ON THE PULSE REPORT

Insights & Trends That Are Shaping Employee Benefits

2026

CONTENTS

INTRODUCTION

Rising healthcare costs, new pay transparency laws, and growing expectations around wellness and flexibility are reshaping the benefits landscape. To see what's ahead, we asked our national practice leaders across **IMA Partnerly™** to share what they're seeing in the market and what it means for employers in 2026.

They are the experts advising hundreds of organizations every day, solving challenges from underperforming wellness programs to increasing pharmacy spend and complex compliance requirements. Their insights are grounded in real conversations, real data, and real results.

The 2026 On the Pulse Report is your preview on the trends that will shape your benefits decisions in the year ahead.

Each chapter highlights what our practice leaders are telling clients right now: where the biggest opportunities lie, which issues demand attention, and what strategies are delivering results in today's landscape.

Think of it as your early signal for 2026, straight from the front lines of benefits consulting.

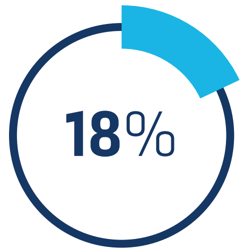
MAKING SMART MOVES WITH SMARTER DATA

By: Jordan Paulus, EB Data & Insights

Rising healthcare costs are forcing mid-sized employers to rethink their approach to benefits funding. With double-digit renewal increases becoming the norm, many are finding that access to clear data is the fastest path to controlling costs and improving decision-making.

Recent medical claims trend averaged 10%

Recent pharmacy claims trend averaged 18%



> "Mid-sized employers can often achieve meaningful savings without simply shifting cost to employees. Access to clear, actionable data is the first step toward making more informed and cost-effective decisions."
>
> JORDAN PAULUS
> EB Data & Insights

THE TREND: MID-MARKET MOVEMENT TOWARD FINANCIAL CONTROL

Traditional, once-a-year renewals are losing ground against persistent medical and pharmacy inflation. Employers are exploring level-funded and self-funded models earlier, often as part of a multi-year strategy built on data-driven plan management.

The Shift in Numbers: Employers with fewer than 250 employees moving to self-funding or alternative funding arrangements (self-funding arrangements that utilize level-funding, captives, or consortiums) has more than doubled, climbing from roughly 10% to over 25%. This shift isn't about abandoning traditional insurance; it's about gaining control by using data to guide funding decisions.

Who's Leading the Change: Organizations with 100–500 employees, especially those in healthcare, manufacturing, and education, are leading this evolution. As finance teams seek greater predictability, HR leaders are using claims data to secure smarter renewals and guide data-driven benefits strategies.

Data as the Game Changer: Employers who apply data strategically are achieving 5%–15% lower renewals by using actionable insights to cut avoidable costs and improve plan performance, powered by strategies unlocked through self-funded and alternative funding models.

Beyond Traditional Options: The future points to hybrid funding models that combine the stability of traditional insurance with the transparency and control of self-funded arrangements. Employers are increasingly adopting stop-loss protections, captives, and consortiums to manage volatility.

What's Coming Next: As data-informed funding continues to grow, organizations that apply analytics strategically will be best positioned to anticipate renewals, validate carrier assumptions, and act before costs rise.

Key Takeaways: Innovative benefits management begins with understanding your data. Employers who prioritize claims visibility and analysis can uncover meaningful savings within their existing structures.

IMA DATA & INSIGHTS SOLUTIONS

IMA helps employers make smarter benefits decisions by:

+ **Seeing trends clearly.** Exposing cost drivers, even in limited-data plans.
+ **Modeling with confidence.** Using dashboards and benchmarks to assess funding readiness.
+ **Navigating change.** Partnering with our industry experts to support smooth transitions.
+ **Activating savings levers.** Targeting high-cost claimants and preventative care gaps.
+ **Measuring results.** Tracking changes over time to guide future strategies.

GLP-1 DRUGS ARE RESHAPING PHARMACY SPEND

By: Matt Collier, Pharmacy Consulting

GLP-1 prescriptions for weight managements made up about 10.5% of employers' annual claims spend in 2025[2].

"The discussion about covering GLP-1 medications involves several key factors. The primary considerations include their significant costs, the challenge of tracking ROI, and ensuring safety and efficacy. It is also essential to manage the whole member, not just a single condition. Additional resources such as wellness programs, clinical management, and nurse support can promote the successful use of these medications and encourage lasting behavioral changes. This comprehensive approach can help members discontinue the drug when appropriate and sustain weight loss, countering studies that suggest weight regain after stopping the medication."

MATT COLLIER
Pharmacy Consulting

GLP-1 medications continue to reshape employer pharmacy budgets as prescription rates soar and coverage decisions become increasingly complex. With overall GLP-1 spend rising 363.7% since 2019[1], businesses nationwide face critical choices about coverage that balances cost management with employee health outcomes.

THE TREND: EXPLOSIVE GROWTH IN GLP-1 UTILIZATION

The surge in GLP-1 prescriptions represents one of the most significant shifts in pharmacy benefit management in recent years. These medications have gained widespread adoption for weight loss and obesity treatment, fundamentally altering prescription patterns and healthcare costs.

The Numbers Tell the Story:

- **Overall GLP-1 Prescriptions:** Increased from 0.9% in 2019 to 4.0% in 2024, representing a 363.7% relative increase[1]
- **Saxenda, Wegovy, Zepbound:** Prescription rates jumped from 0.03% in 2019 to 0.68% in 2024, marking a staggering 2,029.1% increase[1]

Universal Challenge: This trend affects employers nationwide across all industries, as rising costs impact health plans regardless of sector or geographic location. The decision to cover GLP-1 drugs has become a discussion point for everyone, particularly as prescriptions increasingly occur for weight management rather than diabetes diagnosis.

What to consider? Employers face hard decisions about coverage parameters, including:

- Defining medical necessity criteria
- Establishing prior authorization requirements
- Determining step therapy protocols
- Setting coverage limits or duration

What's Coming Next: GLP-1 therapies, often exceeding $12,000 per member annually, continue to put significant pressure on employer renewals. With the next generation of oral GLP-1s poised to broaden adoption beyond injections, employers face tougher decisions on coverage strategy. To manage rising costs, many are exploring value-based contracting models that tie payments to measurable outcomes such as sustained weight loss or reduced comorbidities. At the same time, integrating GLP-1 coverage with wellness resources, like nutrition, lifestyle coaching, and behavioral support, will be critical to achieve lasting results and maintain financial sustainability.

Key Takeaways: The GLP-1 phenomenon necessitates an aggressive pharmacy benefit strategy rather than a reactive cost management approach. Businesses who implement thoughtful coverage frameworks will better control costs while supporting their employees' health outcomes.

IMA PHARMACY CONSULTING SOLUTIONS

While pharmacy costs are increasing in GLP-1 and obesity/diabetes areas, opportunities exist to mitigate costs through targeted program management. IMA helps you ensure GLP-1 programs are both practical and efficient while managing overall spending across all high-cost drugs and conditions.

The approach encompasses program optimization, cost containment, and a thorough review of pharmacy benefit structures to strike a balance between access and financial sustainability.

THE CHANGING FOOTPRINT OF PAID FAMILY AND MEDICAL LEAVE

By: Craig Truitt, Absence Consulting

> "The expansion of state PFML laws is reshaping how employers manage leave. Ensuring compliance requires more than policy updates. It demands a holistic approach that aligns legal requirements with HR operations. By integrating paid leave with existing programs and workflows, employers can reduce administrative burden and empower HR teams."
>
> **CRAIG TRUITT**
> Absence Consulting

Managing leave compliance is becoming increasingly difficult as more states roll out Paid Family and Medical Leave (PFML) programs. With four new programs launching between 2025 and 2028, multi-state employers face challenges in preparing for contribution requirements, benefit structures, and implementation timelines.

THE TREND: STATE PFML EXPANSION ACCELERATES

The momentum behind state-mandated paid leave programs continues to build. Nearly a third of U.S. states now have active or pending PFML legislation, creating a patchwork of compliance requirements that particularly impact employers with distributed workforces across multiple states[3].

Current Implementation Timeline: The next wave of state programs presents a compressed timeline for preparation:

+ **Minnesota:** Contributions begin January 1, 2026, with benefits available on the same date
+ **Maryland:** After multiple delays, the program has been extended with benefits now available no later than January 1, 2028
+ **Maine and Delaware:** Benefits begin in 2026, with contributions starting on January 1, 2026 for Delaware and May 1, 2026 for Maine

2x

The number of states with enacted PFML laws has more than doubled since 2018[4].

Who's Most Affected? This expansion particularly challenges:

+ Multi-state employers with operations in the Northeast and Midwest
+ Industries with high-volume workforces like retail, hospitality, and healthcare
+ Organizations with remote teams distributed across the country

The Compliance Challenge: Each state program brings unique requirements for contribution rates, benefit calculations, and coordination with existing policies. Minnesota's program, for example, requires employers to split the 0.88% contribution rate equally with employees, while Maryland's structure differs significantly[5]. These variations create administrative complexity that can lead to compliance risks, payroll complications, and confusion.

What's Coming Next: Experts predict that even more states will introduce PFML programs in the next 2–3 years as momentum continues. Employers who build scalable leave strategies quickly will be better positioned to manage future changes without disruption. Integration with disability, PTO, and company leave policies will become a top-tier HR priority.

Key Takeaways: The rapid expansion of state PFML programs requires immediate attention from HR and finance leaders. Success depends on early preparation, comprehensive policy integration, and ongoing compliance monitoring. Organizations that take action now will avoid last-minute scrambling and ensure smooth transitions for both administrative teams and employees.

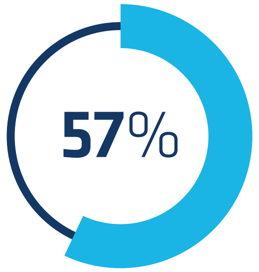
IMA ABSENCE CONSULTING SOLUTIONS

To guide employers through these challenges, IMA provides guidance regarding:

+ Auditing current leave policies to identify gaps and conflicts with new PFML laws
+ Creating state-by-state leave road maps
+ Coordinating benefits across short-term disability, PTO, and state programs
+ Educating HR teams and employees on upcoming program requirements
+ Providing compliance alerts, policy templates, and legal insights

BENEFIT ADMINISTRATION IS MOVING *BEYOND* HR TECH

By: Kenny Borton, HR Technology



HR teams spend up to 57% of their time on administrative tasks that should be automated[8]

HR teams are discovering that the benefits modules included in their full suite (hire to retire systems) weren't built for today's complex benefit administration landscape. While 60% of employers say technology is crucial to their business, only 14% are satisfied with their current system, creating a gap that's costing time, money, and employee satisfaction[6].

> "Over the past several years, we've helped hundreds of clients incorporate Ignite, IMA's benefits administration platform, into their platform cluster model. Ignite has become one of our foundational tools because it solves real benefit problems HR teams face every day, and comes with expert support that knows and understands your benefits."
>
> KENNY BORTON
> HR Technology

THE TREND: RETHINKING BENEFITS IN THE HR TECH ECOSYSTEM

Most full suite HR Tech vendors treat benefits administration like a side project. They excel at payroll but stumble when open enrollment arrives.

Where Things Fall Apart: The cracks show up everywhere. Voluntary life plans quickly become a nightmare to administer. ACA reporting requires hours of manual cleanup. Employee enrollment errors multiply because the interface feels like it was built by someone who has never actually enrolled in benefits. Not surprisingly, only 32% of employees, use their HR Tech systems, suggesting these tools aren't connecting with their intended users[7].

The Real Cost of "Good Enough": When benefits modules underperform, someone pays the price. HR teams work late fixing enrollment mistakes. Compliance officers lose sleep over reporting deadlines. Employees become frustrated and make poor benefits choices because the system fails to help them understand their options.

Modern Problems, Legacy Solutions: Today's benefit designs and requirements weren't on anyone's radar when most HR Tech benefits systems were created. State-specific mandates pile up faster than system updates can handle them. Multi-location companies struggle with eligibility rules that change by zip code. Evolving plan rules create new challenges that rigid systems can't accommodate.

The Ecosystem Approach: Smart employers are moving away from monolithic HRIS toward integrated platform clusters[9]. Instead of forcing benefits administration into a payroll-centric box, they're choosing specialized tools that connect with their core systems. This shift acknowledges that most HRIS have fundamental usability issues that go beyond simple training problems.

What's Coming Next: Within the next 3–5 years, most mid-market employers are expected to adopt a "Platform Cluster" model, where best-in-class platforms connect via APIs, enabling real-time data flow and purpose-built functionality. The era of accepting mediocre benefits administration because it comes bundled with payroll is coming to an end.

Key Takeaways: The gap between what employers need and what HR Tech benefits modules deliver is widening. As compliance grows more complex and employee expectations rise, the hidden cost of clunky systems outweighs the convenience of having everything in one place.

IMA HR TECH SOLUTIONS

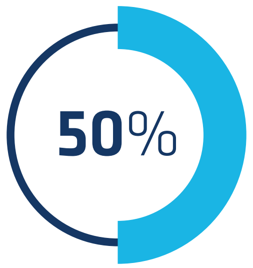
IMA helps clients transition from limited HR Tech benefits modules to flexible, purpose-built platforms, like Ignite, our benefits administration solution.

With Ignite, our team manages the entire system build, including plan configuration, payroll mapping, carrier connections, and eligibility logic customized to each organization. Integrated file feeds between Ignite and payroll eliminate duplicate entry, while ensuring accurate deductions.

During open enrollment, IMA takes ownership of the build and testing, removing the configuration burden entirely from HR teams.

THE FUTURE OF WELL-BEING *ISN'T* MORE VENDORS

By: Adam Moret, Whole Health



50% of workers told MetLife that a better grasp of their total rewards would make them more loyal to their employer[10]

> "I have many conversations with clients that don't realize the resources they currently have. Many EAPs will provide a few no-cost webinars each year for their clients and rarely are they getting used. I encourage my clients to use these resources to educate employees to a targeted audience. I steer clients away from broad concepts like 'stress management' and instead encourage more specific topics, such as 'communicating with your teenage daughter.' The audience might be smaller, but those who attend will be far more engaged."
>
> ADAM MORET
> Whole Health

Economic uncertainty has forced organizations to tighten their belts, but that shouldn't mean sidelining employee wellness. As HR and finance leaders navigate budget constraints, the key lies in maximizing the untapped potential of existing resources. Savvy organizations are communicating using multiple channels to boost employee engagement and loyalty while enhancing established benefits packages, demonstrating substantial wellness outcomes.

THE TREND: OPTIMIZE FOR EDUCATION

What's Happening? Recent research revealed that nearly half of workers want a better understanding of their company's total rewards. This highlights a major opportunity to improve through education rather than added costs[10].

Why It Matters: Employers that invest in benefits education report significant returns: 76% of employees who understand their benefits feel happier at work, and 82% said their benefits provided greater stability. Yet, Employee Assistance Programs often see only 2%–3% utilization, leaving significant value unrealized[10].

Smart Spending That Works: You don't need a massive budget to see real results. Companies are achieving significant engagement improvements by spending a fraction of what they'd pay for new wellness vendors. Home mailers, customized webinars, and participation incentives deliver measurable results without the headache of implementing entirely new programs. Using wellness funds to invest in strategic communications can sometimes be better than adding a new program.

What's Coming Next: Carriers are partnering with proven vendors like *Livongo*, *Omada*, *TalkSpace*, *Maven*, and *Virta*, giving employees access to robust programs without requiring employers to shop around. Companies that nail the communication piece will get maximum value from investments they're already making.

Key Takeaways: Often times, innovative wellness strategies today aren't about buying more 'stuff', they're about using what you already have. Companies that invest in employee education and clear communication see better engagement, higher loyalty, and controlled healthcare costs without adding a single new vendor. The real opportunity isn't in what's missing from your wellness program; it's in helping employees discover what's already there.

IMA WHOLE HEALTH SOLUTIONS

Most organizations already have great wellness resources hiding in plain sight. IMA focuses on squeezing every ounce of value from what clients already pay for before ever adding new vendors. Our team collaborates with marketing and communication specialists to design engagement strategies that bring wellness to life.

From microsites and video campaigns to personalized emails, benefits scavenger hunts, and educational podcasts, we help employee discover (and actually use) the resources already available to them.

SMARTER BENEFITS COMMUNICATION THROUGH AI

By: Jared Cox, Employee Experience

Traditional benefits communication often leads to confusion and low engagement. Now, with artificial intelligence (AI) reshaping the workplace, organizations are discovering the power of personalized benefits experiences. These experiences boost understanding for employees and also lighten the administrative load for HR teams.

> "AI gives us the ability to turn benefits communication into something personal and proactive. Instead of overwhelming employees with generic materials, we can deliver the right information at the right time, and that changes the entire experience for both employees and HR teams."
>
> JARED COX
> Employee Experience

THE TREND: AI-DRIVEN BENEFITS COMMUNICATION

Today's workforce expects seamless, personalized digital experiences, yet many organizations still rely on outdated methods to communicate benefits information. This gap is especially challenging for dispersed workforces and multi-generational teams, where communication preferences vary widely.

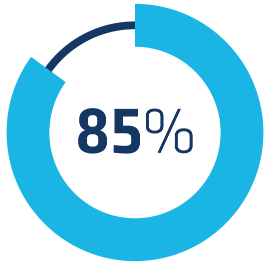
What's Happening? Organizations are implementing AI to transform how they speak. Rather than relying on static materials and reactive support, AI enables personalized, on-demand guidance that adapts to the needs and preferences of each person.

Why It Matters: Nearly half of employees admit they don't fully understand their benefits[10], while three out of four HR leaders report their teams are overwhelmed with employee questions during open enrollment[11].

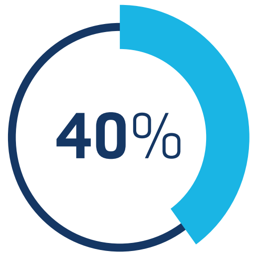
4x

Personalized communications are four times more likely to be read and acted upon compared to generic messaging[12]

85% of employees indicate they would be more likely to engage with benefits content if it were tailored to their personal needs[12]



AI implementation can reduce HR workload by 30%–40% through the automation of repetitive inquiries[13]



IMA EMPLOYEE EXPERIENCE SOLUTIONS

By leveraging industry expertise and partnerships with leading vendors offering AI-powered platforms, IMA delivers tailored, tech-enabled communications that drive engagement and improve benefits understanding.

What's Coming Next: Hyper-personalization will become standard practice, with chatbots and digital assistants replacing static FAQ materials. Predictive analytics will allow employers to reach employees before issues arise, creating opportunities for proactive support and solutions. At the same time, advanced measurement tools will enable organizations to track the actual return on investment of their benefits communication efforts.

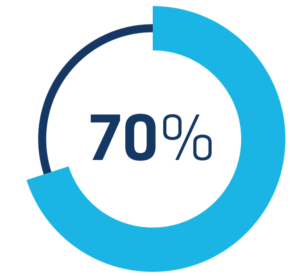
Key Takeaways: By embracing AI-powered personalized communication, employers can close the understanding gap that has long limited benefits programs and ease the administrative burden on HR teams.

TALENT EXPECTATIONS

SET TO TEST

BUDGET BOUNDARIES

By: Larry Comp, Compensation Consulting



70% of workers say compensation drives job satisfaction and retention more than anything else[14]

HR leaders are facing a growing compensation crunch. Employees expect meaningful raises while budgets remain tight and market data feels squishy. With salary increase budgets cooling to 3.8% in 2024 to 3.6% in 2025 and projected to decline again in 2026, and pay transparency laws accelerating, the days of "winging it" on pay decisions are over[13].

> "Compensation is a company's largest investment; we all have to ask ourselves a fundamental question: are we managing it… or not?"
>
> LARRY COMP
> Compensation Consulting

THE TREND:
THE GREAT COMPENSATION SQUEEZE

Here's the Reality: Employees know their worth, budgets haven't kept pace, and new transparency laws require clear justification for pay decisions. It's a perfect storm that's leaving HR teams feeling stuck between what they want to do and what they can afford.

The Numbers Don't Lie: After averaging 3.6% in 2025, projected salary increases for 2026 have dropped to 3.5% overall and 3.3% for merit increases[14]. Meanwhile, over 70% of workers say compensation drives job satisfaction and retention more than anything else[15]. That math doesn't add up to a happy situation.

Who's Feeling the Pinch Most? The squeeze hits hardest for mid-sized employers without in-house compensation expertise. Organizations in competitive talent markets are getting outbid, while those undergoing mergers, acquisitions, or rapid growth are struggling to maintain consistent pay structures. And industries sensitive to inflation costs, such as manufacturing, healthcare, and retail, are watching margins disappear.

The Transparency Trap: Expanding pay transparency laws mean employers can't hide behind vague salary bands anymore. With employee engagement at its lowest point in 20 years and active disengagement on the rise, open communication around pay decisions is more critical than ever.

Beyond Base Salary: Forward-thinking companies are reimagining total rewards. Flexible work arrangements, wellness stipends, and mental health support can deliver high perceived value without breaking the budget. Variable pay programs also align compensation with performance, offering a path to reward productivity sustainability.

What's Coming Next: Expect employers to lean heavily on market benchmarking and external consultants as internal teams stay lean. Pay transparency will continue spreading, requiring more public salary bands and internal equity audits. Most importantly, employees will demand context, not just what they're paid, but *why*.

Key Takeaways: The compensation game has fundamentally changed. Companies that try to wing it with questionable market data and ineffective pay plans will lose talent to competitors who've figured out how to be strategic about compensation, even with tight budgets.

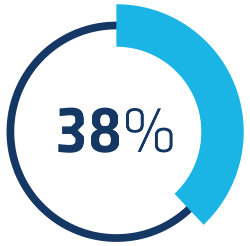
IMA COMPENSATION CONSULTING SOLUTIONS

IMA helps clients navigate today's tricky landscape by developing tailored compensation philosophies that align with business goals and market realities.

Our team benchmarks pay against reliable market data, designs structures that drive both growth and retention, and ensures compliance with expanding pay transparency requirements.

SECURE 2.0 WILL DISRUPT TRADITIONAL RETIREMENT DESIGN

By: Robert Goldman, Retirement



38% of employees have taken money from their retirement savings at least once. Of those, 37% withdrew funds for an unexpected emergency[17].

SECURE 2.0 introduced provisions that expanded emergency savings options within employer-sponsored retirement plans. While these changes offer opportunities to enhance employee financial wellness, they also present implementation challenges that need careful navigation and planning.

> "SECURE 2.0 challenges traditional retirement plan design, but it also creates opportunities for more adaptable financial wellness strategies. Employers should see these provisions not just as compliance requirements, but as a chance to provide practical solutions that help employees manage financial uncertainty."
>
> **ROB GOLDMAN**
> Retirement

THE TREND: EMERGENCY SAVINGS INTEGRATION

The new legislation fundamentally changes how employees access emergency funds through their retirement plans, addressing a critical gap in financial wellness programs. These provisions acknowledge that financial emergencies frequently compel people to make suboptimal decisions regarding their retirement savings.

SECURE 2.0 Brings Two New Ways to Build Emergency Savings:

+ **Sidecar Accounts:** Participants can open accounts linked to their retirement plans, capped at $2,500. Employers may automatically enroll employees at contribution levels of up to 3% of pay[16].
+ **Emergency Withdrawals:** Participants may withdraw up to $1,000 per year from their retirement accounts for emergency expenses, with a three-year repayment requirement[16].

Implementation Complexities: The sidecar account provision introduces notable administrative hurdles. Because contributions count toward the annual retirement deferral limit of $2,500, an employee directing $2,500 into a sidecar account can contribute only $20,000 to their primary retirement plan. In addition, IRS rules prohibit highly compensated employees from contributing to sidecar accounts, creating added tracking and compliance challenges for recordkeepers who lack direct access to payroll information[16].

Operational Hurdles: The legislation creates programming challenges that disrupt traditional account management. Once a participant's sidecar account reaches its $2,500 cap, all additional contributions must be redirected back into the retirement account, potentially requiring a shift from post-tax to pre-tax contributions. This distribution shuffle represents a significant departure from traditional account management protocols.

Strategic Opportunities: These provisions offer compelling benefits for employee financial wellness. The emergency withdrawal provision is more flexible than hardship withdrawals, since participants do not have to prove their financial need or match the withdrawal to a specific expense. They can simply self-certify their eligibility.

Key Takeaways: SECURE 2.0's emergency savings provisions represent an evolution in retirement plan design, offering new tools for employee financial wellness while introducing new implementation requirements. Success depends on careful planning, robust administrative capabilities, and ongoing compliance monitoring.

IMA RETIREMENT SOLUTIONS

IMA Retirement provides consulting services to help plan sponsors navigate these changes. The team guides plan design modifications, compliance requirements, and employee engagement strategies to ensure the effectiveness of these new provisions while preserving plan integrity.

CONCLUSION

The most successful organizations in 2026 won't be the ones with the biggest budgets or the newest vendors. They'll be the ones making smarter, more strategic decisions with the resources they already have. Whether it's squeezing more value from existing wellness programs, utilizing AI to simplify and personalize communication, or designing compensation strategies that are grounded in real-world budgets, the winners will prioritize substance over flash.

What makes 2026 so exciting isn't just new technology or changing regulations; it's the opportunity to finally get benefits right. Employers now have the ability to create experiences employees truly value, compliance processes that don't overwhelm teams, and wellness programs that drive participation and results.

The companies that will thrive are those ready to leave behind outdated playbooks and adopt strategies that work in the real world. Not just in theory, but in practice.

Ready to be one of them?

Let's discuss how IMA can help you transform these insights into meaningful results.

IMA Partnerly™

Where Most Brokers Stop, **We Keep Going**

Most brokers step back after open enrollment. IMA Partnerly™ leans in. We stay with you all year, connecting every part of your benefits strategy and supporting it with proactive expertise, clear communication, and a true sense of partnership.

PROACTIVE SUPPORT
A dedicated team that anticipates your needs, shares timely insights, and helps you stay ahead of compliance and benefits challenges.

UNIFIED STRATEGY
Your benefits work better when they work together. We align every part of your program into one seamless plan.

YEAR-ROUND PARTNERSHIP
Support doesn't stop after renewal. From onboarding to open enrollment to midyear changes, our specialists stay by your side every step of the way.

NO EXTRA COST
The majority of IMA Partnerly services are included. That means no hourly fees, no hidden charges, and no limits on expert guidance.

ON THE IMA pulse

STAY ON THE PULSE WITH IMA PARTNERLY.

Scan the QR code to subscribe to the **On the Pulse Newsletter** for insights, trend reports, and strategies from our national practice leaders.

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