get out the other side - and is it worth it? We wanted to respond to that need and help build that evidence - and found we were uniquely placed to do so.

We then teamed up with workplace wellness and data experts Fruitful Insights to crunch the other half of the numbers – the true picture of sickness absence impact, how it's affected by NHS and private waiting times, and what that means in terms of lost hours, continuity, and productivity.

This updated report refreshes the metrics and mathematics for 2026. Read on to find out how we've done it, and why it's helping the PMI industry prove it's worth.



**Mike Tyler**  
Co-founder and Chair  
Fruitful Insights

It seems only logical that a healthy workforce is necessary for a healthy business. And it is unlikely you'll now find many businesses that disagree with that in principle. Indeed, workplace health and wellbeing initiatives exploded after the pandemic. Not only are people more conscious of their health, and businesses more conscious of their vulnerability and continuity, but the resulting crisis in the NHS has also made both employees and employers more aware of its limitations.

People are increasingly looking to employers to provide health back-up, and employers are increasingly looking for new ways to support them. Even Government is now on board, recognising the role employers do and can play in Sir Charlie Mayfield's 'Keep Britain Working' report.

So with budgets stretched thinner than ever, it's little wonder they're looking to understand benefits in terms of actual numbers - and more specifically the return they can expect on any investment they make.

This paper attempts to provide new evidence and new thinking that can boost the case for health benefits. We want to move health benefits from a 'nice to have if we can afford it' to a 'can't afford NOT to have'. That's when we see minds, strategies, and investment really change.

## around 80% of employees with no cover

**4.8m people are covered by health insurance through work and 1.7m have individual cover, that's 6.5m people... BUT with 37.5m people of working age that's around 80% of employees without support to get treated quickly and back to work.**

ABI 2024 and Census figures 2023<sup>1</sup>

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# Introduction

Benefits budgets are tighter than ever, but against a backdrop of long NHS waiting times, sky-high sickness and burn-out, and huge employee demand, businesses have to ask themselves if doing nothing about employee health might end up costing more than doing something.

## The value of health

It's very difficult to add-up the value of health and wellbeing initiatives.

We know that people appreciate being looked after, and some studies estimate that businesses with a highly engaged workforce experience up to 78% less absenteeism and 14% higher productivity.<sup>2</sup> But it's very much an estimate, and actually costing out 'engagement' in terms of monetary value – let alone linking it to specific programmes - remains problematic.

One measure that is routinely recorded by businesses, respected by financial decision makers, and frequently linked directly to a cost - is sickness absence.

Although it doesn't take into account things like presenteeism, or include things like time out looking after sick dependents, it became our focus for this report as something that could be realistically counted-up and costed-out.

This, of course, is done on a macro level by government. According to ONS, an estimated 148.9 million working days were lost because of sickness or injury in 2024 - with an estimated economic cost of £85 billion<sup>3</sup>.

We wanted to take that sickness absence at an employer and employee level and compare the cost on a business to the cost of health investment/support – when it makes a material difference to absence duration and frequency.

## The value of intervention

Not all health and wellbeing initiatives will impact sickness absence.

In general, health investment in the UK has traditionally looked like PMI for leadership and a range of wider-workforce solutions, from EAP services to money-back schemes for dental or optical appointments, annual health-checks to wellbeing days.

While these all add value, they don't all necessarily help people get better and get back to work faster.

So as well as focussing on sickness absence, this report focuses on practical health-support that can impact the time someone takes off work, specifically

Equipsme's Level 3 and Level 2 plans, which incorporate both first-line intervention services (virtual GP and physiotherapy sessions), alongside secondary intervention services (private diagnosis - Level 3, and private diagnosis and treatment - Level 2).

Sometimes, of course, sick people get better at home, without any intervention. But as part of this report, Fruitful Insights estimated that, on average, a working-age employee visits the GP at least once a year - and 14% of these visits lead to referrals for further treatment.<sup>4</sup>

That gave us our starting point to build our case for intervention, and for speed.

## The cost of waiting

There is no one who doubts that the NHS is under pressure. The NHS waiting list currently stands at 7.29 million (as of December 2025), and hasn't been below 7 million since July 2022.<sup>5</sup> That is clearly having an impact on individuals – and on the places they work.

A key part of this report is the estimated comparison of diagnosis and treatment journeys through the NHS and through private channels, aiming to understand and articulate what difference health investment from employers can make to health outcomes for their employees.

## Building the case

The numbers in this report are by its nature based on conservative assumptions. These have been made from Fruitful Insights' careful investigation of NHS data, together with an understanding of the health and wellbeing industry - and their own in-house data and analysis.

From all of this, Fruitful Insights have ultimately been able to generate what we believe is the industry's very first Return on Investment figure, calculating a £2.87 return for every £1 invested – potentially more than double your money back.

This report shows how we approached the analysis, with the full methodology included in the appendix.

We hope this work extends the evidence-base for health benefits, and adds value to the HR and benefit experts seeking wider-workforce employee health.

# Executive summary

## £2.87 return for every £1 spent

Added up, we've calculated that a conservative return on investment for a company with average UK salaries is £2.87 or more for every £1 you spend, meaning you could get more than double your investment back. This is based on Equip sme Level 3 plan at £24 per employee per month as at December 2025 and prices valid from 1<sup>st</sup> April 2026.

### Key findings

#### The impact of absence on businesses

- **9.4 days a year**  
CIPD's 2024 Health and wellbeing at work report shows the highest sickness absence rate for over a decade <sup>4</sup>
- **2x salary cost**  
Given all the variables we calculate the real cost of a day's absence is probably more like 2x pure salary cost. <sup>6</sup>
- **17 days lost**  
An employee using the NHS for treatment loses 17 extra days of work a year.
- **£446 cost**  
We have estimated the average cost to an organisation of one day sick for an employee with an average salary of £39,039 is £446.

#### The Equip sme impact

- **Half the time**  
On average, we believe using Equip sme to get private treatment and get your team back on their feet cuts the waiting time by more than half.
- **3.4 days vs 6 days**  
Improved rate of reported absence per employee is 3.4 days with PMI vs 6 days without PMI. <sup>7</sup>
- **Employer of choice**  
An effective health benefits strategy supports recruitment, retention, employee wellbeing and productivity.
- **The return on investment (ROI)**  
This calculation excludes the impact of presenteeism and all other sickness absences (e.g. colds and flu/mental health) and time with family looking after them or attending medical appointments.

### How many people in the UK have health insurance?

According to the ABI, around 4.8 million people currently have health insurance through work, with another 1.7 million having individual cover. <sup>8</sup>

With an estimated 37.5 million people in the UK workforce, that means 80% of working people have no health back-up - in terms of the practical intervention when they're ill or injured that can help them back to work faster.

### How long are NHS waiting lists?

According to the government, The NHS waiting list is currently 7.29 million (as of December 2025), and hasn't been below 7 million since July 2022. <sup>9</sup>

### How big a problem is sickness absence?

The latest Office for National Statistics estimates 148.9 million working days were lost because of sickness or injury in 2024, an average of 4.4 days per worker, with minor illnesses, musculoskeletal issues and 'other' ailments making up the three top causes. <sup>10</sup>

# The cost of absence to business

Sickness absence is having a huge impact on businesses across the UK. According to the Keep Britain Working Review by former John Lewis boss Sir Charlie Mayfield, the number of sick and disabled people out of work is putting the UK at risk of an 'economic inactivity crisis' that threatens the country's prosperity.

There were 800,000 more people out of work now than in 2019 due to health conditions, costing

## £85 billion cost

In the UK, the total economic cost of sickness absence, lost productivity through worklessness, informal care giving, and health-related productivity losses, are estimated to be around £85bn annually.<sup>12</sup>

## 148.9 million days

According to ONS, an estimated 148.9 million working days were lost because of sickness or injury in 2024, this is an average 4.4 days lost per worker.<sup>13</sup>

## 78% less absence and 14% higher productivity

Highly engaged businesses experience 78% less absenteeism and 14% higher productivity.<sup>14</sup>

employers an estimated £85bn a year in terms of sickness absence, lost productivity through worklessness, informal care giving, and health-related productivity losses.

Further, the Review found employers lose on average £120 per day in profit from sickness absences, and face costs to replace staff which stretch into the tens of thousands each time. This causes disruption, lost capacity and unplanned costs.<sup>11</sup>

### Main reasons for sickness absence<sup>15</sup>

<b>30%</b>	<b>minor illnesses</b>
<b>15.5%</b>	<b>musculoskeletal</b>
<b>15.1%</b>	<b>other</b>
<b>9.8%</b>	<b>mental health conditions</b>
<b>7.3%</b>	<b>respiratory conditions</b>

## 9.4 days a year

CIPD's 2025 Health and wellbeing at work report shows the highest sickness absence rate for over a decade.<sup>16</sup>

# Analysis of NHS delays

## Waiting lists are still high

NHS waiting times have not reduced significantly over the past few years. According to the government, The NHS waiting list is currently 7.29 million (as at December 2025)<sup>17</sup> and hasn't been below 7 million since July 2022. There are still large differences in terms of geographical area, and disciplines.

These waiting lists create long time periods between initial evidence of a health issue and the resolution - and therefore increased amounts of absence from work and subsequent issues for businesses in managing productivity, engagement and morale.

When it comes to the second biggest cause of sickness absence, MSK issues, waiting lists are also proving problematic - especially for organisations with large numbers of employees working in manual or physical roles.

## NHS waiting times

**NHS waiting list is currently 7.29m (as at December 2025).<sup>17</sup> It hasn't been below 7m since July 2022.**

More than 370,000 people are now waiting for Musculoskeletal (MSK) treatment on the NHS<sup>18</sup>, a situation that's been created and compounded by rising demand and staff shortages in outpatient services.

Those waiting for treatment may be unable to work, or unable to perform all of their job role. That loss of skill and productivity can have a big impact across teams, and can leave organisations out of pocket paying for cover, overtime, or temporary recruitment.

Without early intervention, MSK issues can also worsen over time, and end up having an even more prolonged impact on someone's ability to work, sickness absence duration and overall productivity.

## Comparing health journeys

Using NHS data, Fruitful Insights were able to plot average waiting times against average waiting times in the private sector, through Equipisme's services. On average, we believe using Equipisme to get private treatment can get people back on their feet in half the time of the NHS.

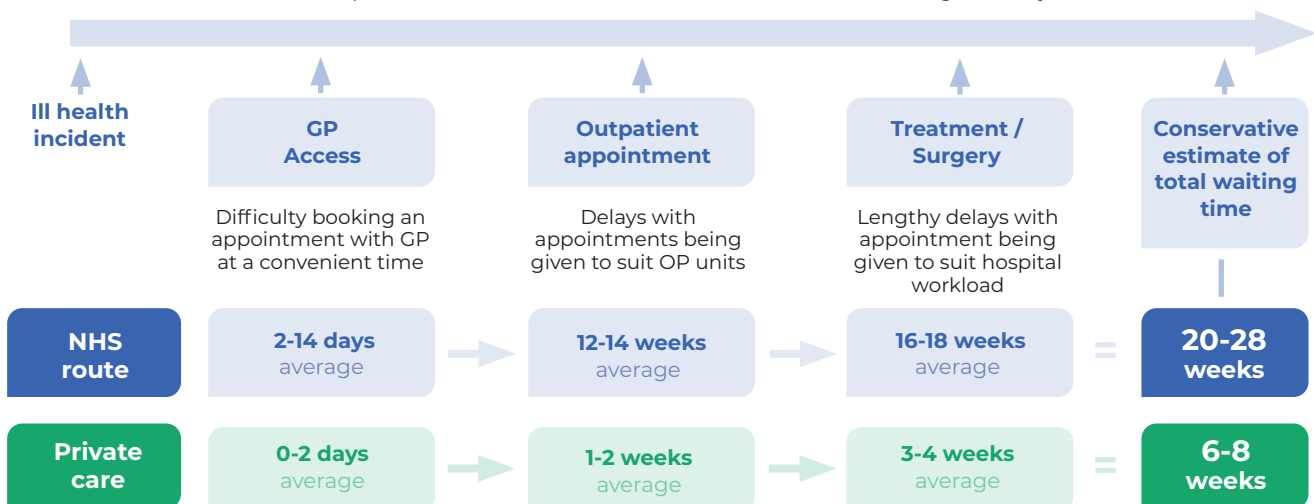
Please refer to source 19 in the appendix for a breakdown of assumptions used to calculate health journey times.

## Half the time

**On average, we believe using Equipisme to get private treatment and get your team back on their feet cuts the waiting time by more than half.**

## Comparison of NHS and Private journey to treatment

Sickness is a process where an individual moves from healthy to unwell and requires an intervention to move them back to being healthy.



# How does sickness absence impact businesses?

## The economic impact of absence on businesses

The impact of sickness absence can be calculated in its crudest terms by salary, and how much one day off costs as a percentage of a person's wage. But we believe that when considering the costs of someone's absence to an organisation it is critical to consider the wider implications for the business depending on their role.

In trying to understand the impact of sickness absence on an organisation, Fruitful Insights have also considered:

- a) **Team role:** Where one person is absent but a team performance is adversely impacted. In the extreme, other employees are unable to work. A train requiring a driver and a guard cannot be in service if only one of the two is available.
- b) **Penalties:** Lack of resources can result in the organisation failing to meet performance KPI's and hence incurring penalties (e.g. Bus companies incur fines if they fail to provide the quota of buses in line with the timetable).
- c) **Opportunity cost:** Shortage of labour at a critical time can result in lost sales (customer doesn't wait if queues are long) or produce has shelf life before perishing (harvesting food, getting food delivered on time to supermarkets).
- d) **Impact on co-workers:** Additional work on those employees when others are absent increases workload and stress burden.

## The direct labour costs

Very simply, for a worker earning £39,039 per year it will cost about £223 per day for each day of absence. This is based on an average of 227 working days per year, plus an uplift of 30% to allow for additional payroll costs of employers NI, benefits, and pension etc.

## Indirect costs can include a range of hidden additions

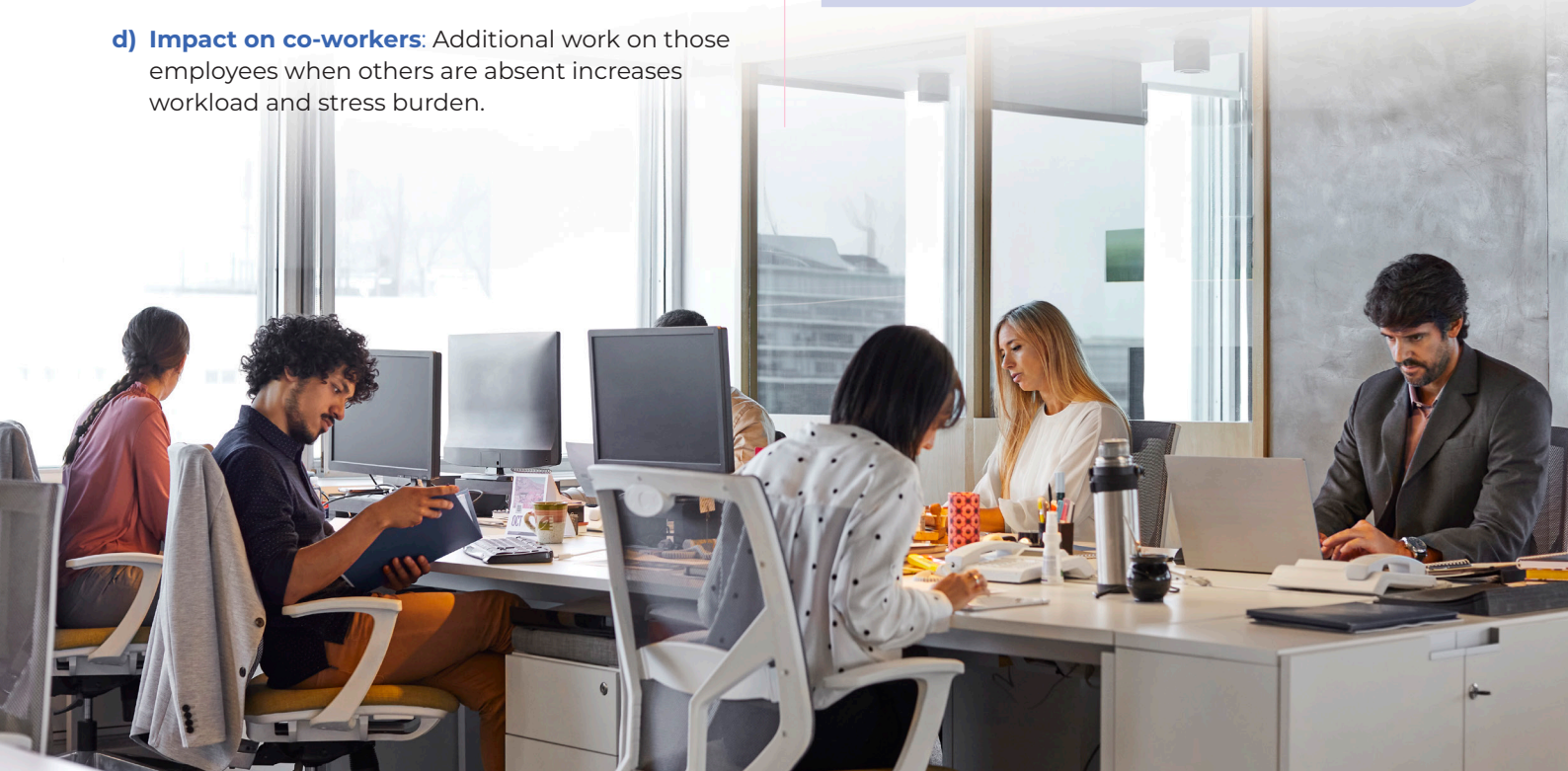
Operational business costs associated with running a business (e.g. HR, Finance) are funded based on assumptions related to the effectiveness of the workforce.

The cost of hiring temporary replacements or getting existing workers to work overtime can be 2x or 3x the payroll costs.

Without a clear benefits strategy, businesses can struggle with recruitment, retention, employee engagement, satisfaction and wellbeing and subsequently they may not be the employer of choice in their chosen sector and industry.

## £39,039 average salary

According to the ONS the average salary in the UK for a full-time employee in 2025 was around £39,039 per year.<sup>20</sup>



# How does sickness absence impact businesses?

(continued)

## Human capital or knowledge workers

For businesses employing people in specialist fields, like financial services, creative or service companies, which involve charging out employees based on time spent with clients, the lost production based on absence can result in a major impact on the business.

### £446 cost

Estimated cost of a sick day for an employee on a salary of £39,039:

**Average salary = £39,039**

**Daily cost = £223**

£39,039 x 1.3 (30% costs of NI and pension divided by 227 working days)

**True cost = £446**

(daily cost doubled to allow for replacement, overtime costs, loss of productivity)

Typically, for service and people-based organisations (like agencies and consultancy based companies) the billable time lost for a day of absence will be in excess of 3x basic salary in fees. Given all of these variables we calculate the real cost of a day's absence is probably more like 2x pure salary.

But people are always going to get ill and injured. How much of a difference can private health insurance make to sickness absence, in terms of how quickly employees can access support and get back to full working order?

## The cost of Equipsme health insurance

Equipsme is in a unique position in that its prices are transparent, which makes the mathematics of this paper more feasible.

Most group level health insurance might depend on cover levels, medical information, location and work or business type, but with Equipsme things are kept simple.

There are four levels of cover, one cost for everyone aged between 16-69, with a simple exclusion of pre-existing conditions in the three-year period before cover starts. Because of that, it's possible to give a definitive price for a year's worth of cover.

So, with Equipsme, a 24/7 GP service, nurse support line, 5 physio support sessions, home health checks and access to private diagnosis services costs £288 per person per year - that's £24 per person per month on level 3. With private hospital treatment included, it rises to £504 per person per year - that's £42 per person per month on level 2.

## Equipsme plans

**Prices - covering 95% of Equipsme's membership:**

**£108** GP plus

**£288** Private diagnosis

**£504** Private diagnosis and treatment



## Key data points and assumptions

Fruitful Insights have estimated that a working age employee attends one GP appointment per year on average.<sup>21</sup>

Faster, more convenient access to **a private GP is estimated to save 0.25 days for each employee:** 0.25 days is calculated based on the saving from travel to the GP and also the convenience of the timing of appointments.<sup>22</sup>

**14% of these GP appointments result in a referral** for further treatment: Around 3.9m people finished consulting episodes in a year for an active working age population of 28.4m (13.73%).<sup>23</sup>

Fruitful Insights have also deduced that on average **an employee waiting for treatment loses 1 day a week.** Whilst no data exists to analyse sickness absence attributed to waiting for treatment, it is estimated **the private sector reduces waiting times from 24 weeks to 7 weeks.** That works out to be **an extra 17 weeks waiting on the NHS.** Using a reasonable deduction of one sickness absence day per week, that would amount to **an additional 17 days lost.**

With faster access to GP services and treatment we estimate that a business could potentially **save 2.63 days per employee per year,** based on 0.25 days + 2.38 days (14% of 17 days) = 2.63 days.



These calculations exclude all other sickness absences (e.g. common colds and mental health) and don't allow for different recovery periods depending on the type of illness/injury and treatment. Also not included is the impact of a family member being ill, both the psychological impact and the need to take time off to attend appointments or look after sick children and family members.

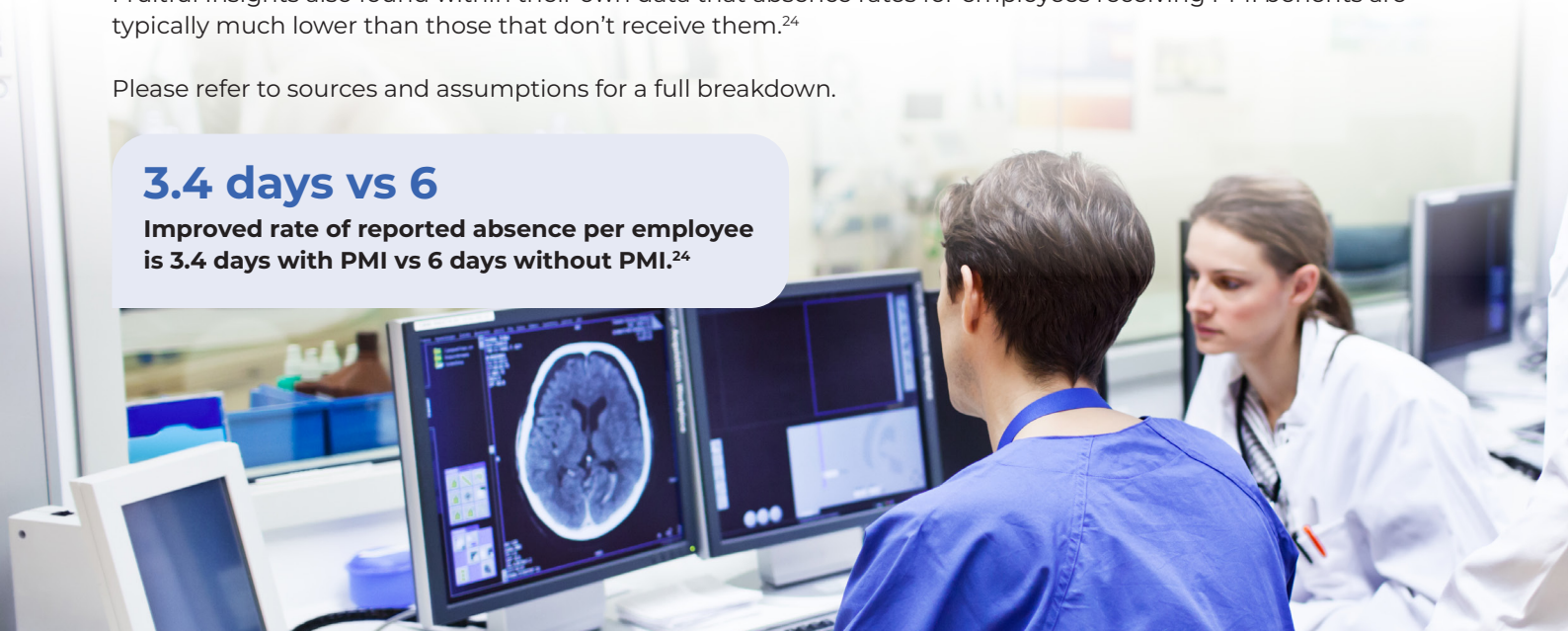
These calculations also do not take into account loss of productivity where an employee is still attending work but cannot work at full capacity because of the physical or psychological challenges of working while ill or injured.

Fruitful Insights also found within their own data that absence rates for employees receiving PMI benefits are typically much lower than those that don't receive them.<sup>24</sup>

Please refer to sources and assumptions for a full breakdown.

### 3.4 days vs 6

**Improved rate of reported absence per employee is 3.4 days with PMI vs 6 days without PMI.<sup>24</sup>**



# The Equip sme impact

## The methodology

This is how we're calculating the return on investment for Equip sme health plans.

- Take the average salary - in model 1 it's £39,039
- The average cost of absence - in model 1 it's £223
- We have then doubled it to £446 (true underlying costs of absence)

We think using Equip sme gets people back to work 2.5 days quicker than using the NHS.

- In model 1 - this is a saving of £1115 (£446 x 2.5)
- The cost of our level 3 Diagnosis plan is £288 per year.
- Investing £288 to save £1115 = £2.87 for every £1 spent.

**You can use the same methodology to work out the ROI for your business. All you need is the average salary and the Equip sme plan cost.**

### 1. Employee absence cost per day

The employee absence cost to an employer is more than simply the daily direct salary cost - it can be split into three areas:

- a) Direct salary cost – daily rate at £39,039
- b) Payroll costs of NI and pension - 30%
- c) Additional costs of temps and overtime – doubling of costs

We also assume there are 227 working days available for an employee:

52 weeks x 5 days  
reduced by 25 annual leave  
reduced by 8 public holidays  
= 227 working days

**£39,039 x 1.30 (1 day salary plus base costs of NI and pension) / 227 days = £223**

### 2. True cost of a lost day

And using the factor of '2 times the salary' as described which covers things like overtime, temp costs and loss of productivity, the true cost to the organisation of one lost day would be more like £446.

**We have estimated the average cost to an organisation of one sickness absence day for an employee with an average salary of £39,039 is £446.**

### 3. The benefit of reduced absence

If we assume that an employee with access to private medical care has reduced sickness absence of 2.5 days (rounded down from 2.63 days) this leads to a benefit to the organisation of:

**2.5 X £446 = £1,115 per employee per year**

### Model 1: Construction / manufacturing Equip sme Level 3 with diagnosis

Average salary: £39,039

Equip sme plan: £288 pa @ Level 3 (0.73% of salary)

Average cost of one sick day: £446

Cost saving of reduced absence: £1,115 (£446 x 2.5 days)

### ROI £2.87 for every £1

£1,115 reduction - £288 investment = £827 saving.  
£827 saving - divide this by initial £288 investment



### Model 2: Professional services firm Equip sme Level 2 with diagnosis & treatment

Average salary: £66,000

Equip sme plan: £504 pa @ Level 2 (0.76% of salary)

Average cost of one sick day: £755

Cost saving of reduced absence: £1,888 (£755 x 2.5 days)

### ROI £2.75 for every £1

£1,888 reduction - £504 investment = £1,384 saving  
£1,384 saving - divide this by initial £504 investment



# Equipsme in action - UKPN case study



## UK Power Networks introduce Equipsme health insurance plans to 5000+ workers



### Objective:

To launch Equipsme health insurance to the majority of UKPN employees not covered by the traditional PMI scheme, many of these being field-based staff. Many employees were new to health insurance and support was given to help them understand and access benefits.

### Roll out:

Equipsme worked in partnership with UKPN to rollout health insurance plans to 5,500 employees across the UK based in both office and field-based roles. The rollout plan included:

- Email campaigns
- Posters and flyers
- Face-to-face roadshows across the UK
- Lunch and learn webinars for employees
- Bespoke dual branded landing page
- Intranet pages

## UK Power Networks results

### Four months into the launch UKPN have seen:

- Sickness absence reduce by 0.5%.
- Turnover reduce slightly.
- Overall employee engagement score increase by 3%.
- Wellbeing score increase by 3%.
- Only 3% of employees opted out.
- Around 20% of employees have added their family paying directly.

### Press launch:

Equipsme and UKPN worked in tandem on a press campaign to raise awareness of the launch of Equipsme health insurance plans to the 5000+ employees across UKPN, cementing them as an employer of choice in the UK power sector. The press release was picked up by 7 key titles including Employee Benefits, Electrical Times, Insurance Edge, Wholesaler and Electrical Distributor and the estimated coverage reach was 196,000 impressions.

### UK Power Networks say...

"Everyone at UK Power Networks has access to a cash plan, an EAP, and even occupational health services. We've also got a traditional PMI plan, but as with most organisations it only covers those in the most senior roles. So there was this clear gap in terms of practical, physical diagnostic and treatment services for the wider population.

"The equitable thing for us to do was to modernise and equalise our health support - and that's where Equipsme has come in. Equipsme was the nearest fit to getting full-blown PMI for every single person in our organisation, without breaking the budget.

## In conclusion

### £2.87 return for every £1 spent

Added up, we've calculated that a conservative return on investment for a company with average UK salaries is £2.87 or more for every £1 you spend, meaning you could get more than double your investment back.\* This is based on Equip sme Level 3 plan at £24 per employee per month as at December 2025 and prices valid from 1<sup>st</sup> April 2026.

#### Key findings

##### The impact of absence on business

- **9.4 days a year**  
CIPD's 2024 Health and wellbeing at work report shows the highest sickness absence rate for over a decade.
- **2x salary cost**  
Given all the variables we calculate the real cost of a day's absence is probably more like 2x pure salary cost.
- **17 days lost**  
An employee using the NHS for treatment loses 17 extra days of work a year.
- **£446 cost**  
We have estimated the average cost to an organisation of one day sick for an employee with an average salary of £39,039 is £446.

##### The Equip sme impact

- **Half the time**  
On average, we believe using Equip sme to get private treatment and get your team back on their feet cuts the waiting time by more than half.
- **3.4 days vs 6 days**  
Improved rate of reported absence per employee is 3.4 days with PMI vs 6 days without PMI.
- **Employer of choice**  
An effective health benefits strategy supports recruitment, retention, employee wellbeing and productivity.
- **The return on investment (ROI)**  
This calculation excludes the impact of presenteeism and all other sickness absences (e.g. colds and flu/mental health) and time with family looking after them or attending medical appointments.

**equipsme**

Equip sme was launched in 2018 with a mission to make business health insurance work for more businesses and more employees - not just senior management. It takes up the middle ground between private medical insurance and cash plans, providing quality health insurance at prices designed to be cost effective.

Equip sme plans are powered by AXA Health with prices starting at just £9 per person per month.

To find out more about how Equip sme plans can help your business to help your team to stay well and work well please get in touch with **Gavin Shay** and his team at [hello@equipsme.com](mailto:hello@equipsme.com).

**FRUITFUL**  
Insights

Fruitful Insights Ltd was established in 2021 by insurance industry veteran, Mike Tyler, and digital health specialist, June Dawson, to provide comprehensive workplace wellbeing data and analytics focussed on productivity and ROI.

Employers can access detailed workforce productivity analysis and evaluation of the organisation's wellbeing status through their own custom dashboard.

To find out more about how Fruitful Insights can help your business understand more about their sickness absence rates and how to measure them accurately please get in touch with **Mike Tyler** or **June Dawson** at [info@fruitfulinsights.co.uk](mailto:info@fruitfulinsights.co.uk).

## Appendix 1 - Assumptions and sources

**These figures are assumptions and are extremely conservative as they don't take into account all the factors surrounding sickness absence of an employee, most of which have been discussed in the document.**

**In addition, this is taken as a snapshot in time using the current cost of Equipsume plans, current average salaries in the UK and current NHS waiting times all as at December 2025. Terms, conditions and exclusions apply to Equipsume health insurance plans.**

### Assumption

For the worked example, a focus on an individual and the improvement in their access to care and hence reduced absence time is open to criticism and difficult to aggregate and extrapolate to a working population.

Fruitful Insights propose an alternative approach that looks at the aggregate position using sensible assumptions based on NHS data. Unfortunately, while there is a huge amount of published data available from the NHS website, it is not usually in the form to undertake the sort of calculations we are trying to perform.

Fruitful Insights have investigated the NHS data to try to determine how the current challenges create long elapsed times between initial evidence of a health issue and resolution and by association increased amounts of absence from work. We have not sought to quantify the impact of presenteeism although this is significant and sits on top of these absence costs.

### Sources:

#### Page 2

- 4.8m people are covered by health insurance through work and 1.7m have individual cover, that's 6.5m people. BUT with 37.5m people of working age...  
ABI source: [UK workplace health insurance claims hit record high amid NHS backlog](#)  
Census figures: [Working age population - GOV.UK Ethnicity facts and figures](#)

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- 78% less absence and 14% higher productivity.  
Source: [www.gallup.com](http://www.gallup.com)
- According to ONS, an estimated 148.9 million days were lost because of sickness or injury in 2024, this is on average 4.4 days lost per worker.  
Source: [Sickness absence in the UK labour market - Office for National Statistics \(ons.gov.uk\)](#)
- Fruitful Insights reviewed the waiting times to attend an NHS GP appointment and number of appointments attended by the active working population.

The average number of appointments attended per patient is estimated at 2.6.

Source: [www.instituteforgovernment.org.uk](http://www.instituteforgovernment.org.uk)

63 % of the UK population are of working age which equates to 1.6 GP appointments per working age employee. Allowing for a higher proportion of over 60s needing GP appointments this figure has been rounded down to 1.

Source: [www.ethnicity-facts-figures.service.gov.uk](http://www.ethnicity-facts-figures.service.gov.uk)

- NHS waiting list is currently 7.29 million as at December 2025.  
Source: [NHS backlog data analysis](#)

#### Page 5

- CIPD's 2024 Health and wellbeing at work report shows the highest sickness absence rate for over a decade, with the average rate of employee absence now at 9.4 days per employee per year.  
Source: [Workplace absence levels soar to nearly two working weeks per employee each year | CIPD](#)
- Improved rate of reported absence per employee is 3.4 days with PMI vs 6 days without PMI.  
Source: This figure is based on Fruitful Insights review of their own population data split into those employees with PMI (as reported by their employer) and those without. Some of this difference would be explained because of different job roles, with higher paid/white collar workers being more likely to have the benefit than other groups.

## Appendix 2 - Assumptions, calculations and sources

8. 4.8m people are covered by health insurance through work and 1.7m have individual cover, that's 6.5m people. BUT with 37.5m people of working age...  
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9. NHS waiting list is currently 7.29 million as at December 2025.  
Source: [NHS backlog data analysis](#)
10. According to ONS, an estimated 148.9 million days were lost because of sickness or injury in 2024, this is on average 4.4 days lost per worker.  
Source: [Sickness absence in the UK labour market - Office for National Statistics](#)

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11. Keep Britain working review  
Source: [Keep Britain Working: Final report - GOV.UK](#)
12. In the UK, the total economic cost of sickness absence, lost productivity through worklessness, informal care giving, and health-related productivity losses, are estimated to be around £85bn annually.  
Source: [Keep Britain Working: Technical Note - GOV.UK](#)
13. According to ONS, an estimated 148.9 million days were lost because of sickness or injury in 2024, this is on average 4.4 days lost per worker.  
Source: [Sickness absence in the UK labour market - Office for National Statistics](#)
14. 78% less absence and 14% higher productivity.  
Source: [www.gallup.com](#)
15. Main reasons for sickness absence.  
Source: [www.ons.gov.uk](#)
16. CIPD's 2024 Health and wellbeing at work report shows the highest sickness absence rate for over a decade, with the average rate of employee absence now at 9.4 days per employee per year.  
Source: [Workplace absence levels soar to nearly two working weeks per employee each year | CIPD](#)

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17. NHS waiting list is currently 7.29 million as at December 2025.  
Source: [NHS backlog data analysis](#)
18. More than 370,000 people were waiting for Musculoskeletal (MSK) treatment on the NHS as at June 2025.  
Source: [NHS waiting lists rise demonstrates need for graduate physio job guarantee | The Chartered Society of Physiotherapy](#)
19. Comparison of NHS and Private journey to treatment:

#### GP Access through Equipsmo

Typical time to get a non-urgent appointment is 2 days and most members receive a response within hours and on average an appointment within half a day. With a private GP service you can access them 24/7 and choose a convenient appointment time round you, minimising business disruption.

#### GP access through the NHS

- Average time to get a non-urgent appointment is 2-14 days.
- Just over a third (35.1%) had their last appointment on the same or next day after first contacting their GP practice, including 27.5% on the same day and 7.6% the next day. 21.8% had the appointment a few days later, and slightly fewer 20.6% said it was between a week and two weeks later. One in eight (12.6%) said their appointment was more than two weeks after first contacting their GP practice. These results are all very similar to the 2024 survey.  
Source: [Taken from Slide 40 of the 2025 GP Patient Survey, National Report. GP Patient Survey.](#)

#### Diagnosis and treatment through Equipsmo

- Equipsmo – Average time to get an out-patient appointment for general surgery = 4 weeks.
- AXA Health has an SLA of 4 weeks/ 20 miles (5 miles central London) to book a specialist consultation appointment to assess what treatment (if any is required) and Equipsmo believe that 90% of patients will see a private consultant within 10-14 days.

## Appendix 3 - Assumptions, calculations and sources

- Equipsmo – Average time for appointment for general surgery = 3-4 weeks. Based on example waiting times of treatment for general surgery at Spire hospitals across the UK.

Example private waiting times at Spire Hospital:

- Private procedure waiting times | Harpenden Hospital | Spire Healthcare = 3-4 weeks
- Procedure waiting times | Alexandra Hospital | Spire Healthcare = 3-4 weeks
- Equipsmo don't think it's unreasonable to say that you'll most likely see a private specialist consultant and then have any necessary treatment (if needed) in between 2 and 8 weeks.

Please note Equipsmo members are eligible to have treatment at the following Spire hospitals across the UK:

- Spire Alexandra Hospital
- Spire Cardiff Hospital
- Spire Dunedin Hospital
- Spire Gatwick Park Hospital
- Spire Liverpool Hospital
- Spire Murrayfield Hospital Edinburgh
- Spire Norwich Hospital
- Spire Shawfair Park Hospital

Spire hospitals are not the only hospital group in the available network.

### Diagnosis and treatment through the NHS

- NHS – Average time to get an out-patient appointment for general surgery = 14 weeks.
- NHS – Average time for appointment for general surgery = 18 weeks.
- The maximum waiting time target for non-urgent, consultant-led treatments is 18 weeks from the day your appointment is booked.
- As at December 2025 the waiting list stood at 7.29 million cases.

The wait times for a random selection of one hospital from 7 regions across the UK for general surgery (as at December 2025):

General Surgery – East Sussex Healthcare NHS Trust – My Planned Care NHS

- South East – East Sussex healthcare NHS trust: Outpatient appointment = 20 weeks
- South East – East Sussex healthcare NHS trust: Treatment appointment = 19 weeks

General Surgery – Bedfordshire Hospitals NHS Foundation Trust – My Planned Care NHS

- East – Bedfordshire hospital NHS foundation Trust: Outpatient appointment = 18 weeks
- East – Bedfordshire hospital NHS foundation Trust: Treatment appointment = 16 weeks

General Surgery – Chelsea and Westminster Hospital NHS Foundation Trust – My Planned Care NHS

- London – Chelsea and Westminster: Outpatient appointment = 15 weeks
- London – Chelsea and Westminster: Treatment appointment = 20 weeks

General Surgery – Chesterfield Royal Hospital NHS Foundation Trust – My Planned Care NHS

- Midlands – Chesterfield Royal NHS foundation trust: Outpatient appointment = 7 weeks
- Midlands – Chesterfield Royal NHS foundation trust: Treatment appointment = 25 weeks

General Surgery – Airedale NHS Foundation Trust – My Planned Care NHS

- North East and Yorkshire – Airedale NHS foundation trust: Outpatient appointment = 11 weeks
- North East and Yorkshire – Airedale NHS foundation trust: Treatment appointment = 15 weeks

General Surgery – Liverpool Hospital – Spire – My Planned Care NHS

- North West – Liverpool Spire hospital: Outpatient appointment = 10 weeks
- North West – Liverpool Spire hospital: Treatment appointment = 13 weeks

General Surgery – Royal United Hospitals Bath NHS Foundation Trust – My Planned Care NHS

- South West – Royal United Hospital Bath NHS foundation trust = Outpatient appointment = 17 weeks
- South West – Royal United Hospital Bath NHS foundation trust = Treatment appointment = 18 weeks

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20. Very simply, for a worker earning £39,039 per year, based on the average UK salary according to ONS.

Source: [Employee earnings in the UK - Employee earnings in the UK - Office for National Statistics](#)

## Appendix 3 - Assumptions, calculations and sources

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21. A working age employee attends 1 GP appointment  
Fruitful Insights reviewed the waiting times to attend an NHS GP appointment and number of appointments attended by the active working population.

The average number of appointments attended per patient is estimated at 2.6.

Source: <https://www.instituteforgovernment.org.uk/publication/performance-tracker-local/general-practice-england/appointments-satisfaction>

63 % of the UK population are of working age which equates to 1.6 GP appointments per working age employee. This figure has been rounded down to 1 assuming a higher proportion of over 64s attend GP appointments.

Source: <https://www.ethnicity-facts-figures.service.gov.uk/uk-population-by-ethnicity/demographics/working-age-population/latest/>

22. 0.25 days is the estimated time saved by using a virtual GP, as it removes travel time and allows appointments outside working hours (evenings, nights, or weekends).

GP Access through Equipsme

Typical time to get a non-urgent appointment is 2 days and most members receive a response within hours and on average an appointment within half a day. With a private GP service you can access them 24/7 and choose a convenient appointment time round you, minimising business disruption.

GP access through the NHS

Average time to get a non-urgent appointment is 2-14 days. Just over a third (35.1%) had their last appointment on the same or next day after first contacting their GP practice, including 27.5% on the same day and 7.6% the next day. 21.8% had the appointment a few days later, and slightly fewer 20.6% said it was between a week and two weeks later. One in eight (12.6%) said their appointment was more than two weeks after first contacting their GP practice. These results are all very similar to the 2024 survey. On average (55%) of patients waited at least a few days to attend a GP appointment

Source: Slide 40 - <https://www.gp-patient.co.uk/latest-survey/results>

23. 14% of appointments of GP appointments result in referrals.

Total GP Appointments: 383.3m - NHS England, Primary Care Activity:

Source: <https://www.england.nhs.uk/2025/07/millions-more-gp-appointments-delivered-in-record-year/>

Medical Consultations: 154 million (Estimated as 40.2% of total appointments, focusing on assessments by fully qualified GPs This specific rate isolates clinical decision-making from high-volume non-clinical activity (vaccinations, admin, etc.).

Source: <https://digital.nhs.uk/data-and-information/publications/statistical/appointments-in-general-practice/october-2025>

Total Consultant Referrals: 22.9m total referrals (based on based on 1,915,955 in October 2025 and extrapolated out for a 12 month period)

Source: <https://digital.nhs.uk/data-and-information/publications/statistical/community-services-statistics-for-children-young-people-and-adults/october-2025#data-sets>

Clinical Referral Rate: 14.9%

Calculation: (22.9m Referrals/154m GP-led Consultations) x 100.

Based on our own service statistics 1 in 4 GP calls to the Health Hero GP service result in an open referral letter for a private consultation. Internal 2025 data provided by Health Hero.

14.9% is a best guess estimate and we have therefore rounded down to 14%.

24. Absence rates for employees receiving PMI benefits are typically much lower than those that don't receive them Source: Fruitful Insight's client database 2023/24 - comparing employer reported absence for employees that have/ do not have access to PMI benefits. Data has not been adjusted to control for job role/seniority.

25. Improved rate of reported absence per employee is 3.4 days with PMI vs 6 days without PMI.  
Source: This figure is based on Fruitful Insights review of their own population data split into those employees with PMI (as reported by their employer) and those without. Some of this difference would be explained because of different job roles, with higher paid/white collar workers being more likely to have the benefit than other groups.



#### **Company information**

Equipsme Insurance Services Ltd is a limited company registered in England & Wales with registered number 10674676.

#### **Our registered office**

Equipsme Insurance Services Ltd, Third Floor,  
1 New Fetter Lane, London, England, EC4A 1AN.

#### **Regulatory information**

Equipsme Insurance Services Ltd is authorised and regulated by the Financial Conduct Authority, FCA registered number 786472.