

## **Well Workplace Award**

# Pioneer Hi-Bred International, Inc.

## **Platinum Award**

Information in this publication is carefully reviewed for accuracy. Questions, comments, or ideas are welcome. Please direct to Dr. David Hunnicutt, Executive Editor, at the address below.

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# PIONEER HI-BRED INTERNATIONAL, INC.

## WELL WORKPLACE AWARD PLATINUM APPLICATION

JULY 1, 2004

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# CONTACT INFORMATION

WELL WORKPLACE - Platinum Application

<i>Name of Organization</i>	Pioneer Hi-Bred International, Inc.
<i>Address of Organization</i>	
<i>Contact Person</i>	Jill Norris
<i>Title</i>	Preventive Health Services/Benefits Manager
<i>Work Telephone</i>	
<i>Fax Number</i>	
<i>E-Mail Address</i>	
<i>Alternate Contact</i>	Stephanie Downs
<i>Parent Organization</i>	E.I. du Pont de Nemours and Company
<i>Number of Sites Covered by this Application</i>	22 facilities in Des Moines/Johnston; 80 facilities throughout the U.S.; 8 facilities in Canada.
<i>Number of Employees Covered by this Application</i>	3800 employees in the U.S and Canada
<i>Nature of Business or Industry</i>	Agribusiness
<i>Name of CEO</i>	Dean C. Oestreich
<i>Date of Application</i>	July 1, 2004

## CHIEF EXECUTIVE OFFICER SIGN-OFF

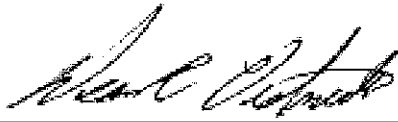
This page is to be filled out and signed by the chief executive officer or the senior manager responsible for operations at the site applying for the award.

I hereby attest to the accuracy of the information provided in this application submitted by **Pioneer Hi-Bred International, Inc** in pursuit of the Platinum Well Workplace Award.

**Name Dean C. Oestreich**

**Title President - Pioneer/VP & General Manager - DuPont**

Signature



Date

July 2 2004

Dean Oestreich  
President - Pioneer/VP & Gen Mgr-DuPont



Dean Oestreich joined Pioneer in 1974 as a corn breeder after graduating from the University of Minnesota with a degree in agronomy. Dean held positions in Information Management for Research, North America Sales and Supply Management between 1980 and 1990. He became director of Worldwide Parent Seed in 1990. After three years in this role, Dean was named Supply Management director responsible for global supply/demand planning and for supply operations in Latin America, Africa, Asia, Middle East, and Pacific.

Dean was named vice president and director for Africa, Middle East, Asia and Pacific operations in 1999. He became vice president and director of Supply Management in 2001 and was named vice president and business director, North America Operations in 2002. In January 2004, Dean became the 10th president of Pioneer.

He is a director-at-large for the American Seed Trade Association, a director for the Chinese Cultural Center of America, and an advisor to the Iowa State University chairperson for Sustainable Agriculture. He is also involved in fundraising for the Young Women's Resource Center in Des Moines by donating a personally crafted chair to their "Sit on It" auction.

Outside of his professional and community work, Dean is an avid gardener and accomplished woodworker. He also enjoys spending time with his wife Joni, and traveling to new places.

Jill Norris  
Preventive Health Services/Benefits Manager



Jill Norris has over 16 years of experience in the health and wellness field. She has provided leadership for the corporate wellness program at Pioneer for over 10 years and has received the Bronze, Silver and Gold Well Workplace award. In addition to managing the corporate wellness program for 3800 employees and their families throughout the U.S. and Canada, she oversees the executive health program and employee assistance program. She has a collaborative role with the Benefits Manager on benefit plan design, disease management, and health care consumer education.

Prior to her career at Pioneer, she started the first formal wellness program at Wellmark Blue Cross Blue Shield of Iowa. She has also worked as a cardiac surgical nurse, a clinic nurse/wellness consultant at a family practice clinic, and as a fitness trainer/aerobics instructor.

Jill is a registered nurse with an Associate Degree in Nursing, a Bachelor of Science degree in Community Health Education with an emphasis in Exercise Science from Iowa State University, and is currently completing her Master's Degree in Public Health from Des Moines University.

She is actively involved in her community promoting health and fitness. She has been a long-term volunteer for the American Heart Association in a number of capacities. She coached a team to run the Disney Marathon and raised \$30,000 for the American Diabetes Association. She also participated in the Team in Training program through the Leukemia Society of America, raising funds and completing the Anchorage, Alaska marathon. She has served on the advisory board of the BRAVE foundation, promoting violence prevention. She also enjoys coaching and volunteering with youth sports.

On a personal note, when Jill has free time she enjoys outdoor activities - running, biking, rollerblading, skiing, fishing/boating, and golfing. She also enjoys just playing around with her husband and two children.

# GENERAL INFORMATION

WELL WORKPLACE - Platinum Application

## BACKGROUND INFORMATION

### ***How long has your health promotion initiative been in place?***

Pioneer has had a formal wellness program in place since 1979.

### ***How are your wellness programs paid for?***

Pioneer has a shared partnership philosophy with employees regarding health care benefits and health management. Employees share in the cost of health care premiums, wellness programs and the fitness center. Typically, the employee will pay between 15%-50% of the program cost and Pioneer covers the remaining costs. Employees tend to place a higher value on the program and take more ownership when they have made a personal investment.

### ***Overall, how have participation rates in your wellness program changed over the past two years?***

Participation rates in our wellness program continue to increase due to four key factors:

1. Addition of a worksite fitness facility on the Johnston campus in October, 2003;
2. Implementation of a fee-per-visit fitness center subsidy for employees at remote locations as a comparable alternative to the Johnston fitness center;
3. An increase in staff to facilitate more programs for employees across North America; (Added 2 experienced part-time staff and 2 full-time contracted fitness center staff);
4. Access to advanced technology, which enables us to reach more employees in a multi-site organization as well as streamlines program administration so more time can be dedicated to program design and employee interaction.

2002 Total	2003 Total	2004 Total Participation
Participation	Participation	(Q1 & Q2 to date 7/1/04)
26,835	31,900	36,764

***What department is your wellness program located in?***

Preventive Health Services is part of the Benefits & Compensation team within the Human Resources Department.

***What are the organization's annual health care costs?***

In 2003, Pioneer paid \$19,136,500 in health care costs for employees.

***What type of industry best classifies your organization?***

Agribusiness/Life Sciences

***What is the approximate annual budget of your current wellness initiative-including salaries?***

The annual budget of the Pioneer wellness program is approximately \$425,000, which includes staff salaries, fitness center operating expenses, health promotion programs, bi-annual health screening, and communication/promotion materials.

***For what reason did your organization start a wellness initiative.***

The wellness program was initiated in 1979 by two forward thinking employees, Chuck Johnson, then Vice President (later to become CEO of Pioneer) and Russ Knuth, Director of Benefits/Risk Management. They realized that developing prevention strategies to manage health care costs would be money well spent similar to other safety/risk management initiatives. A pilot health-screening program was conducted for a field production plant and one business unit located in Johnston. The screening was well received by participants and revealed potential health problems for a number of the participants. In 1980, comprehensive health screenings were offered to all Pioneer employees and their spouses in the United States (in 1981 screenings were offered to Canadian employees). The health-screening program continues to be a cornerstone of the wellness program today.



## **Section One:**

### **Business Context and Background**

Section one of this application addresses the historical context and organizational background of the Platinum applicant. The required elements of this section appear below. Please limit the discussion to no more than eight typewritten pages.

- ◆ Please outline the history and evolution of the organization
- ◆ Please articulate the corporate Vision/Mission statement(s)
- ◆ Please include an Organizational Chart
- ◆ Please describe the distinctive services and traits of your organization
- ◆ Please provide an overview of the present competitive position of your organization within your industry
- ◆ Please list the core values of your organization (e.g. What does the organization stand for? and What is the organization known for?)
- ◆ Please briefly discuss the types of challenges that your organization faces in its present business environment
- ◆ Please provide a demographic overview of your organization's workforce

SECTION ONE:

# BUSINESS CONTEXT AND BACKGROUND

## HISTORY AND EVOLUTION

Henry A. Wallace, former Secretary of Agriculture and Vice President of the United States, founded the Hi-Bred Corn Company in 1926 in Des Moines, Iowa. In 1935 the company changed its name to Pioneer Hi-Bred Corn Company. Twenty-nine years later, in 1964, Pioneer established its first research station outside North America, in Jamaica. Pioneer became a publicly traded company in 1973, and by 1981 Pioneer became the seed corn market share leader in North America. Pioneer was listed on the New York Stock Exchange in 1995, and in 1999, the organization merged with DuPont and continues to grow. Pioneer earned \$2.3 billion in revenue in 2003.

### VISION/MISSION STATEMENTS

We are a customer-focused team. Our custom solutions enable farmers, processors and end-users to deliver food and products that create an improved, sustainable lifestyle for people worldwide.

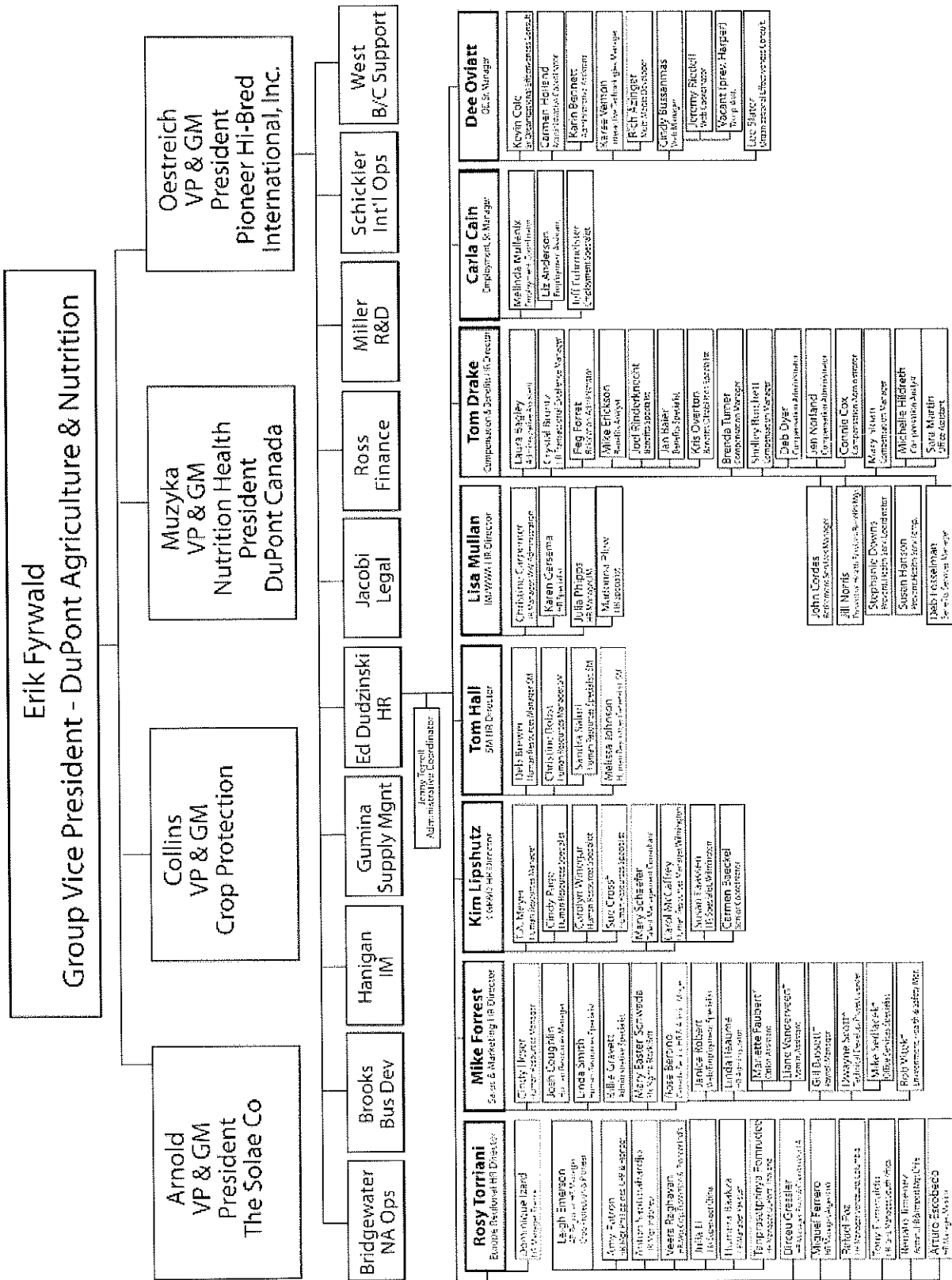
**Customers:** Build enduring customer relationships based upon our intimate and knowledge-intensive understanding of their unique needs.

**Solutions:** Create superior value propositions by using our consultative “Long Look” approach to deliver unique combinations of products, services, technology and information.

**Differences:** Maximize our differences...in germplasm, rapid technology integration, reliable and high quality supply, accurate and timely information, talented people and strong reputation.

**Markets:** Focus resources in key growth-critical markets and leverage our capabilities to other markets.

# ORGANIZATIONAL CHART



## DISTINCTIVE SERVICES AND TRAITS OF ORGANIZATION

The largest seed company in the world, Pioneer is headquartered in the heart of the U.S. farm belt. Henry Wallace was the first to package products and services to help farmers get the most value per acre of land. He started the organization as not only a seed company, but a provider of farm management as well. Pioneer has agronomists on staff to aid in crop management, more than 1,500 researchers who are constantly improving products to provide customers with choices and a global supply management team to provide the right product at the right place at the right time.

Over the past decade, the seed industry has seen a lot of consolidation. The chart on the next page shows the current state of the industry. In addition to seeds and agronomy services, Pioneer offers financial and insurance services and crop protection options to farmers. At Pioneer we don't measure our success on one season. Rather, we take the "Long Look" approach and measure success based on relationships built over a lifetime.

## CORE VALUES OF THE ORGANIZATION

The "Long Look" philosophy of business was originally established in 1952 and reflected our business approach. Since that time we have added and subtracted products and services from our core seed corn business and successfully responded to changing markets, world trading patterns and evolution of technology. Our "Long Look" business philosophy, however, has remained constant and we strive to live up to it. We are committed to patient growth from our research activities. We are committed to developing superior products with efficiencies, which may well be essential to sustaining humanity. We are committed to developing these products through the work of people developed from within the organization wherever possible.

### ***The Pioneer Philosophy***

*The "Long Look" has led us to set forth four simple statements of business policy:*

***First:*** *We strive to produce the best products on the market.*

***Second:*** *We strive to deal honestly and fairly with our employees, sales representatives, business associates, customers and stockholders.*

***Third:*** *We strive to advertise and sell our products vigorously, but without misrepresentation.*

***Fourth:*** *We strive to give helpful management suggestions to our customers to assist them in making the greatest possible profit from our products.*

## TYPES OF CHALLENGES YOUR ORGANIZATION FACES IN PRESENT BUSINESS ENVIRONMENT

Each day, employees of Pioneer Hi-Bred International, Inc. face numerous challenges from weather to global acceptance of biotechnology. Below is a list of some of the challenges facing Pioneer.

- Identity preservation of seed products
- Commodity prices
- Weather
- Biotech understanding/acceptance
- Regulation
- Complexity of products
- Intellectual property protection
- Safety

## DEMOGRAPHIC OVERVIEW OF WORKFORCE

Pioneer Hi-Bred International, Inc., employs 6,215 people worldwide in more than 70 countries.

### Geographical breakdown:

3,962 in North America  
3,755 in the U.S.  
2,224 in Iowa  
1,870 in Des Moines/Johnston

### Gender breakdown (U.S.):

68.4% are male  
31.5% are female

### Age breakdown (U.S.):

3% < 25  
18% 25-34  
43% 35-44  
26% 45-54  
8% 55-64  
1% > 65

### Marital Status (U.S.)

1% Unknown  
20% Single  
77% Married  
<1% Widowed  
<1% Divorced

### Years of Service:

63% of Pioneer employees have been with the company for more than 5 years.  
17% have been with us for more than 20 years.

### Business Units

38.03% in Supply Management  
23.81% in Research  
22.18% in Administration  
15.98% in Sales & Marketing

### Ethnic Origin (U.S.)

1% Afro-American  
1% American Indian/Alaskan  
5% Asian/Pacific Islander  
87% Caucasian  
4% Hispanic

### Education Level (U.S.)

1% no credentials  
19% High school diploma  
4% Trade certificate  
11% Some college  
7% Associate degree  
34% Bachelor's degree  
12% Master's degree  
1% Professional designation  
10% Doctorate

## **Section Two:**

### **Present Approach to Corporate Health**

Section two of the Platinum Award addresses the organization's past and present approaches to corporate wellness. This section includes the detailed account of the history and evolution of the organization's wellness initiative as it relates to the core business functions. Please limit your discussion to no more than 12 typewritten pages.

- ◆ Please provide a brief overview of the factors that lead to the genesis of the wellness program
- ◆ Please identify how long the program has been in place
- ◆ Please outline the organization's corporate wellness vision and mission statements
- ◆ Please provide a brief overview of how wellness fits into the strategic priorities of the organization
- ◆ Please provide an overview of the operating model and theoretical underpinnings for your organization's wellness initiative
- ◆ Please list and briefly describe the health behaviors that are being addressed within your organization
- ◆ Please provide an overview of the organization's most novel/innovative approach that is currently being utilized within the organization
- ◆ Please list and briefly describe the sources of data that are being utilized to make strategic health decisions
- ◆ Please describe your organization's wellness efforts to address at-risk populations
- ◆ Please describe your organization's wellness efforts to keep low-risk populations at low-risk
- ◆ Please describe the steps that have been taken to ensure that the organization's wellness initiative will continue to function in the years ahead

SECTION TWO:

## PRESENT APPROACH TO CORPORATE HEALTH

### HISTORY AND EVOLUTION OF THE ORGANIZATION'S WELLNESS INITIATIVE

#### **1979 - 1992**

In 1979, Chuck Johnson, then Vice President (later to become CEO of Pioneer) and Russ Knuth, Director of Benefits/Risk Management, were visionaries in their own right and realized the importance of developing prevention strategies to manage health care costs. An outside vendor was contracted to conduct a pilot health screening for a field production plant and one business unit located in Johnston. The screening was well received by participants and revealed potential health problems for a number of the participants. In 1980, comprehensive health screenings were offered to all Pioneer employees and their spouses in the United States (in 1981 screenings were offered to Canadian employees). The screening program continues to be a cornerstone of the program today.

In 1985, a full-time staff person was hired as part of the benefits department to manage the company disability plan along with managing the employee wellness program. The program expanded from just health screenings to other health awareness activities. Those included a bi-monthly health newsletter, PEP (Pioneer Exercise Incentive Program), lunch-n-learns, and financial incentives for quitting smoking and losing weight. In 1987, the smoke-free workplace policy was implemented. A part-time person was hired to coordinate the nationwide screening.

#### **1993 - 1996**

In 1993, two new full-time staff coordinated the worksite wellness program. The program experienced some major changes: a new name and logo, more focus on high risk management and medical self-care and consumer education, as well as an emphasis on tracking data and evaluating the cost benefits and effectiveness. The screening program, which had been a core component of the program since inception, was scheduled to go to an every-other-year basis starting in 1995. This change moved the program from being a general screening and health awareness program to a more highly effective screening, risk intervention and follow-up system. Pioneer received the Bronze Well Workplace award in 1993 and used the framework of the Silver Well Workplace application to identify areas for improvement and increased effectiveness.



In 1996, the Preventive Health Services Manager, whose responsibilities included managing the disability plan as well as the wellness program, resigned. This happened at a time of a company-wide reorganization. The responsibility of managing the disability plan was delegated to another benefits staff person and all wellness programming was delegated to the Preventive Health Services Administrator. A full-time student intern was hired each semester to assist with the corporate wellness program. Due to the change in staff and responsibilities, the focus of the program turned toward targeted intervention, high risk management, and demand management strategies, with less focus on broad based health education programs to all employees.

### **1997 - 2001**

Based on outcomes from a report compiled by an external consultant in 1997, which analyzed health claims data, screening data, program participation and employee demographic data, a strategic plan was developed. Interventions were designed to target the top major diagnostic categories of medical claims: cardiovascular, pregnancy, musculoskeletal and acute. A more intense collaboration with our medical plans was initiated to provide disease management, a nurseline, preventive exam reminders, and better reporting. An increased focus on creating a health enhancing culture also began. Some additions were: lactation rooms, cafeteria and vending with healthy choices, ergonomically sound offices with on-line "stretch break trainers", fitness room for the high-risk cardiovascular program and yoga classes and a smoke-free workplace policy extended worldwide.

In 1997, Pioneer was awarded the Silver Well Workplace award. The Gold Well Workplace application was used as a framework to take the program to the next level and achieve greater impact on the organization. In 2000, Pioneer was awarded the Gold Well Workplace designation.

In October 1999, Dupont acquired Pioneer. Fortunately, Pioneer and DuPont shared similar values related to health and safety so the wellness program was not impacted. To reinforce this, the Vice President of Human Resources stated in the January 2000 HealthMatters newsletter, "We will see a continued emphasis on the company's investment in employee's well-being."

### **2002 - 2004**

In 2002, a strategic plan was presented to the VP of Human Resources with an outline of the vision and goals for the wellness program. Also included was an outline of increased resources needed to achieve those goals, which in turn would support the organization in achieving their goals. Two experienced part-time staff joined the wellness team in 2002. A proposal for a work-site fitness center and alternative option for field employees was proposed to senior management in 2003 and approved. The new Pioneer Health & Fitness Center opened in October 2003. Health Fitness Corporation was selected as our partner in managing and staffing the center. Two full-time fitness center staff were hired in the fall of 2003. The additional staff and facility

has enabled us to reach more employees through a variety of programming. Danielle Pratt, a consultant in organizational health, was also brought in to educate business leaders on the impact of human capital on the business. Work began on an employee opinion survey to evaluate the health of the organization in regard to people practices and design a follow-up action plan.

As we look to the future, it is our ongoing goal to help employees find that intricate balance between work and personal lives and maintain a healthy lifestyle. Indeed, the needs, work environment, and lifestyles have changed over the years and influenced our program but one goal that remains unchanged is Pioneer's realization that resources invested into the well-being of its employees are resources well spent.

## VISION AND MISSION

**Vision:** The vision of Pioneer Preventive Health Services is that employees and their family members will proactively and effectively manage their health leading to enhanced professional and personal lives.

**Mission:** The mission of Preventive Health Services is to provide ongoing health promotion and preventative programs for employees and their family members as well as encouraging a health-enhancing work environment.

## OVERVIEW OF HOW WELLNESS FITS INTO THE STRATEGIC PRIORITIES OF THE ORGANIZATION

The overall vision for Human Resources in the DuPont organization is "One HR...unleashing the potential of people in the new DuPont." Consistent with DuPont's vision, Pioneer is committed to the development and growth of their people. One of Pioneer's key strategies in pursuit of a *Vision for Growth* is to "attract and retain a world-class workforce". In alignment with our business and our people, Pioneer's Human Resources department is focusing on the following strategies:

- Creating and fostering a superior work culture.

- Attracting and retaining a high performing, motivated world-class workforce.

- Providing people managing processes to accommodate business growth and the ever increasing complexity of the industry.

Preventive Health Services is positioned within the organization to play an influential role in the outcomes of these strategies. As part of an integral component of Pioneer's total compensation and rewards package, our vision, mission and key goals focus on our human capital potential.

We are committed to providing every opportunity for employees to realize their full potential, both personally and professionally. By ensuring a healthy, productive and energetic workforce, we maximize our business performance and drive sustainable growth.

## OVERVIEW OF THE OPERATING MODEL AND THEORETICAL UNDERPINNINGS FOR YOUR ORGANIZATION'S WELLNESS INITIATIVE

The operating model for the wellness program is based around three key goals:

Manage health care utilization by providing employees and spouses with resources, education and medical consumer skills.

Decrease the number of employees and spouses in high risk categories by providing awareness, education and behavior change programs.

Create a partnership within the organization that supports good health practices and fosters a positive corporate culture.

Overall projected and desired outcomes are:

Reduction in inappropriate health care utilization and unnecessary expenses.

Better informed and more empowered employees and spouses resulting in improved health outcomes.

Enhanced workforce productivity, quality of work life, and morale.

Key program operating principles are:

Developing and maintaining a trusting and caring environment is a primary factor in effectively engaging employees in health promotion programs.

A healthy lifestyle involves a balance between the spiritual, physical, intellectual, career, emotional, and social dimensions of life, therefore, the program should support and promote all of these areas.

Meeting the needs of a diverse population involves the delivery of a variety of programs through a number of modes.

Influencing change and managing health care costs requires a partnership approach between employees, the company and health care providers.

Data collection, program evaluation, and communication of outcomes to management and employees are critical to ongoing support and continuous improvement.

THE THEORETICAL UNDERPINNINGS OF THE WELLNESS INITIATIVE  
CAN BE LINKED TO THE FOLLOWING MODELS:

Transtheoretical Model- a comprehensive model that explains behavioral change as a progression through stages of change. The health screening program is an example that assesses readiness to change and provides feedback based on stage.

Self-Efficacy Theory - is confidence in one's ability to perform a certain behavior and maintain the behavior over time. We focus on building self-efficacy in program design by first establishing a caring and accepting environment, setting achievable goals, then creating opportunities to experience success in small increments.

Health Belief Model - predicts health behavior decisions and likelihood of adherence based on perceived susceptibility, severity of health threat, benefits and barriers of behavior change. These factors are assessed through pre-assessments and addressed in program design, marketing communications and ongoing motivational/support messages. Our reminder program for preventive exams is an example that applies this theory to the intervention techniques.

Social Networks and Social Support - interpersonal models where the person's interaction with their environment plays a critical role in their health behavior and health outcome. We have increased our focus on creating a more supportive work environment and encouraging social connection among colleagues.

## HEALTH BEHAVIORS THAT ARE BEING ADDRESSED

### **Regular Physical Activity**

The foundation of a healthy mind and body is regular physical activity. It is the single lifestyle behavior that can influence the majority of the leading causes of illness and disease. It also plays a critical role in supporting a creative, motivated and high performing workforce. The following programs and services are offered to support employees in maintaining an active lifestyle:

Pioneer Health & Fitness Center equipped with state of the art cardiovascular and strength training equipment. The center is staffed by professional fitness specialists who conduct fitness assessments, orientation, personal exercise prescriptions, and regular follow-up for all members. Personal training is also available to members and non-members.

Group exercise classes including yoga, Pilates, core stability, toning/stretching, and fitness walking.

WorkFit fee-per-visit subsidy at local fitness centers for employees located outside the Des Moines/Johnston area.

Health club reimbursement policy which allows for health club fees incurred while traveling on business to be submitted for reimbursement through their travel expense.

Exercise incentive programs designed for the beginner to the avid exerciser. Team challenges, weekly educational E-mails, motivational speakers, and prizes are regular features.

Team league subsidy (50% up to \$200) for entry fees to local recreational leagues.

Pioneer summer golf league coordinated to encourage activity, networking and fun (no carts allowed)!

Access to HealthCalc website with up-to-date health and fitness information, personal assessment and activity tracking tools, "ask-the-trainer" resource, etc.

Office Athlete on-line animated stretch break that users can program frequency, duration, types of stretches, morning warm-up routine, and personalized reminder messages.

Indoor and outdoor fitness trails with measured distance and maps posted on the intranet.

Bike racks, locker rooms, and shower facilities located throughout the Johnston campus.

Annual weeklong celebration of National Employee Health & Fitness Day with a variety of activities including "bring your bike to work day" and company-wide fitness walk.

Stretch break training and inclusion in daily work routine currently being developed with Risk Management and Supply Management leadership for plant location employees.

## Healthy Eating Habits

Eating a well-balanced diet, making conscious and informed choices, and nourishing a positive self-image are key factors we promote in relation to nutrition and weight management. The following programs are offered to support employees in these areas:

The onsite cafeteria provides a number of healthy options including "grab and go" salads, low-fat dressings, vegetarian options, ½ portions, "cook to order" stations, and a variety of healthy beverages such as 8th Continent soy milk, herbal teas and juices. Weight Watcher's points are calculated and posted on the intranet site for all cafeteria offerings.

Vending machines on campus offer at least five "healthier choices" which are noted with a "Treat Yourself Right" symbol.

Occasional sampling of healthy food products with coupons for these products.

RDonCall provides free access to a registered dietitian via E-mail for employees and family members to get professional nutrition advice and answers to any nutrition/weight management question they may have.

Nutrition counseling package with a local dietitian that includes a one-hour consultation and five 15-minute follow-up sessions either at the employee's office, in a conference room, at their home or at the dietitian's office.

Nutrition/weight management reimbursement of 50% toward any approved nutrition counseling service or weight management program.

Educational programs provided on a variety of nutrition/weight management topics most recently "a healthy approach to the low-carb diet" and "the health benefits of soy".

Bulletin board displays, HealthQuest quarterly newsletter, HealthCalc website, and Info- booths with nutrition, weight management, and self-image information highlighted.

Corporate library resources with videos, audiotapes, books, cookbooks related to healthy eating, supplements, managing diabetes, reversing heart disease, diet and menopause, eating on the run, quick meals for families, shopping savvy, body image, etc.

Medical coverage for comprehensive diabetes management education with nutrition counseling.

Promotion of healthy nutrition through the Healthy Sprouts prenatal education program.

## Personal Resilience

We've reframed our approach to stress management and are focusing on promoting a positive perspective that supports our employees to thrive in a changing world rather than just survive. We also know that stress is different for each person so a variety of resources are offered.

Personal Resilience workshop which involves a personal stress profile, overview of the physical and behavioral signs of stress, strategies to leverage off of strengths and build weaknesses, action planning with workgroups on a supportive environment. This has been a highly requested training and in some groups mandated for their development training.

Trainings offered through our Organizational Effectiveness Team: conflict management, time management, negotiating skills, career planning, Targeted Development, Coaching for Possibilities, "Fish" training, communication skills, dealing with difficult people, personality and communication styles, Habits of Highly Effective People, Work/Life balance, etc.

Dedicated room in the fitness center for therapeutic massage.

Variety of yoga classes which include developing skills in breathing, progressive relaxation, meditation and mindfulness.

Extensive resources on financial management, retirement planning, investing for college, debt management, and more. Provided through website tools, free financial consulting, educational materials and workshops offered at the worksite. Includes 100% tuition reimbursement for employees, college aid stipend for dependents of employees, 401(k).

Employee Assistance Program that provides up to six counseling sessions and referral if longer-term counseling is needed. Available at no cost to employees and family members.

Access to Eldercare resource and referral service.

A policy provided for flexible work arrangement.

Corporate library resources with videos, DVD's, audiotapes and books on stress management, work/life balance, relaxation skills, yoga, parenting, dealing with divorce, empty-nest syndrome, keeping your marriage strong, aging parents, etc.

Morale boosters, support networks, and social activities encouraged among business groups. Healthworks activity fund for field sites can be applied to one healthy team outing.

Six private rooms with dimmable lights, a recliner, radio, and lock on the door that serve as lactation rooms and a quiet place to take a relaxing break.

## **Informed and empowered health care consumer**

Key health management behaviors we promote to our employees are: 1) Understand your medical coverage; 2) Access appropriate care when needed; 3) Make informed decisions; 4) Actively partner with your medical providers on managing your health; 5) Apply medical self-care when needed; 6) Take advantage of preventive exams and health-enhancing programs and resources. The following resources support these behaviors:

Benefits orientation for all new employees which includes an extensive overview of the medical plan options.

Annual open enrollment meetings with information about medical plan coverage.

Educational lunch-n-learn series on understanding your health care benefits.

Article featuring a health care topic in each issue of the HealthQuest newsletter.

Medical self-care training conducted at all sites in the U.S. and Canada; follow-up video provided to all sites; medical self-care books sent to all new members to our health plans.

Preventive exams covered at 100% in all health plans; reminder postcards sent to members on their birthday outlining recommended preventive exams based on their age and gender.

CPR/First Aid/AED training offered at all locations throughout the year.

Flu shots offered at the worksite for employees, spouses and retirees.

Healthy Sprouts prenatal program coordinated with medical plans.

Disease management programs provided on diabetes, asthma, and cardiovascular disease.

Free comprehensive health screening offered to employees and spouses at all U.S. and Canada locations every other year. A medical overview, extra copy of lab work, and cover letter is provided for participants to forward to their personal physician and maintained in their medical record. Any person with high risk results receives a call or letter encouraging them to follow-up with their physician.

LifeClinic station located on the Johnston campus where employees can check their blood pressure, pulse and BMI and track results by setting up a personal account on the Lifeclinic.com site. They can retrieve a history of their results to share with their physician and also access health information on managing health conditions.

COT (cut out tobacco) program to apply to cost of cessation programs or use as a financial incentive to remain non-smoking. Decrease in life insurance premium if remain non-smoker status.



## NOVEL AND INNOVATIVE APPROACH TO HEALTH PROMOTION

"*Technology that Yields*" is a slogan that not only applies to our business but also is reflective of our innovative approach to administering the health promotion program. Pioneer has always been on the cutting edge of technology and we have used these tools to effectively reach employees in 110 locations (many in rural areas) throughout the U.S. and Canada. We currently use technology in the following ways:

- E-mail for employee communication and access to dietitian through RDonCall.
- Intranet site for program information, online registration, program administration (for example, online tee time reservation for golf league).
- Participation tracking and administration database.
- Zoomerang online tool for program evaluation and employee interest/opinion surveys.
- HealthCalc for tracking and reporting fitness center utilization and for employee information and personal fitness tracking tool.
- Microsoft Live Meeting for remote access to educational programs.
- Lifeclinic station for automatic blood pressure readings, pulse, weight and BMI with personal trend tracking.
- Office Athlete on-line automated stretch break that pops up based on number of key strokes or minutes on the computer.
- Telephonic lifestyle management counseling.

The HealthCounts screening program, while not unique in concept, is novel from the perspective that we have offered this program for 25 years and consistently averaged between 65- 75% participation. It is completely voluntary, free to employees and spouses, and conducted on company time. Other than a free healthy breakfast at the end of the screening, there is not a stick or carrot in place as an incentive to participate. Employees place a high value on this program and report they share the results with their physicians. This program is particularly valuable for employees in the rural locations where access to health care and screening services are limited. The results are maintained confidentially within the Preventive Health Services department and are utilized to target programs to the people who are "ready" based on stage-based questions. We have been able to track health status improvement over the last 10 years by using the same tool and procedures and by having access to the data. We place great importance on securing the information and maintaining the trust we have developed with employees.

Integration within the organization is another area we are unique and innovative. We are invited or we initiate involvement in a number of different projects occurring within the business. A few examples of current work include:

Initiated team to explore the development of a new "Pulse Survey" that captured the human capital measures missing in our corporate scorecard. Active member of the development team currently in place.

Member of the committee developing our first drug and alcohol policy.

Member of the Seminar Series Committee of the Pioneer Women's Network that was initiated in 2004. Invited to present Work/life Balance and Women's Health sessions at the PVN field employee symposiums offered in 2004.

Facilitated a coordinated approach among Safety, Supply Management, and Wellness to develop an injury prevention program that focused on lifting techniques, back care, stretch breaks, and fitness conditioning.

Personal Resilience training included on the agenda at the Research Learning Institute, Annual Sales Conference and Regional Meetings and Supply Management Conference.

Active participant on the Total Rewards and Compensation analysis and business strategy project.

Provided input on the design of the new Web Portal, On-line Learning Tool, and upcoming SAP-R/3 employee self-service tool.

To our surprise, the approach we took toward the development of the worksite health & fitness center was novel. Based on our research, it was typical that many organizations first began their wellness program with a fitness center and then some later incorporated the health component. The decision to build the center was often the result of a senior leader with a personal passion for fitness and an intuitive case it would be good for employees, thus good for business. Tracking data, evaluating impact, aligning with business strategy or even seeking employee input was not typical. The process we took in developing our center as an addition to our 25-year-old program went as follows:

Established business case by collecting data related to the relationship among regular physical activity and employee health risk trends, health care claims and top prescription drugs, disability and worker's compensation injury categories, illness and injury risks with an aging workforce, and cost/benefit ratio of investment.

Obtained employee feedback on interest for an onsite facility, likelihood of use/when/how often, willingness to share in cost, desired equipment, impact of convenience factor, and perceived benefits gained from an onsite center. Within 2 hours of posting the survey we had over 900 positive responses.

Presented a proposal to senior leadership for a 2-year pilot facility utilizing existing space, which at the time was used for storage space. Proposal approved.

Researched best practices and design among leading companies with onsite centers.

Selected a leader in the industry to staff and operate our fitness center after an extensive proposal process. We leveraged off of their expertise and utilized their benchmarking data to compare our results to national norms.

Established a tracking and evaluation process to capture utilization, demographics, health status improvement, member satisfaction, corporate recognition, and cost/benefit threshold.

Applied Six Sigma methodology to analyze measures.

Opened the center in October 2003 and within the first 6 months had 476 members (25% eligible population) with an average of 75% utilization rate. Our maximum capacity is approximately 500 with our goal to achieve this by the one-year mark.

At the two-year mark we will evaluate the data and propose either a continuation of the current center or an expansion to a bigger facility to accommodate more employees and include spouses and retirees.

## SOURCES OF DATA THAT ARE BEING UTILIZED TO MAKE STRATEGIC HEALTH DECISIONS

Pioneer has always been data driven regarding strategic decisions and business practices. The wellness program closely aligns with the business and applies this same strategy in making decisions regarding programs and services.

**Health Screening Data** - A comprehensive health assessment that includes measurements of height, weight, body composition, hip/waist ratio, complete blood profile with a health risk questionnaire that captures lifestyle behaviors, readiness to change and interest in program topics. A 10-year history of aggregate and trend reports by various group splits is analyzed.

**Fitness Center Data** - The HealthCalc software is used to capture and report member utilization by hours of the day, days of the week, comparison by month on total visits, age and gender, and fitness assessment results and re-assessment changes. All new members are required to complete a fitness assessment and orientation before activated as a member. Equipment utilization data is tracked. Member satisfaction data is collected via an online survey at 6-month intervals. A suggestion box and E-mail are also available to collect member feedback.

**Health Care Trends** - Quarterly meetings are held with administrators of our medical plans to evaluate health care claims utilization. Annual reports are reviewed to determine trends in major diagnostic categories, preventive exam utilization, disease management outcomes, and top ten prescription drugs by cost and volume. Cost and categories of claims over \$10,000 are also analyzed.

**Human Resources Metrics** - Demographic breakout reports of our employee population by age, gender, ethnicity, years of service, employment status, position level, education level, and turnover rates. Reports regarding employment trends and future workforce issues are also reviewed.

**Worker's Compensation and Safety Metrics** - Annual reports of worker's compensation claims by cost and frequency. Monthly safety reports on lost workday cases, reportable injuries, and number of accidents.

**Short-term and Long-term Disability** - Annual summary of number of cases, total cost, and categories of disability.

**Pre/Post Program Survey Data** - All programs are evaluated to assess participant satisfaction and process improvements. If applicable a pre/post survey is conducted to evaluate change in knowledge and/or behavior and factors perceived as contributing to the change.

## WELLNESS EFFORTS TO ADDRESS AT-RISK POPULATIONS

Our wellness efforts to address at-risk populations begins with a health-enhancing culture that does not judge or penalize for unhealthy habits but rather supports lifestyle change at the point the employee determines they're ready. We seek to engage employees and open doors for participation through as many different opportunities as possible. We promote a safe, trusting and accepting environment through our relationships, actions, and communications with employees. We work to keep wellness visible and in front of employees through newsletters, bulletin boards, websites, booths, health kiosks, fundraising events, business meetings, and worksite activities.

Some key risk areas and supporting initiatives are listed below:

**Cardiovascular** - LifeClinic automatic blood pressure station, comprehensive health screening with lipid profile, worksite fitness center and WorkFit subsidy, Personal Resilience trainings, cardiovascular disease management program through medical plan, healthy nutrition choices with nutrition education, yoga classes and therapeutic massage.

**Musculoskeletal Injuries** - Fitness center and WorkFit subsidy, Office Athlete on-line stretch break, ergonomic training with office evaluations and workflow studies, core stability back class, lifting training and stretch break/conditioning program, and supervisory trainings.

**Diabetes** - Disease management program, preventive exam reminder program (foot exam, retinal eye exam, glucose testing), fitness center with personalized exercise prescriptions and follow-up, nutrition counseling and access to dietitian through RDonCall, health screening program with glucose testing and follow-up calls to high risk.

**Depression/Stress** - Personal Resilience training, increase in EAP visits, information in newsletters on mental health benefits and signs/symptoms of depression, HR workload/demand analysis, supervisory training, eldercare resource/referral, library resources, collaboration with medical plans to assess whether employees are getting counseling with drug treatment, Pulse Survey on organizational health.

**Sedentary Lifestyle and Obesity** - Extensive offering of fitness and nutrition resources listed in previous "health behaviors addressed section".

## WELLNESS EFFORTS TO KEEP LOW-RISK POPULATIONS AT LOW-RISK

Our strategy for keeping low-risk populations at low-risk is to maintain a health-enhancing, supportive culture with access to a variety of programs and resources that address individual needs throughout the lifespan. Creating a welcoming atmosphere and building a trusting and positive relationship with employees will influence their likelihood of staying engaged and involved. Also, seeking their involvement and input on program design and implementation will facilitate ownership and commitment.

The health screening program, which is available to all employees, enables employees to monitor their health status over time and identify areas that may have changed. Awareness resources such as the quarterly newsletter, bulletin boards, and website provide information to help them stay up-to-date on health information. The exercise incentive programs are designed to meet the needs of both the beginner and avid exerciser so they stay involved in programs and their efforts are recognized. The fitness center and team league subsidy also support those who are already active and by having access to these resources they will likely maintain their active lifestyle.

## STEPS TO ENSURE THAT THE ORGANIZATION'S WELLNESS INITIATIVE WILL CONTINUE TO FUNCTION IN THE YEARS AHEAD

After a 25-year history, the wellness program is an integral part of the organization with consistently high levels of participation and strong leadership support. The program and staff are well integrated within the organization and are seen as a valuable resource contributing to the long-term success of the organization. Within the last two years the wellness team has grown with the addition of two experienced part-time staff and two full-time contracted fitness center staff. The development of our worksite health and fitness center is a standing monument to our ongoing commitment to employee health and well-being. We continually strive to align our initiatives with business goals and collect data to demonstrate the value of our investment in the program. Safety and health are also core values of our parent company, DuPont. We are actively working with our DuPont colleagues to share best practices and continue to build on our programs to support a healthy, motivated and high performing workforce.

## **Section Three:**

### **Outcomes**

Section three of the Platinum Award addresses the outcomes that have been demonstrated because of your organization's wellness efforts. To attain Platinum, particular attention to detail must be provided in this section. Specificity with respect to outcomes and R.O.I is essential. Please limit your discussion to no more than six typewritten pages.

- ◆ How has your organization's health promotion programs impacted health risks?
- ◆ What financial outcomes have been demonstrated because of your organization's wellness efforts?
- ◆ How has your company's wellness initiative advanced your organization's business objectives?

SECTION THREE:

# OUTCOMES

## HOW THE ORGANIZATION'S HEALTH PROMOTION PROGRAMS HAVE IMPACTED HEALTH RISKS

Pioneer has offered comprehensive health screenings to employees and their spouses since 1979. The health screening serves as a personal assessment tool for employees to monitor their current health status, identify opportunities for improvement, and address health risks that may impact their health in the future. It has also served as a program administration tool to monitor health trends over time and provide direction for targeting programs.

As the health promotion field has advanced over the last 25 years, the types of screenings and HRA tools as well as the research behind the risk calculations have changed and improved. These factors, along with a changing workforce and changes in methods of program administration, have impacted the ability to track consistent data over the long term. However, the information has remained a valuable tool for evaluating trends.

A progress trend report was used to compare health screening results of 1,109 Johnston, IA-based screening participants who have participated between 1996-2002 and again in 2003 (See Appendix A). Participants have either maintained or improved in all 17 health factors with 60% rated "good to excellent" in 13 of the factors. With an aging group, this supports the effort of keeping the low-risk low and moving the high/mod risk to a lower risk. Areas needing improvement include nutrition, fitness, aerobic activity and cancer risk. With the recent addition of the worksite fitness center and a more concentrated focus on nutrition education we are hoping to see these areas improve in the 2005 screening results.

The chart below represents a trend regarding regular physical activity for Johnston, IA-based employees over a 10-year period. This aggregate comparison does not isolate the data to only those who participated from year to year. We made slow improvements, but not until we increased the program focus and increased staff to address this area did we begin to see a significant improvement.

Health Risk Factors	2002-03	2000-01	1999	1997	1995	1994
No Regular Exercise	37%	54%	49.5%	68.2%	69.5%	72.3%

Note: screenings were offered on an annual basis until 1995, then was changed to an every other year basis.



Progress trend reports are also monitored for employees at the field locations and compared to Johnston-based participant results (See Appendix B for Field Location Progress Report). In the progress report, changes are compared among 758 field location participants who completed the health screening between 1998-99 and again in 2002-2003 (nationwide screening is conducted between Nov - June). Maintenance or improvements were also noted in this group, but the total scores are lower than the scores of Johnston-based employees. Interestingly, the wellness factors "low alcohol use", "good coping and stress status", "happy and content" and "less than 5 sick days per year" are consistently high for both groups. This could be indicative of our supportive and health-enhancing culture corporate wide. However, the disparity in the other health factors for field employees is a concern and an increased focus as been directed to getting more resources to our field sites through initiatives such as the WorkFit fee-per-visit fitness center subsidy, stretch break program, and dedicated staff person to consult with HealthWorks site coordinators to implement more health-related programs onsite.

Based on historical data from screenings in the early 80's we have seen the incidence of smoking decrease from 35% to 6% (JOH)/13% (Field). We recognize that factors such as the smoke-free workplace policy along with less social acceptance for smoking and increased public marketing about the negative effects of smoking likely had more to do with the decrease in numbers than our programs. However, this does make a strong case for the importance of policies and support for community initiatives as well. Similarly, we have seen an increase in seat belt use from 39% to 98.8%. This can be attributed to the seat belt laws, increased public education and corporate policy regarding safety practices.

Fitness assessment data is also being monitored to evaluate improvement in health risks among fitness center members (See Appendix C). All fitness center members are required to complete a fitness assessment prior to using the center. The assessment includes measures of cardiovascular endurance, flexibility and muscle strength. At the 6-month mark from the opening of the center (10/03), re-assessments were offered to members. The re-assessment data in Appendix C represent fitness status improvement in all areas among 25% of fitness center members who volunteered to participate in the re-assessment. Ongoing re-assessment is available and encouraged among members and data is tracked utilizing the HealthCalc software program.

#### FINANCIAL OUTCOMES DEMONSTRATED BECAUSE OF THE ORGANIZATION'S WELLNESS EFFORTS

Evaluating outcomes and demonstrating program effectiveness is an important component of our program. This is critical to ensuring we are directing our resources to the areas we can have the greatest impact and designing those programs appropriately to support the desired outcome. However, we are conservative in our approach to making claims for direct financial impact

based solely on our specific interventions. We acknowledge the fact that there are many variables and contributing factors that impact health status change, health care costs, disability and injury rates, absenteeism, and job satisfaction. It's the culminating effect of our programs, resources, policies, work environment and leadership that can contribute to healthier employees. We also recognize that intangible benefits should not be overlooked. These benefits can often have a greater impact to the organization but it's difficult to attach a direct dollar figure to the outcome.

Listed below are some key outcome studies we have conducted in an attempt to measure the financial impact of our wellness efforts:

### **Managed Prevention Outcome Report**

In 1993, external consultants were hired to analyze health care claims, health risks, and program participation data and determine if there was a relationship between health risks and health care claims costs. The results of the study indicated that high risk employees (5-6+ risk factors) had 41% higher (\$2,300/year) annual health care claims than lower risk employees (0-1 risk factor) (\$669/year). (See graph in Appendix D). The study also showed that high risk employees represented 33% of all above-average claims; whereas, low risk employees represented 16.5% of above average claims.

In addition, the study provided a chart (Appendix E) that estimated health care claims cost and potential savings based on reducing health risks. This data served as a guide for focusing resources toward interventions that would reduce the highest cost health risks.

### **HealthMetrics Analysis**

In 1997, external consultants were hired to analyze medical claims history, health risks, demographics and the current wellness program. Based on the analysis, recommendations were made for cost effective interventions and key target areas by major diagnostic categories and health risks. An example of cost savings calculated using measure guidelines from the HealthMetrics analysis is listed below:

A conservative savings of \$47,000 in medical costs and productivity costs from 25-30 smokers kicking the habit each year based on the Healthmetrics analysis measures. Consistently, we have approximately 25-30 new participants in our Cut Out Tobacco program who have quit smoking.

A four-year projection of medical costs was also provided to measure against actual costs rather than evaluating impact retrospectively. The projections were computed based on several

contemporary inflationary indices in addition to Pioneer's past health care cost percentage increases. The graph in Appendix F shows Pioneer's actual costs compared to HealthMetric's projected costs. While our health care costs have continued to rise, consistent with national trends, our actual costs were well below the projection. Again, we recognize there are a number of variables that impact health care cost but we believe our HealthWorks program has been a contributing factor in managing costs.

### **Medical Self-Care Training**

In 1994, an increased focus began on medical self-care and health care consumer skills. A medical self-care training program was conducted for all employees nationwide. A 6-month follow-up survey was distributed to all participants to determine if they were applying the knowledge, skills, and resources provided in the training. A savings of approximately \$30,000 was calculated based on the number of responses to the survey that indicated they had applied appropriate medical self-care or consumer skills to avoid costs in the following areas: doctor visits, prescription medication, lab and x-ray tests, emergency services, surgeries or special procedures, and hospitalization.

A continued focus on medical self-care and health care consumer skills have remained a part of our program through follow-up trainings, access to nurseline, articles in newsletters, bulletin board displays, website resources, and distribution of medical self-care books to all new members to our medical plans.

### **High Risk Cardiovascular Intervention**

An intensive, 6-month lifestyle change program was implemented for a pilot of 10 employees with cardiovascular disease. Pioneer partnered with Mercy Medical Center to conduct a modified version of the Dr. Dean Ornish Reversing Heart Disease program at the worksite. The program was evaluated to determine if an intensive, targeted risk management program was effective in changing lifestyle behaviors, improving health outcomes, and reducing medical costs. An immediate cost savings was realized based solely on the fact that we reduced the cost of the program from the \$3500/participant hospital-based fee to \$1000 per participant for the modified worksite program.

The results of the program showed improved health status at the 6-month and 1-year mark (See Attachment G). Unfortunately, a five-year assessment was not conducted because half of the participants had since retired or left the company. The participants still working at Pioneer are actively involved in the fitness center and yoga classes and report continued adherence to the program, although modified somewhat to fit their lifestyle and maintain long-term. A medical claims study was also conducted and showed a \$7800 decrease in medical costs (doctor visits,

ER visits and prescription costs) from the year prior to the intervention compared to the year following the intervention. Another medical claims analysis was conducted to compare medical costs of participants compared to non-participants with cardiovascular-related claims at one year prior and one year after intervention. A significant difference is demonstrated in the graph in Appendix H. We realize, though, many variables impact medical costs and this difference could be related to any number of factors.

### **Worksite Flu Vaccinations**

As part of our demand management strategy, flu vaccinations at the worksite are offered on an annual basis to employees and spouses. Medical coverage for flu vaccinations is included in our medical plans for employees and retirees, too. Financial impact of the worksite flu vaccination was calculated based on a study that estimated savings of \$46.85/ee that received the immunization. The study factored in savings from medical costs, absenteeism, and lost productivity. In 1998 we had approximately 450 employees receive flu vaccinations. In 2003, we had approximately 1500 employees receive the vaccination at the worksite. We conservatively estimated a savings of \$20,000 based on preventing the flu for 50% of those immunized using the \$48.85 per employee figure. This amount does not include cost savings related to lost work time that would've been incurred if the employee took 2 hours from work time to receive the vaccination rather than the 5 minutes to receive it at work.

### **Fitness Center Cost/Benefit Threshold**

During the development process of the Pioneer Health & Fitness Center a cost/benefit threshold chart was created to estimate the level of membership needed to offset the cost of the center. This was based utilizing data from the MPO study discussed earlier in this section which estimated medical cost savings by increasing the number of employees that exercised on a regular basis. The cost savings was adjusted at a 5% claims inflation rate. This was data used to establish membership goals and did not factor in the other potential benefits gained from the onsite center. (See Appendix I for the Projections for Claim Benefit Reduction Through Exercise Chart)

### **HOW THE COMPANY'S WELLNESS INITIATIVE HAS ADVANCED THE ORGANIZATION'S BUSINESS OBJECTIVES**

The three examples provided below reflect how our recent wellness initiatives have influenced the business objectives at several levels within the organization. All three initiatives were designed to ensure a healthy, productive and energetic workforce thereby supporting our business strategy.

## I. GROW THE BUSINESS WITH SUSTAINABLE HIGH PERFORMANCE.

In October 2002, Preventive Health Services sponsored Danielle Pratt, author of *The Healthy Scorecard*, to present for the WCCI and as a consultant to Pioneer. We arranged for Danielle to meet with our Human Resources team including the Vice President of Human Resources, the leadership team and all other interested team members. In addition, a follow-up meeting was scheduled with key HR members and other stakeholders throughout Pioneer. The focus of the presentations and meetings was to educate and motivate these members on the importance of an employee opinion survey as a measure of human capital and organizational health. While the development of such a survey is still underway, its importance has continued to evolve throughout the organization at all levels. Preventive Health Services remains instrumental in sustaining the driving force to keep the concept moving forward. Through the leadership and guidance of Preventive Health Services, the survey is now housed in the newly established Organizational Effectiveness department of Human Resources. It is being considered as a measurement tool for organizational effectiveness, employee satisfaction and organizational health. In addition, DuPont headquarters has expressed interest in the design, implementation and follow up of the survey as well as how it may be utilized throughout all of DuPont.

## 2. ATTRACT AND RETAIN A WORLD-CLASS WORKFORCE.

In the June 2004 issue of *The Scientist*, Pioneer was identified as the number one "Best Places to Work in Industry" through a reader's survey. The survey identified several Pioneer programs, policies and services that influence the "caring" work environment established at Pioneer as well as our marketability to potential employees. Several of the programs and services mentioned in the survey results that impact the engagement of the employees at Pioneer are provided by the Preventive Health Services "HealthWorks" program. These include, but are not limited to, the onsite fitness facility, fitness classes, on-line nutrition counseling and incentive programs. The following article was recently published in the *Des Moines Business Record Daily*.

### **Pioneer rated top workplace**

The *Scientist* magazine has rated Pioneer Hi-Bred International Inc. as the No. 1 place to work in industry for the second year in a row. The *Scientist's* Best Places to Work in Industry survey aims to define what attracts highly talented workers to a company, and what initiatives keep those workers happy once they sign on. A Web-based survey asked industry-based readers of *The Scientist* to assess their work environments and experience against 46 criteria. Pioneer was recognized for offering family-friendly flextime, including assistance with parental leave, child care, elder care and adoptions, well as implementing other programs to help employees balance their personal and working lives. Pioneer also ranked high for offering

alternatives to the standard work schedule, location and structure of positions.

Additionally, Pioneer's corporate climate promoting healthy lifestyles factored into its rating. The headquarters has a gym on site and a "health-works program" that provides resources to help workers learn how to reduce stress and eat healthfully. The company also has a community investment program in which it matches employees' charitable contributions and provides time off for employees to volunteer in the community.

### 3. ENSURING A SAFE ENVIRONMENT WHILE MANAGING TOTAL COSTS (HEALTH CARE, INJURY, WORKERS COMPENSATION, ETC.)

The Preventive Health Services Strategic Direction 2002-2005 determined there was a need for interventions that addressed back health, musculoskeletal injury and physical activity, especially for Pioneer employees in remote locations throughout the US. Therefore, several initiatives were implemented to address these needs. They included: 1) a more concentrated effort to more effectively impact the higher health risk scores of Pioneer employees and their spouses that completed the health screening assessment every other year; 2) development and implementation of a WorkFit program that provided an affordable fitness resource to employees on a fee-per-visit basis as a comparable alternative to the Johnston facility; and, 3) an integrated approach with Safety and Risk Management to provide a "Best Practices" standard for back health, proper lifting techniques and stretching/injury prevention trainings. These programs are influential in supporting and enhancing our business goal of "zero injuries, illnesses and incidents" in creating a safe and healthy work environment.

## **Section Four:**

### **Lessons Learned**

The fourth section of the Platinum Award application should provide the reviewer with the practical, real life lessons learned in the trenches of worksite wellness. Specifically, the most important learning opportunities should be articulated in this section. In addition, your recommendations for other practitioners in the field of health promotion should also be presented. Please limit your discussion to approximately four typewritten pages.

SECTION FOUR:

## LESSONS LEARNED

*All I really need to know about health promotion, I learned in the field...*

### *I. CULTIVATE A CULTURE OF SUPPORT*

One of the most critical aspects of keeping wellness thriving in a corporation is creating a culture that supports and encourages health. The key to changing the culture from top to bottom is having the importance of health and well being in writing and frequently expressed from executive level management. They may not always be available to provide support in person, but having the message communicated throughout the organization is just as critical.

It is also important to remember that the support cannot stop at the executive level. Managers must approve and encourage employees to take time for their health. It is well known that "employees leave managers, not the organization"...getting and keeping management support is vital to the success of the programs and health of the employees.

The adage "if you build it, they will come" also applies in this case. You have to build the programs, services and environment that support all employees. When you offer what is needed, the employees develop greater appreciation for themselves, their health and the health of the organization. Program participation will reflect this.

Influencing organizational health can sometimes impact the health of the employee more than blood pressure readings, cholesterol screenings, and weight management. Therefore, wellness professionals must be willing to get more involved in influencing the business to address the more difficult issues that create a health enhancing culture, such as job satisfaction, supervisory support, balance between demands and control, sense of belonging and meaning, and physical working conditions. We must step outside the traditional boundaries of wellness to provide consultation and support for this type of culture development. Taking this kind of initiative may have the greatest impact on the organization's health; more so than any other interventions you provide.



## 2. KNOW THE LAY OF THE LAND

It is important that health professionals not only know wellness, but also know their organization's business - its people, operations and customers. Know what is going on in your business, what your leaders find important, who your champions are, the financial status and economy, what the business cycle is, when it is a good time to push new ideas and when to hold - timing is everything!

Well designed health promotion programs must be planned like a business. Development of a 3, 5, or 10-year plan should be put in writing and carefully thought out. It is important to have guiding principles, overall vision, mission, goals and strategies. However, keep in mind that in the real world the business environment can change and the 5-10 year plan will quickly become obsolete. Be flexible and adaptable to the changing business strategy. Stay in the loop by being knowledgeable of sudden and critical changes with the organization's business. For example, in the last 10 years, we have had five different Directors of Benefits and Compensation, four different VP's of HR and five different CEO's with varied beliefs that influenced how we operated.

Align your goals and strategies to the business strategy. Show how valuable and critical the wellness programs and services are in helping the organization realize it's goals.

Learn the language of the business. Health promotion terminology is well and good, but many times our importance is overlooked because we aren't talking in the business language. Know what words, terms and concepts get management's attention - speak their language.

Evaluate your programs and services. There is no better way to know what to provide for employees and what strategy to take than to have valid data to guide those decisions. As with learning the language, you also need to find out what other tools business units within your organization are using to report outcomes and value to the business. And remember, "Sometimes the things that matter most can't always be counted". Be realistic in your expectations on what you can document with exact numbers and what may be difficult to prove in health promotion, especially at the Six Sigma level.

## 3. WALK YOUR FIELDS

Listen, listen, and listen again. Be willing not only to hear, but also to understand your employees and your leadership team. The two will not always agree so finding a balance among the conflict is necessary. However, if we miss the employee's message completely, the value of our programs will diminish over time.

Provide varied options with everything you offer such as marketing techniques, topics for programming, delivery of services, etc. Marketing to your employee population is critical - be creative, modify ideas from professional advertisements, brochures, posters, etc., use various modes, and promote well in advance. People are bombarded with information daily. If you want to grab their attention, you must have unique ideas presented with new eye catching angles.

Always set out to exceed expectations. It is required that we deliver as promised, with quality and on time; but when you exceed expectations, you create the energy and excitement of the program and gain respect as a professional. In order to achieve this you must be willing to take chances - try something new and outrageous and go the extra mile! It can be draining at times but by keeping things interesting and colorful; it will also keep it fun and enticing.

#### *4. HARVEST YOUR TRUE POTENTIAL*

If we truly value health, then our focus must be holistic in nature. Include family, caring, support, compassion, connectedness and life satisfaction. Without these aspects we will be missing the target. Even the most physically healthy individual can have health complications related to emotions and life stresses.

We must be willing to build relationships whenever the opportunity arises. By allowing ourselves to listen and let employees share their stories, challenges and successes...we provide the greatest service of all. Only through listening to employees and establishing trusting relationships will we be able to guide employees to the best solution for them.

Most health promotion professionals have not been taught how to deal with the "tough personal issues" we face when working with others. These include the emotional and psychosocial aspects of our lives and the impact they have on our physical health. We need to learn from other professions and refer to other professions when the situations arise... and they will! If an individual's health is our main concern, then we should be willing to do whatever it takes to help create a more fulfilling life, even if it means letting go of the nutrition counseling in favor of referring to family counseling.

Learn to "be there" for our employees. We are all busy with many tasks to complete. Remember to give each person your complete attention and be there for him/her. It doesn't always mean solving the problem, it may mean just listening.

## 5. SOW YOUR BEST SEED

Focus on the basics and keep them solid throughout the life of your program. Our field has shifted in many different directions over the years, but there are a few basics that always stay the course. People need information on physical activity, nutrition, relationships, self-care and healthy environments. Provide quality information that makes sense and the programming to support it. This foundation will be the basis for all other interventions - stick to it.

Once you have the foundation set, you then have the opportunity to explore other avenues of interest. And, you will be more capable of providing a variety of other services, either as complementary or stand-alone programs, without jeopardizing the integrity of the whole program.

## 6. DON'T WORK IN A SILO

Seek as many opportunities as possible to integrate health in the business. Find the hot spots, determine how health supports that area and get involved rather than waiting to be asked or invited. Sometimes the business doesn't always make the connection with how the health and well being of the employee can impact the business outcome of a process. Network with employees at all levels throughout the organization. Be visible and accessible outside your work area.

Look for opportunities to leverage off of the skills and knowledge of others inside and outside your organization. Often the role of health promotion professionals is to be the "jack of all trades"; but there are others around you that have expertise in marketing, design, sales, statistics, finance, communication and health/safety areas. Use them! Furthermore, be willing to share and ask ideas from colleagues in the field.

Reach out to the community by sharing your knowledge and resources. Partner with the Wellness Council and other players in the community such as, policy makers, city municipalities, businesses, health care industries, and educational institutions to support health and well-being to all citizens. It's one thing to make your own employees healthy, but to create an environment that supports healthy lifestyles the whole community must be educated, informed and supported.

## Vision for Health in The New Millennium

The fifth and final section of this application requires that the developers provide and articulate the vision for health in the new millennium. Specifically, this vision must incorporate the following elements:

- ◆ A short statement that accurately captures the organization's intent for protecting employee health and well-being and at the same time advancing business objectives.
- ◆ The BHAGS (big, hairy, audacious goals) that will drive your company's efforts. The BHAGS should figuratively reach out and engage employees, managers, executives, and shareholders. The BHAGS must be tangible, energizing, and highly focused. Above all the organization's BHAGS must be bold in distinguishing the company as one of America's Healthiest.
- ◆ The resources that will be allocated to systematically accomplish the proposed objectives.
- ◆ The outcomes that will be achieved and how the company will declare victory in this next phase of their worksite wellness initiative.

SECTION FIVE:

## VISION FOR HEALTH IN THE NEW MILLENNIUM

Pioneer's "Long Look" Philosophy has sustained the company since 1952 and our core values will continue to guide us into the new millennium. Not only do we have a vision statement to "...create an improved, sustainable lifestyle for people worldwide", but one of our core values declares that "We strive to deal honestly and fairly with our employees..." This philosophy in conjunction with our core values guides everything we do at Pioneer. Knowing our people are our greatest asset, Pioneer is committed to maximizing the safety, health and potential of our employees, now and in the future. In addition, our parent company, DuPont, takes this challenge to a new level in their vision statement:

*"To be the world's most dynamic science company, creating sustainable solutions essential to a better, safer, healthier life for people everywhere."*

The core values of safety and health, environmental stewardship, ethics and respect for people have not only remained constant since its inception but continue to provide the cornerstone from which Pioneer will build their high-performing, motivated world-class workforce.

Our vision for health in the new millennium is best summarized in the following communication from Richard Wilder, Chief Medical Officer, DuPont.

*"Our vision is 'Optimal Health for the People of DuPont.'  
Our goal is to maximize business performance through  
healthy, productive, energized people  
and the effective management of environmental,  
or work related, health issues.  
Employees are the most important assets of the Company,  
and their health and well-being are critical to business success."*

THE BHAGS (BIG, HAIRY, AUDACIOUS GOALS) THAT WILL DRIVE YOUR COMPANY'S EFFORTS.

Being a leader in the Agriculture and Nutrition Industry, Pioneer has the opportunity to dramatically influence the health of the world. We strive daily to more effectively align our goals and strategies to enhance not only the health of our employees but for all people throughout the world. As one example of this vision for a healthier world, in 2003, DuPont agreed to fund a three-year project with A Harvest Foundation in Africa to help lift about 10,000 families out of poverty through training in sustainable farming methods. Pioneer will continue to provide the leadership necessary to make our organization one of America's Healthiest through the following:

Our programs and services will strive to reflect the Agriculture and Nutrition brand promise that "We will feed the world."

We will support and complement efforts to "Attract and retain a high-performing, motivated world-class workforce."

We will "unleash the potential of our people" to ensure sustainable growth.

We will relentlessly "pursue a goal of zero injuries, illnesses and incidents" by providing and maintaining the safest and healthiest work environment.

As an integral part of Pioneer's total compensation and rewards package, the Preventive Health Services program is in alignment with these goals through the following objectives:

Expand the scope of the wellness program over the next five years to provide support, education and resources to our international locations.

Create and implement an employee opinion survey that will be used as one measure for our people managing processes across Pioneer.

Utilize an integrated approach to managing the total cost of health care in relation to people practices by identifying and providing a comprehensive evaluation of total employee health and productivity and its impact to the business.

Integrate with Safety and Risk Management to provide programs, trainings and resources in physical activity, flexibility and back care to enhance the safety and health of our workforce throughout the US, Canada and world-wide.

Extend membership availability for the on-site employee Health and Fitness center to family members and retirees.

Enhance our "caring environment", in which our employees truly value Pioneer as the best place to work.

THE RESOURCES THAT WILL BE ALLOCATED TO SYSTEMATICALLY ACCOMPLISH THE PROPOSED OBJECTIVES.

As we strive to obtain our ultimate challenge of sustainable growth, maximal effort will be expected from our employees. Therefore, we must be dedicated to enhancing our people capabilities, competencies and growth for a superior workforce. Pioneer will be committed to providing employees with the tools and resources necessary to get the job done. In supporting this effort, Preventive Health Services has added two experienced part-time employees and an on-site fitness facility with two full-time contracted staff. In the future we will leverage off the members of our Human Resource team and our technology support team. We will continue to integrate our services with other related departments such as Safety and Risk Management, Learning and Development, Community Investments and Corporate Services. Finally, financial resources will be allocated to fund those services that align with the business strategy.

THE OUTCOMES THAT WILL BE ACHIEVED AND HOW THE COMPANY WILL DECLARE VICTORY IN THIS NEXT PHASE OF THEIR WORKSITE WELLNESS INITIATIVE.

Our anticipated outcomes from these efforts include the following:

1. A high-performing, motivated and creative world-class workforce.
2. An enhanced "caring" work environment, in which our employees are encouraged and supported to lead healthy, productive lives so they can realize their full potential.
3. Greater productivity in combination with other people practices measured by a higher return on payroll as related to sales and profit.
4. A reinforcement of our brand identity throughout the culture of Pioneer "we take the extra step" in health, safety, quality, etc.

It will be difficult to declare a victory, for the victory never ends. Pioneer has an ever-increasing mission of striving for the ultimate challenge - sustainable growth. We will know we are close when we have realized the full potential of our greatest asset...our people...leading to a sustainable business advantage.

APPENDIX A

GROUP PROGRESS REPORT DES MOINES/JOHNSTON

APPENDIX A

GROUP PROGRESS REPORT  
DES MOINES/JOHNSTON



# PWP Group Progress Report

Pioneer Hi-Bred International, Inc.

*The Group Progress Report documents health changes made since the last testing session. Group test results for the previous and current testing sessions are shown together. Values shown are the number and percent of people who rate "Good" to "Excellent" in the Wellness Factors and clinical tests listed.*

**This group** consists of 1,109 people (521 men, 588 women). Positive changes, as well as areas still needing improvement, are listed below.

**-- Positive Changes --**

At least 665 people (60.0%) achieved "Good" to "Excellent" in each of the following wellness factors.

- ★ Reduced coronary risk
- ★ Handling stress better
- ★ Improved substance use
- ★ Improved safety habits
- ★ Smoking/tobacco use
- ★ Drinking less alcohol
- ★ Lower cholesterol
- ★ Lower blood pressure
- ★ Improved body composition
- ★ Better seat belt use
- ★ Improved happiness
- ★ Improved sleep habits
- ★ Fewer sick days

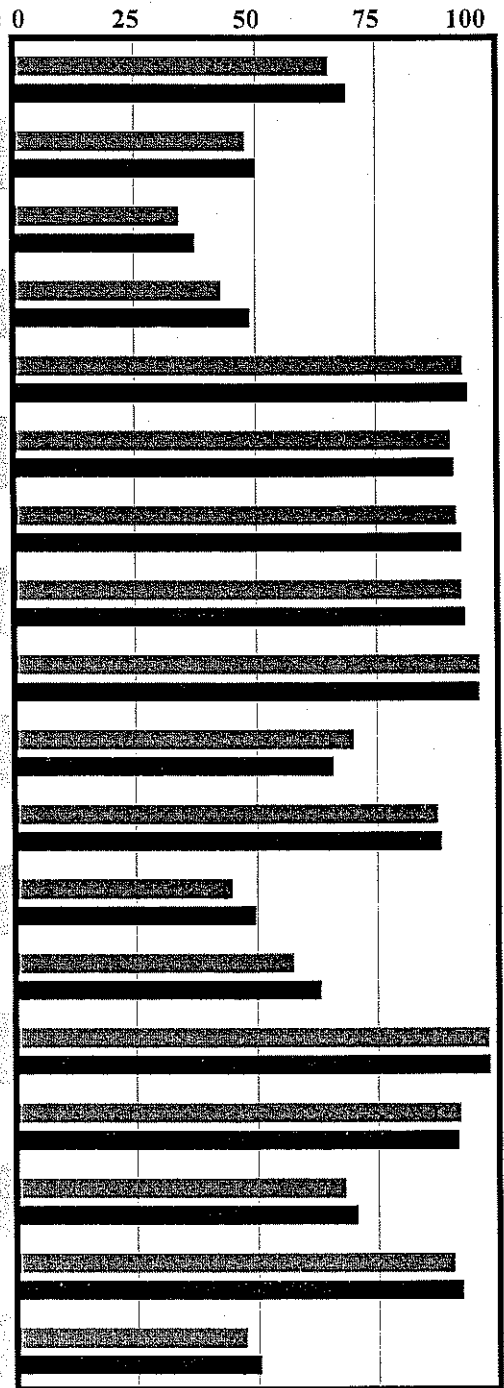
**-- Needing Improvement --**

Less than 665 people (60.0%) achieved "Good" to "Excellent" in the following wellness factors.

- ✓ Cancer risk
- ✓ Nutrition status
- ✓ Fitness status
- ✓ Aerobic activity

	Number	Percent	Avg. Sc
Low coronary risk	726 / 767	65.5% / 69.2%	56 / 58
Low cancer risk	531 / 556	47.9% / 50.1%	53 / 54
Good nutrition status	378 / 415	34.1% / 37.4%	50 / 51
Good fitness status	476 / 543	42.9% / 49.0%	44 / 47
Good coping and stress status	1,038 / 1,050	93.6% / 94.7%	78 / 79
Good substance use status	1,009 / 1,017	91.0% / 91.7%	89 / 89
Good safety status	1,022 / 1,035	92.2% / 93.3%	82 / 84
Nonsmoker, avoids tobacco	1,034 / 1,042	93.2% / 94.0%	91 / 91
No or low alcohol use	1,074 / 1,074	96.8% / 96.8%	87 / 87
Good cholesterol status*	780 / 732	70.5% / 66.1%	64 / 62
Good blood pressure	972 / 981	88.0% / 88.8%	72 / 74
Good aerobic exercise score	497 / 551	44.8% / 49.7%	43 / 45
Good weight status	638 / 703	57.5% / 63.4%	56 / 60
Wears seat belts regularly	1,093 / 1,096	98.6% / 98.8%	96 / 97
Happy and content	1,028 / 1,023	92.7% / 92.2%	69 / 70
Adequate sleep, 7-8 hour per day	757 / 785	68.4% / 71.0%	
Less than 5 sick days per year	1,012 / 1,032	91.3% / 93.1%	
Doing Well	527	47.5%	55
Overall Wellness	560	50.5%	57

**% Rating Good to Excellent**



Previous: 12/96 to 01/02  
 Current: 10/02 to 12/02

\* LDL and HDL, if tested, may influence the overall cholesterol score.

APPENDIX B

## GROUP PROGRESS REPORT FIELD LOCATIONS

APPENDIX B

GROUP PROGRESS REPORT  
FIELD LOCATIONS

# PWP Group Progress Report

Pioneer Hi-Bred International, Inc.

*The Group Progress Report documents health changes made since the last testing session. Group test results for the previous and current testing sessions are shown together. Values shown are the number and percent of people who rate "Good" to "Excellent" in the Wellness Factors and clinical tests listed.*

**This group** consists of 758 people (507 men, 251 women). Positive changes, as well as areas still needing improvement, are listed below.

**-- Positive Changes --**

At least 455 people (60.0%) achieved "Good" to "Excellent" in each of the following wellness factors.

- ★ Handling stress better
- ★ Improved substance use
- ★ Improved safety habits
- ★ Smoking/tobacco use
- ★ Drinking less alcohol
- ★ Lower blood pressure
- ★ Better seat belt use
- ★ Improved happiness
- ★ Improved sleep habits
- ★ Fewer sick days

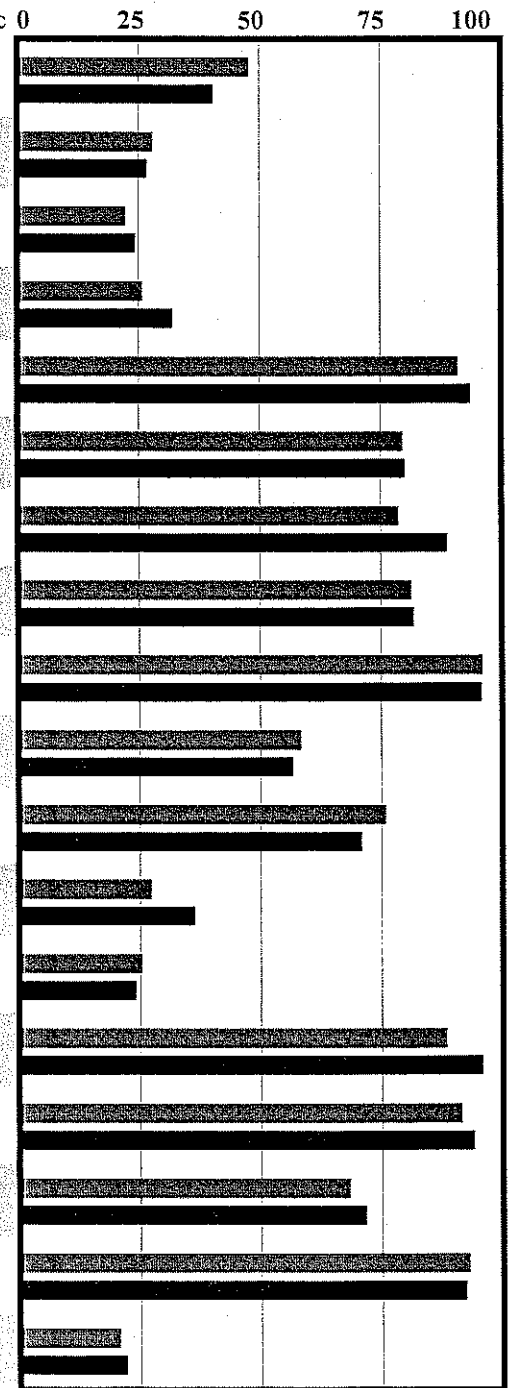
**-- Needing Improvement --**

Less than 455 people (60.0%) achieved "Good" to "Excellent" in the following wellness factors.

- ✓ Coronary risk
- ✓ Cancer risk
- ✓ Nutrition status
- ✓ Fitness status
- ✓ Blood cholesterol levels
- ✓ Aerobic activity
- ✓ Body composition

	Number	Percent	Avg. Sc
Low coronary risk	363 / 306	47.9% / 40.4%	45 / 40
Low cancer risk	210 / 201	27.7% / 26.5%	46 / 46
Good nutrition status	166 / 182	21.9% / 24.0%	41 / 44
Good fitness status	193 / 241	25.5% / 31.8%	34 / 38
Good coping and stress status	694 / 715	91.6% / 94.3%	78 / 80
Good substance use status	606 / 610	79.9% / 80.5%	83 / 83
Good safety status	599 / 677	79.0% / 89.3%	73 / 80
Nonsmoker, avoids tobacco	619 / 623	81.7% / 82.2%	81 / 82
No or low alcohol use	732 / 731	96.6% / 96.4%	87 / 86
Good cholesterol status*	436 / 423	58.6% / 56.9%	55 / 55
Good blood pressure	563 / 526	76.2% / 71.2%	64 / 61
Good aerobic exercise score	205 / 274	27.0% / 36.1%	32 / 38
Good weight status	190 / 180	25.1% / 23.7%	38 / 39
Wears seat belts regularly	674 / 731	88.9% / 96.4%	83 / 89
Happy and content	698 / 718	92.1% / 94.7%	69 / 71
Adequate sleep, 7-8 hour per day	520 / 544	68.7% / 71.9%	
Less than 5 sick days per year	709 / 704	93.7% / 93.0%	
Doing Well	154	20.3%	42
Overall Wellness	165	21.8%	44

**% Rating Good to Excellent**



Previous: 11/98 to 06/99  
 Current: 11/02 to 06/03

\* LDL and HDL, if tested, may influence the overall cholesterol score.

APPENDIX C

FITNESS RE-ASSESSMENT DATA

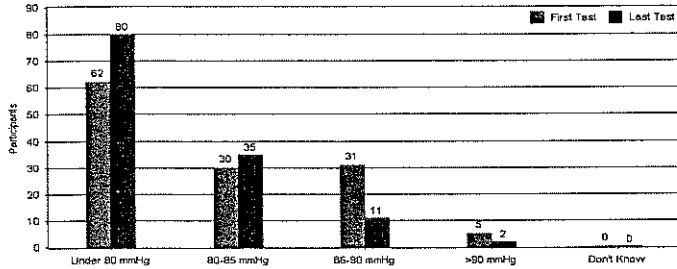
APPENDIX C

FITNESS RE-ASSESSMENT  
DATA

# Fitness Re-Assessment Data

## Diastolic BP

### Participant Distribution



Sample Size: 128

Average (first test): 80 mmHg

Average (last test): 78 mmHg

Range (first test): 58-100 mmHg

Range (last test): 62-98 mmHg

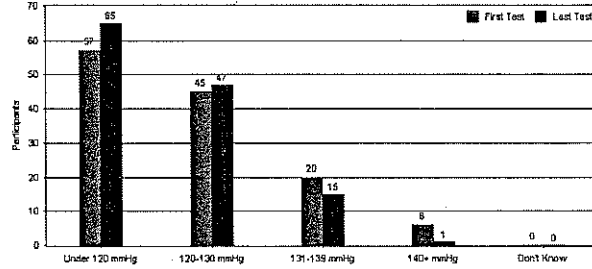
Standard Deviation (first test): 7 mmHg

Standard Deviation (last test): 6 mmHg

	Under 80 mmHg	80-85 mmHg	86-90 mmHg	>90 mmHg	Don't Know
No. (first test)	62	30	31	5	0
% (first test)	48.40%	23.40%	24.20%	3.90%	0.00%
No. (last test)	80	35	11	2	0
% (last test)	62.50%	27.30%	8.60%	1.60%	0.00%

## Systolic BP

### Participant Distribution



Sample Size: 128

Average (first test): 121 mm

Average (last test): 121 mmHg

Range (first test): 98-148 mmHg

Range (last test): 98-142 mmHg

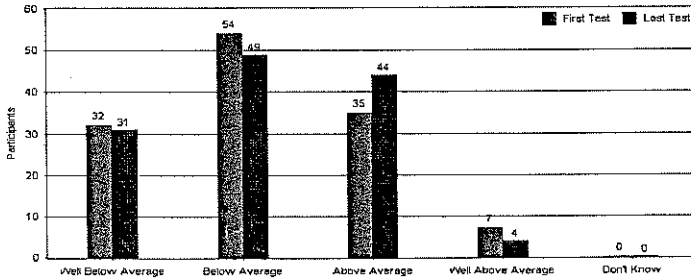
Standard Deviation (first test): 11 mmHg

Standard Deviation (last test): 9 mmHg

	Under 120 mmHg	120-130 mmHg	131-139 mmHg	140+ mmHg	Don't Know
No. (first test)	57	45	20	6	0
% (first test)	44.50%	35.20%	15.60%	4.70%	0.00%
No. (last test)	65	47	15	1	0
% (last test)	50.80%	36.70%	11.70%	0.80%	0.00%

## Body Comp. Classification

### Participant Distribution

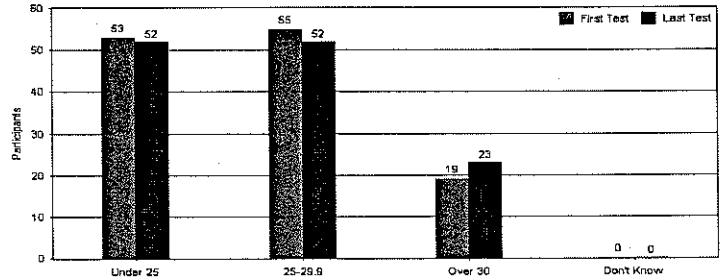


Sample Size: 128

	Well Below	Below Average	Above Average	Well Above	Don't Know
No. (first test)	32	54	35	7	0
% (first test)	25.00%	42.20%	27.30%	5.50%	0.00%
No. (last test)	31	49	44	4	0
% (last test)	24.20%	38.30%	34.40%	3.10%	0.00%

## Body Mass Index

### Participant Distribution

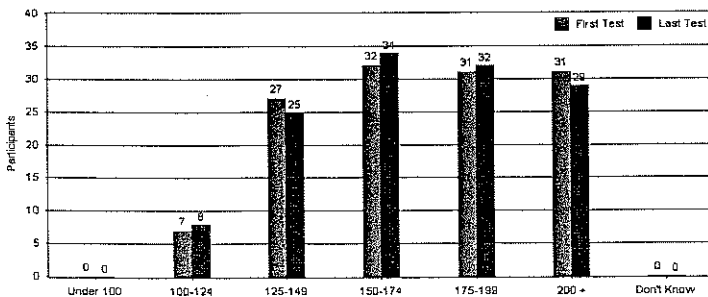


Sample Size: 128

	Under 25	25-29.9	Over 30	Don't Know
No. (first test)	53	55	19	0
% (first test)	41.40%	43.00%	14.80%	0.00%
No. (last test)	52	52	23	0
% (last test)	40.60%	40.60%	18.00%	0.00%

## Body Weight

### Participant Distribution



Sample Size: 128

Average (first test): 173 lbs

Average (last test): 173 lbs

Range (first test): 105-275 lbs

Range (last test): 106-282 lbs

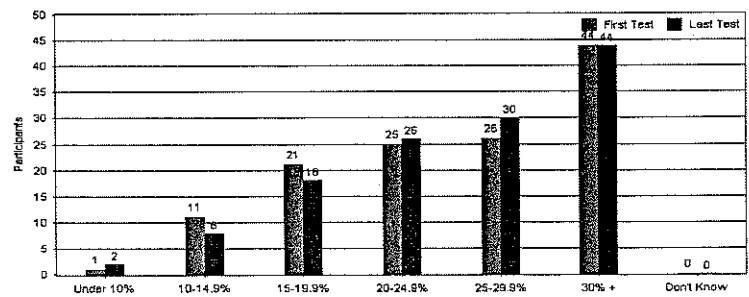
Standard Deviation (first test): 33 lbs

Standard Deviation (last test): 33 lbs

	100-124	125-149	150-174	175-199	200+
No. (first test)	7	27	32	31	31
% (first test)	5.50%	21.10%	25.00%	24.20%	24.20%
No. (last test)	8	25	34	32	29
% (last test)	6.30%	19.50%	26.60%	25.00%	22.70%

## Percent Fat

### Participant Distribution



Sample Size: 128

Average (first test): 26.7 %

Average (last test): 26.5 %

Range (first test): 8.9-50.3 %

Range (last test): 8.6-47.3 %

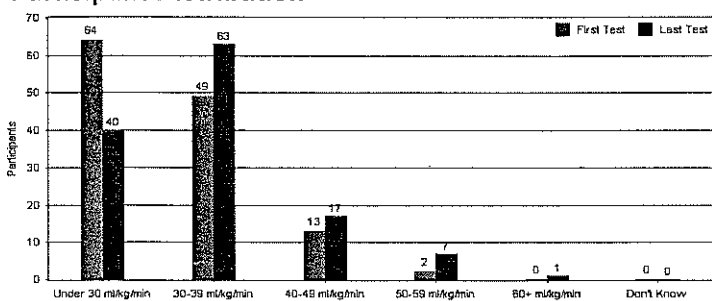
Standard Deviation (first test): 8.7 %

Standard Deviation (last test): 8.2 %

	Under 10%	10-14.9%	15-19.9%	20-24.9%	25-29.9%	30%+
No. (first test)	1	11	21	25	26	44
% (first test)	0.80%	8.60%	16.40%	19.50%	20.30%	34.40%
No. (last test)	2	8	18	26	30	44
% (last test)	1.60%	6.30%	14.10%	20.30%	23.40%	34.40%

# Aerobic Capacity (Max VO2)

## Participant Distribution



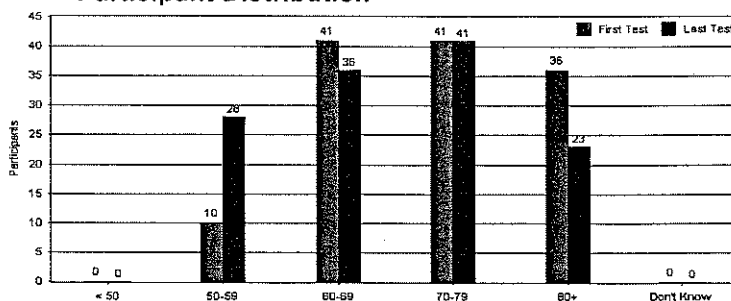
Sample Size: 128

Average (first test): 30.5 ml/kg/min      Average (last test): 34.0 ml/kg/min  
 Range (first test): 5.8-58.4 ml/kg/min      Range (last test): 18.2-62.6 ml/kg/min  
 Standard Deviation (first test): 8.3 ml/kg/min      Standard Deviation (last test): 8.3 ml/kg/min

	Under 30 ml/kg/min	30-39 ml/kg/min	40-49 ml/kg/min	50-59 ml/kg/min	60+ ml/kg/min
No. (first test)	64	49	13	2	0
% (first test)	50.00%	38.30%	10.20%	1.60%	0.00%
No. (last test)	40	63	17	7	1
% (last test)	31.30%	49.20%	13.30%	5.50%	0.80%

# Resting Heart Rate

## Participant Distribution



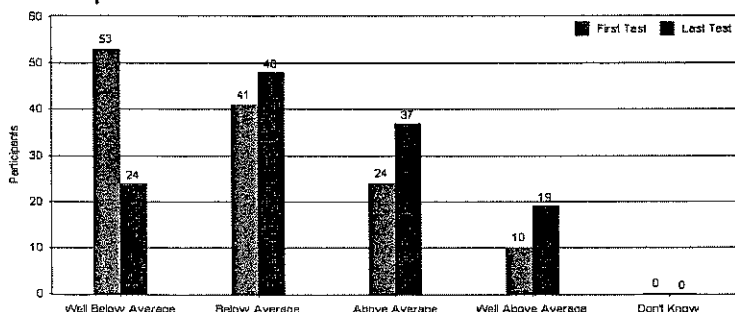
Sample Size: 128

Average (first test): 72 bpm      Average (last test): 68 bpm  
 Range (first test): 50-96 bpm      Range (last test): 50-88 bpm  
 Standard Deviation (first test): 9 bpm      Standard Deviation (last test): 10 bpm

	< 50	50-59	60-69	70-79	80+
No. (first test)	0	10	41	41	36
% (first test)	0.00%	7.80%	32.00%	32.00%	28.10%
No. (last test)	0	28	36	41	23
% (last test)	0.00%	21.90%	28.10%	32.00%	18.00%

# Aerobic Fitness Classification

## Participant Distribution

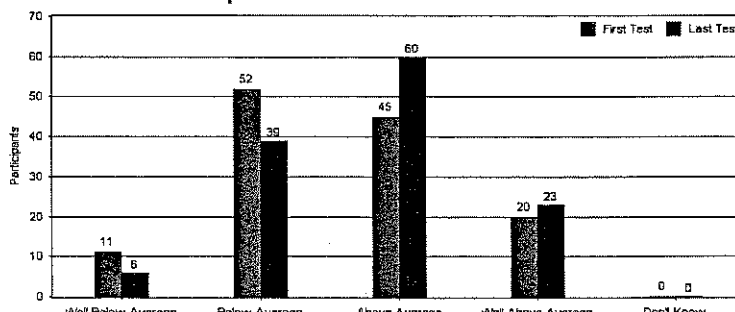


Sample Size: 128

	Well Below Average	Below Average	Above Average	Well Above Average	Don't Know
No. (first test)	53	41	24	10	0
% (first test)	41.40%	32.00%	18.80%	7.80%	0.00%
No. (last test)	24	48	37	19	0
% (last test)	18.80%	37.50%	28.90%	14.80%	0.00%

# Sit and Reach

## Participant Distribution

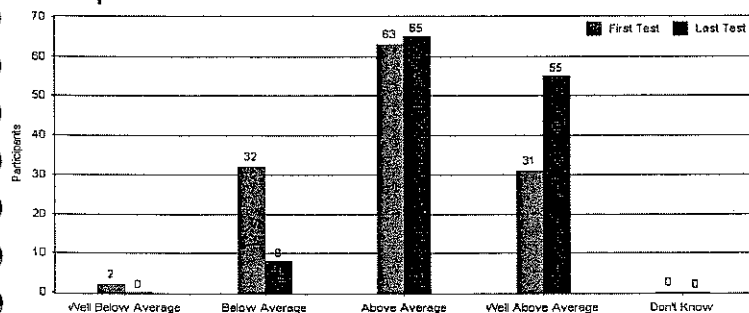


Sample Size: 128

	Well Below Average	Below Average	Above Average	Well Above Average	Don't Know
No. (first test)	11	52	45	20	0
% (first test)	8.60%	40.60%	35.20%	15.60%	0.00%
No. (last test)	6	39	60	23	0
% (last test)	4.70%	30.50%	46.90%	18.00%	0.00%

# Partial Curlup

## Participant Distribution

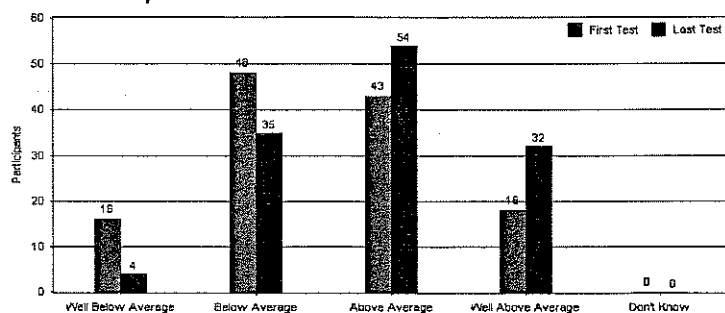


Sample Size: 128

	Well Below Average	Below Average	Above Average	Well Above Average	Don't Know
No. (first test)	2	32	63	31	0
% (first test)	1.60%	25.00%	49.20%	24.20%	0.00%
No. (last test)	0	8	65	55	0
% (last test)	0.00%	6.30%	50.80%	43.00%	0.00%

# Pushups

## Participant Distribution



Sample Size: 125

	Well Below Average	Below Average	Above Average	Well Above Average	Don't Know
No. (first test)	16	48	43	18	0
% (first test)	12.80%	38.40%	34.40%	14.40%	0.00%
No. (last test)	4	35	54	32	0
% (last test)	3.20%	28.00%	43.20%	25.60%	0.00%

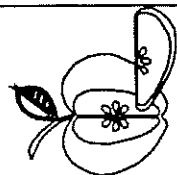
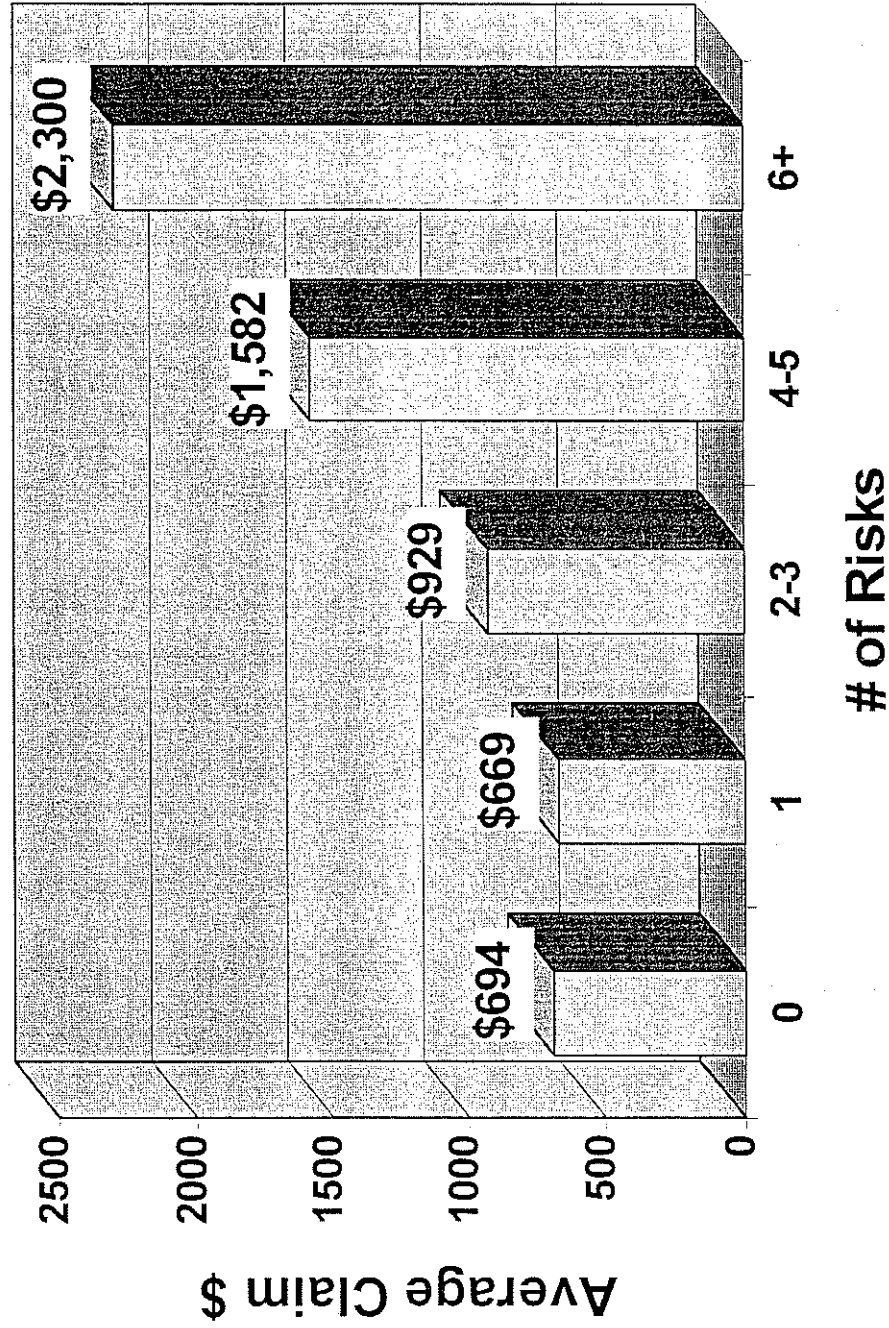
APPENDIX D

AVERAGE CLAIMS BY NUMBER OF HIGH RISKS

APPENDIX D

AVERAGE CLAIMS BY  
NUMBER OF HIGH RISKS

# Average Claims by Number of High Risks





APPENDIX E

## CLAIMS ANALYSIS BASED ON INDIVIDUAL HEALTH RISKS

APPENDIX E

CLAIMS ANALYSIS BASED ON  
INDIVIDUAL HEALTH RISKS

# Managed Prevention Outcomes Report

Report Prepared for  
Pioneer Hi-Bred  
1993 Claims - All T1 PWP Participants

Thursday, October 05, 1995  
Page - 2

## Claims Analysis Based on Individual Health Risks

Health Risk Indicator	Number of respondents with risk	Percent of respondents with risk	Average claims for respondent with risk	Average claims for respondent w/o risk	Increased average claims for risk	Potential savings for company *
No regular exercise	1070	47.0%	\$1,122	\$883	\$240	\$256,563
Smokes cigarettes	260	11.4	1,038	990	49	12,640
Seldom use seatbelts	120	5.3	1,921	944	978	117,308
Excessive body weight	247	10.9	1,418	944	474	116,985
High Cholesterol (240+, or LDL of 160+)	358	15.7	1,066	982	84	30,110
High Sys. BP (140+)	310	13.7	1,458	919	539	167,093
High Dia. BP (90+)	296	13.1	1,375	936	439	129,834
Low life satisfaction	232	10.2	1,429	946	483	112,020
High sick days (5+ per year)	319	14.0	2,777	705	2,072	660,885
Heavy drinker (21+ per week)	24	1.1	532	1,000	0	0
High stress (3+ stress signals)	77	3.4	1,091	992	99	7,642
Weekly drug use	144	6.3	2,874	868	2,005	288,744
"Health" age 4+ over "Potential"	1708	75.1	960	1,101	0	0

\* Potential savings based on the number of employees with each risk times the increased cost for that risk.

## Summary

Cost savings are estimates for individual risk factors and does not account for multiple risk factors in individuals. The next analysis chart shows increased medical claims and potential savings based on the number of risk factors a person has. This is a more accurate method. Possible cost savings are projected based on individuals reducing high risks.

NOTE: Analysis was only completed on individuals for whom claims information was available

APPENDIX F

## HEALTH CARE COST TREND

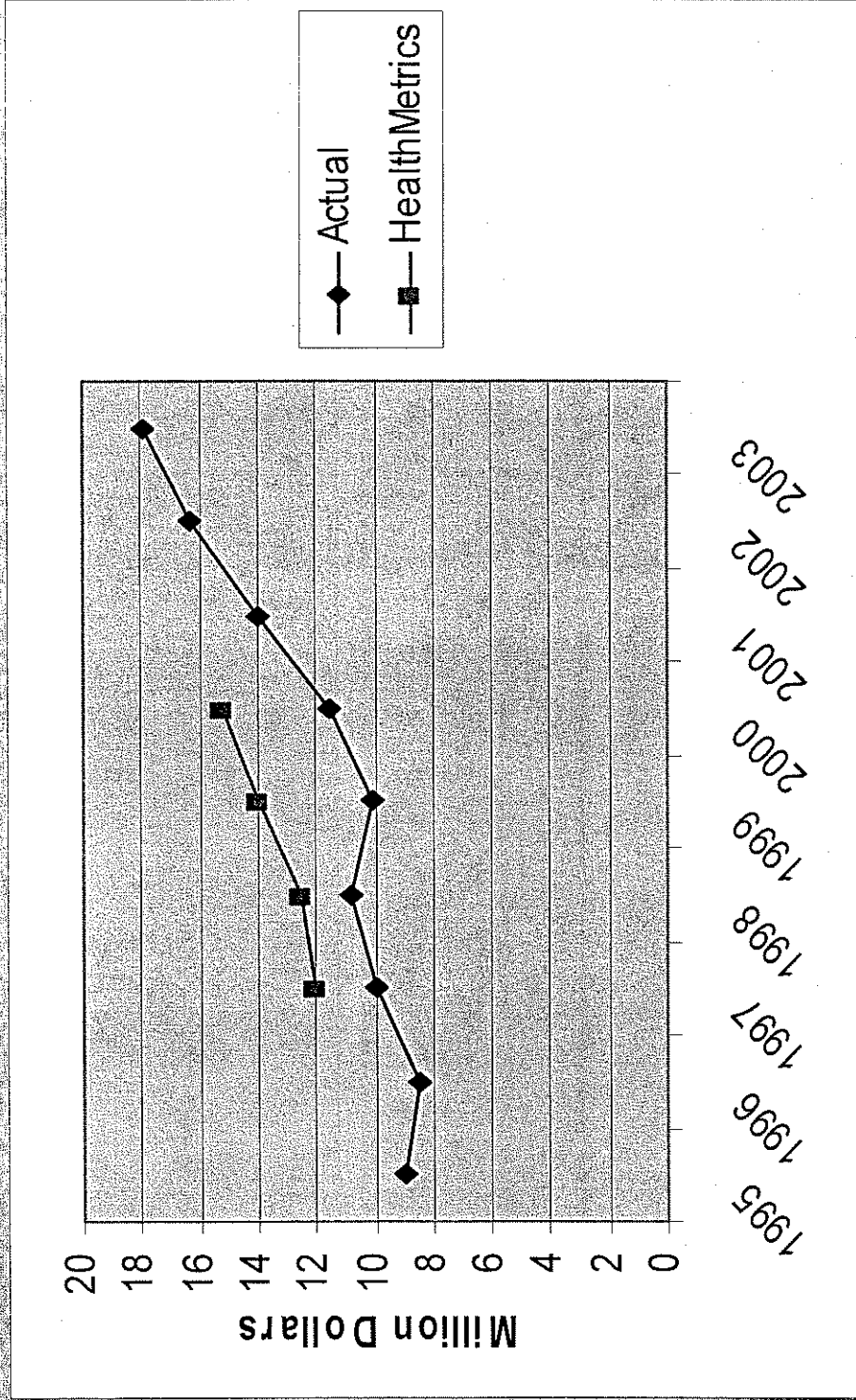
APPENDIX F

HEALTH CARE COST TREND



**PIONEER**  
A DUPONT COMPANY

# Health Care Cost Trend



*The miracles of science*

APPENDIX G

## ORNISH PROGRAM OUTCOMES

APPENDIX G

ORNISH PROGRAM OUTCOMES

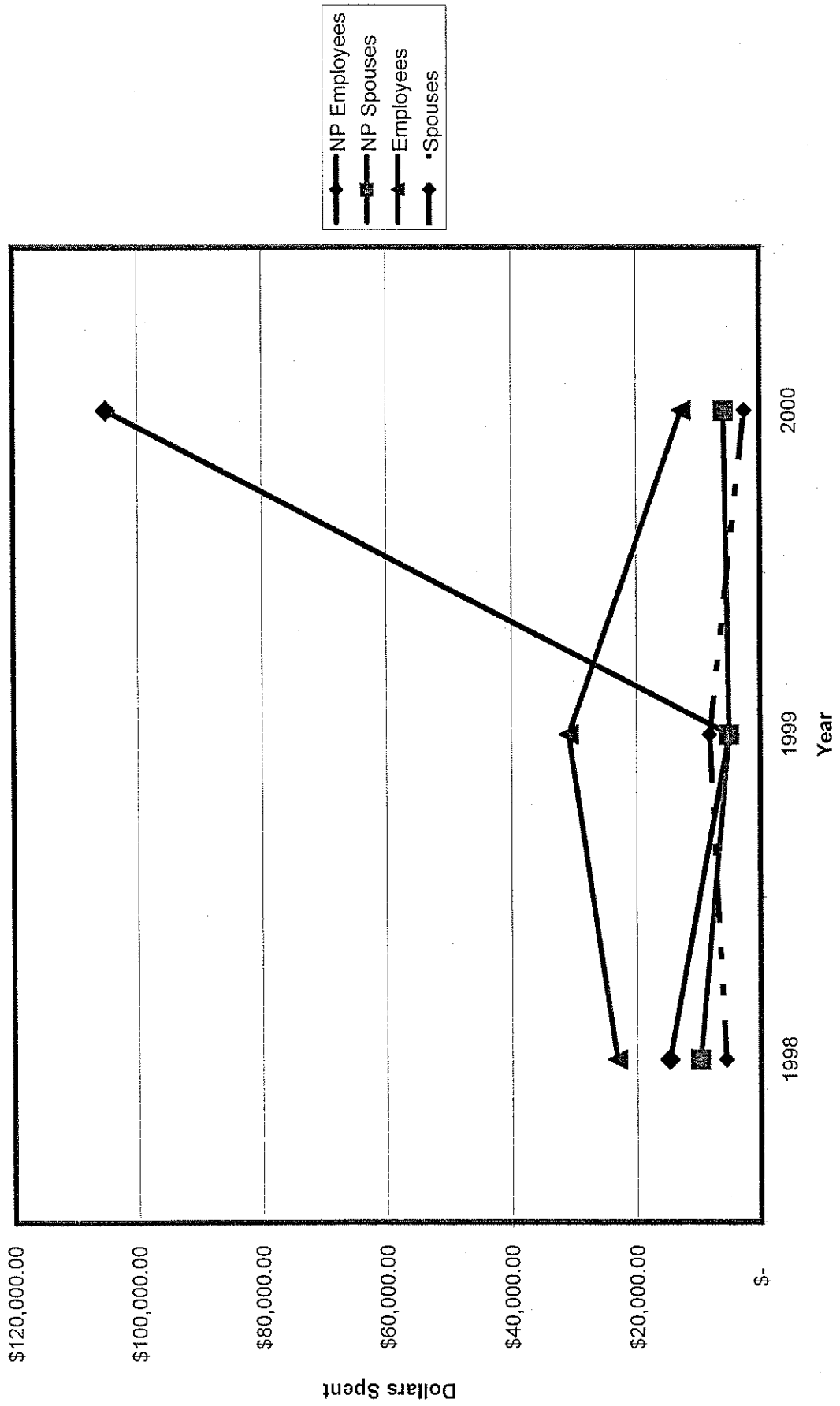
# ORNISH PROGRAM FOR REVERSING HEART DISEASE PIONEER PILOT PROJECT OUTCOMES

	<u>BASELINE</u>	<u>6 MONTHS</u>	<u>% CHANGE</u>	<u>1 YEAR</u>	<u>% CHANGE</u>
<b>WEIGHT*</b>	173.50	163.15	-5.96	162.90	-6.11
<b>BLOOD PRESSURE*</b>	138/84	122/80		135/88	
<b>LIPIDS</b>					
Cholesterol	193.75	168.00	-13.29	170.88	-11.81
Triglycerides	169.38	177.25	4.65	181.50	7.16
HDL-Cholesterol	45.00	46.25	2.78	45.38	0.83
LDL-Cholesterol	114.75	86.25	-24.84	89.25	-22.22
<b>SOCIAL SUPPORT</b>					
Depression	11.13	8.63	-22.47	6.88	-38.20
Stress	16.75	9.63	-42.54	8.63	-48.51
Hostility	7.25	7.50	3.45	6.30	-8.62
Support	2.62	2.56	0.95	2.76	5.20
<b>ADHERENCE*</b>			<u>% ADHERENCE</u>		<u>% ADHERENCE</u>
Exercise(180 minutes/week)		221.00	122.8%	184.63	102.6%
Stress Management (420 minutes/week)		343.23	81.7%	187.13	44.6%
Stress Management (7 days/week)		5.94	84.9%	2.38	33.9%
Diet (7 days/week)		6.45	92.1%	5.80	82.1%

\*Method used for 1 year measurements was different than used for baseline

COMPARISON OF PARTICIPANTS AND NON-PARTICIPANTS

Comparison of Participants and Non-participants Minus Outliers





APPENDIX I

## PROJECTIONS OF CLAIM BENEFIT REDUCTION THROUGH EXERCISE

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PROJECTIONS OF CLAIM BENEFIT  
REDUCTION THROUGH EXERCISE

## PROJECTIONS FOR CLAIM BENEFIT REDUCTION THROUGH EXERCISE

(input cells are blue, calculated cells are yellow)

	Yearly Cost ==>	Full Staffing	Part-Time Staffing	<===Sum of yearly staffing + amortized facilities & equipment costs
		\$75,000	\$45,000	
<b># of Employees Removing Non-Exercise Risk Factor</b>		<b>PTOI Benefit using full staffing option</b>	<b>PTOI Benefit using part-time staffing</b>	
400	\$98,600	\$128,600	<===Input any # of Employees	
350	\$76,900	\$106,900	<===To solve for PTOI Outcome	
300	\$55,200	\$85,200		
250	\$33,500	\$63,500		
200	\$11,800	\$41,800		
150	(\$9,900)	\$20,100		
100	(\$31,600)	(\$1,600)		
50	(\$53,300)	(\$23,300)		
0	(\$75,000)	(\$45,000)		
173	\$0			<===Input any PTOI outcome
104	\$0			<===To solve for # of Employees

Yearly Claims Reduction from exercise, per employee	\$434	extrapolated from 1993-94 study at 5% claims inflation rate
Yearly Equipment Cost	\$20,000	\$100,000 initial cost amortized over five years, \$20,000 yearly repla
Full Staffing Cost	\$50,000	Staff for Peak and Intermediate Use hours
Reduced Staffing Option	\$20,000	Security camera plus peak time staffing
Facility Upgrades	\$50,000	Ventilation, Electrical, etc.
Facilities Cost Amortization Period in Years	10	Amortization Period
Yearly Amortized Facilities Upgrade Cost	\$5,000	Calculated from facilities upgrades, divided by amortization period