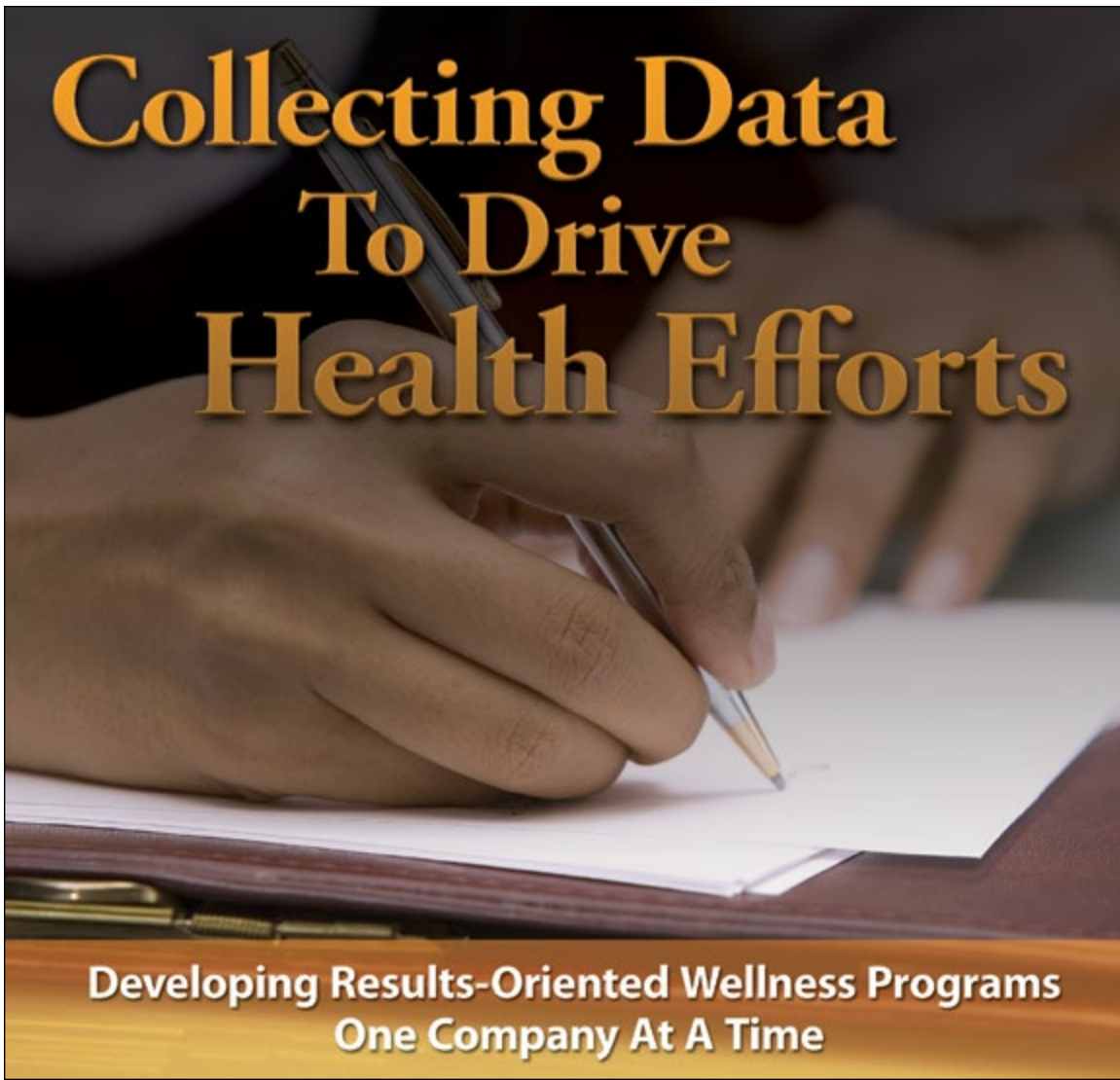


Absolute ADVANTAGE

THE WORKPLACE WELLNESS MAGAZINE



Collecting Data To Drive Health Efforts

Developing Results-Oriented Wellness Programs
One Company At A Time



IN THIS ISSUE:

In this issue of *Absolute Advantage*, we zoom in on the concept of collecting data to drive your company's health efforts. Specifically, we present 10 reasons why data collection is an essential step in building a results-oriented wellness program. In addition, we also outline three important sources of data that must be gathered in order to be successful. Finally, we present several new tools including the *Wellstream* PHA and *Blueprint For Health*.

Each month you can learn more about the articles in *Absolute Advantage*. Simply log on to WELCOA's members only website to get more in-depth coverage of the topics that matter most to you. Find full-length interviews, expert insight, and links to additional information that will help you do your job better!

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LETTER FROM THE **EXECUTIVE EDITOR** | DAVID HUNNICUTT, PhD

Collecting Data To Drive Health Efforts

Developing Results-Oriented Wellness Programs One Company At A Time

This issue of *Absolute Advantage* is dedicated to the notion of collecting data to drive your company's health efforts. The third of the seven critical benchmarks of success, Collecting Data To Drive Health Efforts, is an essential step in developing a results-oriented wellness program. To help you get a better understanding, we've devoted the entire issue to this benchmark.

Initially, we begin by presenting 10 reasons why data collection is a key step in building a results-oriented program. We then turn our attention to specifying the three "non-negotiable" forms of data that must be collected in order to be successful.

To help you understand what your data actually means, we've conducted an expert interview with Dr. Steve Aldana. In this interview, Dr. Aldana lays out the specific costs of unhealthy behaviors. This information should be useful to you as it will provide you with an opportunity to compare your data against national norms and approximate the cost of unhealthy behaviors within your company.

With respect to communication, we've also included an article about developing a data dashboard. This dashboard will help you to distribute data effectively to all stakeholders within your organization.

Perhaps the most exciting part of this month's edition is that we present two new tools. The *Wellstream* Personal Health Assessment is WELCOA's newest data gathering tool. In addition, we also present *Blueprint For Health*. This tool is a useful framework to help you estimate healthcare costs, absence, and presenteeism and their relationship to poor employee health.

We hope that you enjoy this issue of *Absolute Advantage*.

Yours in good health,

Dr. David Hunnicutt
President

The third of the seven critical benchmarks of success, Collecting Data To Drive Health Efforts, is an essential step in developing a results-oriented wellness program.



Absolute ADVANTAGE

VOLUME 6, NUMBER 4

THE WORKPLACE WELLNESS MAGAZINE

Organizational Founder, William Kizer, Sr.

WELCOME

Absolute Advantage is the interactive workplace wellness magazine that helps large and small employers link health and well-being to business outcomes. *Absolute Advantage* arms business leaders and wellness practitioners with leading-edge workplace wellness information straight from the field's most respected business and health experts.

With its online component, *Absolute Advantage* provides the industry's most current and accurate information. By logging on to the magazine's interactive website, you can access a whole new world of health promotion—including in-depth interviews with national health promotion experts and insider's information about industry products.

SUBSCRIPTION INFORMATION

For information about subscribing to *Absolute Advantage*, contact the Wellness Councils of America at (402) 827-3590 or via e-mail at wellworkplace@welcoa.org.

Ab-sol-ute Ad-van-tage:

When a company can produce more than its competitors—even though they have the same amount of resources—it has an absolute advantage.

We believe wellness is that advantage.

EXECUTIVE EDITOR | David Hunnicutt, PhD

Dr. Hunnicutt is President of the Wellness Councils of America. As a leader in the field of health promotion, his vision has led to the creation of numerous publications designed to link health promotion objectives to business outcomes.

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Dr. Perko has significant experience in worksite wellness. Currently the Chair of Health Education at the University of Alabama, Dr. Perko also serves on WELCOA's Medical Advisory Board and often speaks on behalf of the Wellness Councils of America.

MANAGING EDITOR | Brittanie Leffelman, MS

Brittanie is the Director of Operations and manages major writing projects at WELCOA. With a Master's Degree in Health Promotion, she regularly coordinates national health forums, major grants, and state and local wellness initiatives.

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As Director of Marketing, Bill is responsible for the design and oversight of WELCOA's marketing programs. With a Master's Degree in Business Administration, he communicates the value and benefits of WELCOA and its many products to organizations around the country.

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As WELCOA's Director of Membership, David is responsible for recruiting and servicing member organizations throughout the United States. David's background has been grounded in worksite wellness for the past 25 years.

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As the Director of Community Affairs, Kelly is responsible for leading WELCOA's cadre of locally-affiliated wellness Councils. In this capacity, Kelly coordinates the *Well Workplace* awards initiative as well as the *Well City USA* community health project.

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A 2001 graphic design graduate from Iowa State University, Justin studied design in Rome, Italy before joining the WELCOA design staff. He is responsible for the layout and design of many publications including *The Well Workplace* newsletter and *Absolute Advantage* magazine.

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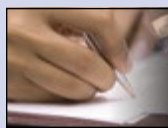
Information in this publication is carefully reviewed for accuracy. Questions, comments, or ideas are welcome. Please direct to Dr. David Hunnicutt, Executive Editor, at the address below.

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10 Reasons— Why Data Collection Is An Essential Step In Building A Results-Oriented Wellness Program

In this article, we'll outline 10 reasons why data collection is important to your company's overall population health management initiative.

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When it comes to collecting data, there are three sources that should be considered non-negotiable. Is your company measuring up?



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In an effort to help both large and small businesses manage rising healthcare costs and assist a rapidly aging workforce, WELCOA has developed a comprehensive, personal health assessment.



22 The Costs of Unhealthy Behaviors

Data collection is only useful if you have something to compare it to. In this expert interview, Dr. Steve Aldana speaks out on the costs of unhealthy behaviors.



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The *Blueprint For Health* is a new decision tool for health and productivity management. The blueprint estimates medical costs, absence, and presenteeism among employees.



34 Developing A Data Dashboard

If you're looking to build a results-oriented wellness program, it's essential that you develop a data dashboard for your organization. Read on to learn more about the art and science of making sense of your data.



WELCOA's Well Workplace Initiative

The Seven Benchmarks of Success

IN THIS ISSUE:
DATA COLLECTION



For the past 20 years, the Wellness Councils of America has dedicated its efforts to studying and promoting the efforts of America's Healthiest Companies. During that period, WELCOA developed its patented Well Workplace process. At the core of the Well Workplace model, we have identified seven key benchmarks of success. Specifically, these seven benchmarks are inherent in companies that have built results-oriented workplace wellness programs.

Benchmark #1

Capturing CEO Support

From our experience, CEO support is essential to the process of developing best-in-class programs. Indeed, we know of very few programs that have contained costs and improved employee health that don't have strong senior level support.

Benchmark #2

Creating Cohesive Wellness Teams

Once CEO support has been captured, the next task is to create a cohesive wellness team. Teams are essential to building great wellness programs because they help to distribute the responsibility for wellness throughout the organization.

THIS ISSUE

Benchmark #3

Collecting Data To Drive Health Efforts

The team's first and primary responsibility is not to start offering programs, but rather to step back and gather important data. The data will be collected using corporate culture audits, health risk appraisals, and knowledge and interest surveys. This data is extremely important because it will reveal the specific areas of health needs and interests within the organization.

Benchmark #4

Carefully Crafting An Operating Plan

With essential forms of data having been collected, the task is now to develop an operating plan for health and wellness within the organization. This operating plan will serve as the roadmap and will guide the company's efforts and investments in workplace wellness.

Benchmark #5

Choosing Appropriate Interventions

With the first four benchmarks completed, it is now appropriate to begin choosing and implementing the appropriate health and productivity interventions. These interventions will most likely include tobacco cessation, physical activity, weight management, self-care, and stress management. But, they also may include things like fatigue management and ergonomics—depending on what the company's data reveals.

Benchmark #6

Creating A Supportive Environment

Once the appropriate health promoting interventions are up and running, it's time to create a supportive environment. Indeed, by having a supportive environment, organizations can be confident that employees will be supported in their efforts to lead healthier lives. Environmental interventions may take the form of policies, physical modifications, and rewards and incentives.

Benchmark #7

Carefully Evaluating Outcomes

The seventh and final benchmark in the Well Workplace model is carefully evaluating outcomes. It is within this benchmark that companies will religiously keep score when it comes to their wellness program. Evaluation targets include things like participation, participant satisfaction, behavior modification, and cost containment.

WELCOA's Well Workplace model has been adopted by more than 1,000 companies across the U.S. ★



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10 REASONS

**Why Data Collection Is An
Essential Step In Building A
Results-Oriented Wellness Program**

By David Hunnicutt, PhD



When it comes to building a results-oriented wellness program, data collection is key. Indeed, in the WELCOA seven benchmark model, it is the third essential element. In this article, we'll outline 10 reasons why data collection is important to your company's overall population health management initiative.

Reason #1

Data collection provides a snapshot of the overall health and well-being of your workforce at any given point in time.

The first reason why data collection is an essential part of building a results-oriented wellness program is that this data provides you with a much-needed snapshot of the overall health and well-being of your workforce. Without this data

readily available, worksite health promotion practitioners spend a lot of time guessing and speculating as to what the real health and productivity issues are within their working populations. By having this data at your fingertips, you'll have the ability to refer back to it on a daily basis if necessary. By diligently and carefully collecting health and productivity data on your workforce, you'll also have the ability to answer any questions that might come from senior level executives. Having this data at your disposal is worth its weight in gold when it comes to this particular issue alone.

Reason #2

Data collection ensures a longitudinal account of the overall health status of your workforce.

By faithfully collecting data year-in and year-out, you will develop a rich data repository

that accurately reflects the overall health and well-being of your working population over time. This data is essential in monitoring and detecting any changes in your population so that you can effectively respond to the health needs of your people. Longitudinal data is also essential when it comes to long-term strategic planning. Remember, the nation's best worksite wellness programs are linked to the company's overall strategic planning process. If you want to be taken seriously by the powers that be, it's important to have your act together. Having this kind of data at your disposal makes a lot of sense when you really think about it. In fact, we're sure that your company has longitudinal data regarding financial and production outcomes—so wouldn't it make sense for you to have the same kind of data as well? If you can bring this type of longitudinal data to the table, you're much more likely to be taken seriously in the organizational planning process.

The Top 10 Reasons To Collect Data

- 1 Data collection provides a snapshot of the overall health and well-being of your workforce at any given point in time.
- 2 Data collection ensures a longitudinal account of the overall health status of your workforce.
- 3 Data collection ensures that senior level executives are kept in the loop as to what's happening in the arena of employee health and well-being.
- 4 Data collection ensures that the health management process is kept transparent.
- 5 Data collection provides accountability.
- 6 Data collection informs your workforce of the overall health and well-being of the company as a whole.
- 7 Data collection is an excellent recruitment vehicle for new employees.
- 8 Data collection allows you to benchmark against others.
- 9 Data collection allows you to definitively measure change.
- 10 Data collection allows you to demonstrate value to shareholders.



Reason #3

Data collection ensures that senior level executives are kept in the loop as to what's happening in the arena of employee health and well-being.

The third reason why data collection is important is that it ensures that your senior level executives are kept apprised of what's going on in the wellness arena and how it's impacting employee health status. Plain and simple, if you want to engage your company's senior level leadership, you've got to keep them

informed in meaningful ways. Providing them with objective data is a great way to do this. Just as an aside, it's also a great way to protect the stability and image of your initiative. For example, many executives within an organization have no idea what's going on in the wellness arena—and they use this ignorance as an excuse for not getting involved. But when an event occurs (think increase in healthcare premiums) these same executives demand answers. And this reactive scenario can put you on the defensive, and your program at risk. By having objective data—and regularly communicating it to senior level executives—you're much more likely to get the engagement and respect you deserve.

Reason #4

Data collection ensures that the health management process is kept transparent.

It's been said that information is power. This is certainly true when it comes to gathering and maintaining health and productivity data within your organization. Make no mistake about it, the health and productivity data that you are collecting has enormous value to your company. To ensure that the data set remains useful for years to come, it should be easily accessible to a variety of different constituents within your organization. By establishing this



kind of transparent data repository, the organization can be assured that the data that has already been collected will be available and useful not only now but in the future as well. The last thing that you want to see happen is that the data is housed and managed by a single individual. You'll want to avoid this scenario due to the simple fact that when that individual takes another position, retires, or wins the lottery, the data set magically disappears with them—and then you get to start all over. Proper data collection protocols can help you avoid this nightmare scenario.

Reason #5

Data collection provides accountability.

Another reason why we believe data collection is important is that it embraces the concept of accountability. Like it or not, many wellness programs have developed the reputation of not being hardcore, mainstream business strategies. While not true, it's hard to refute this kind of perception if you're not gathering and monitoring the data related to the overall health and well-

being of your company's workforce. Furthermore, by collecting data, practitioners voluntarily step up to the responsibility of being held accountable for maintaining or improving the numbers associated with the health and productivity management initiative. There's no question that this accountability can create some tension and stress for those who are managing worksite wellness programs. But our experience has shown that it's the burden of accountability that has brought out the best in these same professionals.

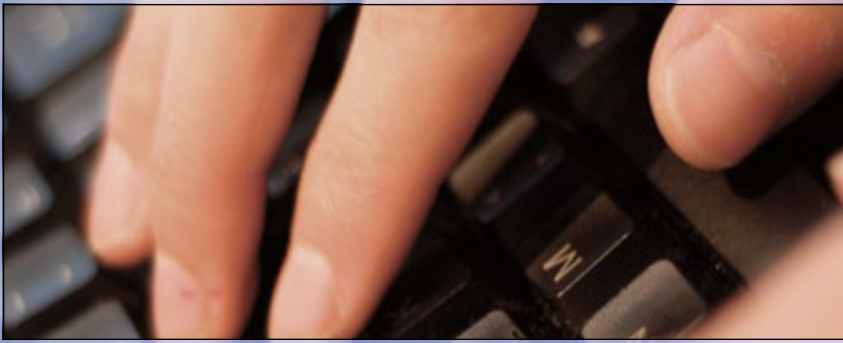
Reason #6

Data collection informs your workforce of the overall health and well-being of the company as a whole.

One commonly overlooked benefit of data collection is the illumination that it brings to the workforce as a whole. To be sure, enlightened worksite wellness professionals use data to educate and inform rank and file employees as to the health and productivity issues that are facing the company as a whole. This is a very, very powerful tactic. In fact, it's when employees truly understand what they need to do individually as well as collectively, that things begin to change. It goes without saying that it's pretty difficult to stand up in front of your employees and to suggest health behavior change without having any data to back it up. On the other hand, we've seen profound moments of widespread support occur when wellness practitioners advocate change and their suggestions are supported by behavioral data.

“Make no mistake about it, the health and productivity data that you are collecting has enormous value to your company.”





WELCOA's Benchmarks Of A Results-Oriented Wellness Program

- #1 Capturing CEO Support
- #2 Creating Cohesive Wellness Teams
- ✓ #3 **Collecting Data To Drive Health Efforts**
- #4 Carefully Crafting An Operating Plan
- #5 Choosing Appropriate Interventions
- #6 Creating A Supportive Environment
- #7 Carefully Evaluating Outcomes

Reason #7

Data collection is an excellent recruitment vehicle for new employees.

The seventh reason why health and productivity data collection is important deals with the fact that this data can be leveraged in the recruitment of new employees. Survey after survey reveals the fact that being healthy is a primary motivation of U.S. workers. If you have data at your disposal which indicates that your company is dedicated and successful in helping employees to adopt healthier behaviors, potential employees may see this as a tipping point of sorts. We've heard from more than one employer of the value that their worksite wellness program has brought to the company's recruiting process. By having concrete data

“To capitalize on the opportunity to effectively benchmark, it is essential that you are routinely and carefully collecting health and productivity data within your organization.”



which can be fashioned into the employment appeal, a company can go a long way toward establishing an objective case as to why your organization is a better fit than someone else's.

Reason #8

Data collection allows you to benchmark against others.

Over the years, we've been impressed by the fact that America's healthiest companies are constantly benchmarking their performance against their competitors. And, if they're not benchmarking against their competitors, they are comparing themselves to information contained in national databases. In so doing, companies can take great satisfaction knowing when they are performing ahead of national trends. This comparison process also provides important motivation to bring about change if their numbers are not what they should be. To capitalize on the opportunity to effectively benchmark, it is essential that you are routinely and carefully collecting health and productivity data within your organization.

Reason #9

Data collection allows you to definitively measure change.

We are of the opinion that you can't change what you can't measure. Thus, if you are truly interested in improving the health and well-being of your working population, it's essential that you collect data. There are numerous companies in the United States that have had wellness programs for more than two decades now. There are also numerous companies in the United States among this group who have sincere regrets that they did not gather data from the very beginning of their initiatives. The good news is that many of these companies have implemented comprehensive data collection systems—albeit they learned the hard way. Perhaps even more fortuitously, many companies who were late entrants into the corporate wellness arena learned important lessons from these kinds of mistakes. That being said, it is the data that allows you to definitively measure both short-term and long-term changes. And isn't this the true measure of a company's commitment to health enhancement?

Reason #10

Data collection allows you to demonstrate value to shareholders.

Over the last 10 years, the valuation process of companies has been

broadened to reflect the value of a healthy workforce. Indeed, more and more investors are looking at companies more favorably when they have healthy and productive employees. But because the valuation process involves the measurement of earning potential, this analysis requires concrete data. For the companies who have gathered this kind of data, they are able to effectively articulate the value that healthy and productive employees have demonstrated to bottom-line outcomes. Although not mainstream by any stretch of the imagination, employee health and productivity is rapidly factoring in to the overall value of an organization. By collecting data now, you will be able to embrace these new opportunities in the years ahead.

In this article, we've discussed 10 important reasons why data collection is essential in building a results-oriented, worksite wellness program. Given the high priority that health and well-being has become in business and industry, it's essential that you are routinely and carefully collecting data as an integral part of your worksite wellness program. In so doing, we have no doubt that you will demonstrate your program to be an essential component of your company's long-term, overall business strategy. ★



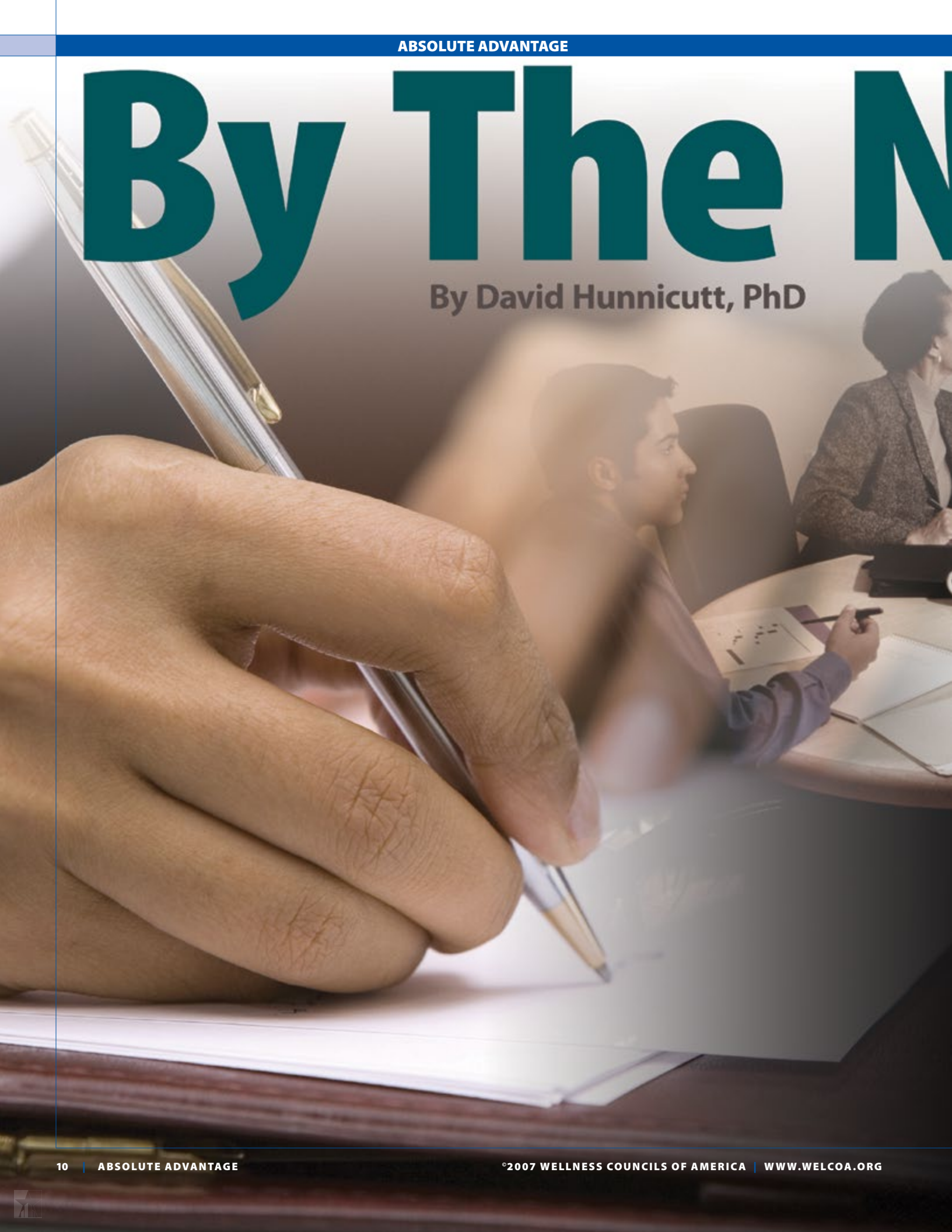
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By The N

By David Hunnicutt, PhD



Numbers



**Health Risk Appraisals,
Health Culture Audits,
and Personal Interest Surveys
Should Be The Core of
Your Data Collection Efforts**



In building a results-oriented worksite wellness program, it is essential to collect data. From our perspective, data collection is a serious undertaking that is crucial to the overall population health management process and a task that U.S. companies are just now beginning to embrace.

When it comes to collecting data, it's important to understand that there are several types of data that need to be gathered if your company's wellness program is to thrive. While there are many forms of data that can be collected, it is absolutely essential to gather data from three primary sources—an employee health risk appraisal, a company-wide health culture audit, and an individual interest survey.

By having data from these three sources, worksite wellness practitioners will have at their disposal rich forms of information that can be analyzed and utilized to build a solid foundation for a results-oriented worksite wellness program.

In the paragraphs that follow, we will discuss each of these important forms of data.

1 Data Source #1: Employee Health Risk Appraisals

The first primary source of data that needs to be gathered comes from the administration of an employee-based health risk appraisal. For the uninitiated, a health risk appraisal is an electronic or hard-copy health questionnaire that is utilized to gather important information about employee health behaviors and risk factors.

Overview of HRAs

There are now a number of excellent health risk appraisal tools available to employers. Generally, a health risk appraisal will consist of approximately 85-100 questions. The questionnaire can be delivered electronically or in hard copy format.

Most health risk appraisals are written at the 6th to 8th grade reading levels to ensure that all questions can be readily understood by diverse employee populations. On average, an employee-based health risk appraisal will take anywhere from 10 to 20 minutes to complete.

Once completed, employees will receive a customized and tailored individual report detailing their personal health status. Generally, if an employee completes the HRA electronically, they will receive this report immediately via a PDF that can be printed on a local network. If the employee completes a hard copy version of the HRA, they will receive their personal report via the mail in about two weeks time.

Cost of HRAs

Generally, a good health risk appraisal will cost approximately \$5 to \$15 per employee for an electronic version and \$10 to \$25 per employee for a hard copy version. The hard copy version is generally more expensive because it involves the physical cost of producing a paper-based HRA as well as mailing fees. It's also customary to anticipate a set-up fee to make sure that your account and database are configured properly. To maximize your budget, it's essential to communicate with your HRA vendor to uncover any additional fees that may apply to data transfers and report generation.

Confidentiality

The key to making the HRA process work for both the employee and the employer is confidentiality. Employees should be assured and comfortable that the employer will have no access to any individual employee health data. In addition, employees should also be informed that the company will receive an aggregate report of the overall findings, but that this report does not and will not contain any individual health identifiers. Just to give you a heads up, if response rates are below 50 people, an aggregate report is generally not provided to further protect confidentiality.



Incentives

It goes without saying that well-positioned incentives are critical in driving up participation rates in the company health risk appraisal process. While participation norms are hard to come by, it's generally accepted that without any incentives, companies can expect about 10% of the employee population to participate. With the proper incentives, participation rates have been achieved as high as 95%+. Let's take a closer look at the broad categories of incentives.

- ▶ **Trinkets and T-Shirts.** The first general category of incentives is trinkets and t-shirts. Incentives that fall within this category generally include t-shirts, water bottles, pedometers, etc. While not known to drive huge participation rates, trinkets and t-shirts can certainly be used to increase the overall participation rate for your health risk appraisal. This approach works especially well in the first year as the incentives—although inexpensive—are novel as employees are generally unfamiliar with how the process works. If utilized, this form of incentive can increase participation rates from 10% to 20%.
- ▶ **Merchandise and Gift Certificates.** The second general category of incentives includes merchandise and gift certificates. Because these have a higher perceived value, merchandise can drive participation rates to somewhere around 40%. Specifically, merchandise includes things like movie tickets and gift certificates—and the higher the perceived value, the greater the participation rates.
- ▶ **Tax-Advantaged Cash Incentives.** The third general category of incentives includes cash. As one would expect, cash speaks loudly to incentive participants to take part. Many companies will offer \$25 to \$50 tax-advantaged cash incentives to increase participation rates. And it works. In fact, if you utilize this type of incentive you can generally expect participation rates to exceed 50%. A word of instruction is necessary here. It's essential that cash is awarded in a special tax-advantaged format. This allows employees to receive the \$25 to \$50 after taxes. If you don't utilize this format, employees are awarded odd amounts like \$19.38 which generally doesn't have all that much perceived value. But, if done right this category of incentives is powerful. Just as an aside, many struggle with understanding

Incentives & Participation Rates

Trinkets and T-Shirts	10-20%
Merchandise and Gift Certificates	40%
Tax-Advantaged Cash Incentives	50%
Benefit Plan Redesign	90-100%



how this is actually done. Not to worry, check with your benefits people as they will have a solid grasp on this concept.

- ▶ **Benefit Plan Redesign.** The fourth and final category of incentives involves a redesign of your present benefit plan. Specifically, health risk appraisals can be made a mandatory part of the company benefit re-enrollment process. If you take this approach, you can expect participation rates of 100% for those that utilize your company's benefit plan. While the participation rates are hard to argue with, many companies don't like the feedback that comes along with strong-arming employees into adopting a personal health risk appraisal.

Similar to making it mandatory is the notion of raising health insurance premium levels for all employees and then offering a significant reward for those who participate in the health risk appraisal process. For example, it's not uncommon for companies to inform all employees that contributions for health insurance will be increasing for everyone by \$500 in a given year. At the same time, employees are informed that if they take a confidential HRA, that \$500 fee will be waived. Although it takes some effort and communication, when companies incorporate this approach to incentive employees, participation rates often exceed 85%.



Communicating The HRA Process

While there is little question that an incentive helps to drive participation, it is also essential to fold in a solid communication plan. This communication plan should be initiated four to five weeks prior to the launch of the HRA. The communication plan should include several important messages. The first message that employees should get is, “we care about you as an employee of this organization.” The second message is, “your health status is the pearl of great price and we want to help you maintain or improve your health for years to come.” The third message is, “we are offering you the opportunity to participate in a voluntary health risk appraisal process.” Finally, employees should be given a contact number so that they can gather further information or clarify concerns.

Once your communiqué includes these core elements, you’ll also need to highlight how the process will work logistically and, once completed, how they can acquire their incentives.

Like incentives, the communication plan is an essential part of the HRA process. If done well, participation rates will remain high.

Frequency

Ideally the HRA process should be conducted each year. In so doing, your employees will have an ongoing account of their personal health status and you, as an organization, will have a year-by-year record of health trends in your organization. If the organization is unable to fund the HRA on an annual basis, we would recommend doing it every two years. While not ideal, it still provides a useful and important function within the organization.



Data Source #2: Company-Wide Health Culture Audit

The second primary source of data that should be collected is a company-wide health culture audit. Again, for the uninitiated, a health culture audit is an instrument that assesses the company’s overall culture as it relates to health and productivity. A good health culture audit will assess things like your company’s health norms, your employees’ individual attitudes about health, and the personal perceptions that exist concerning health and well-being as it relates to your organization.

While many people struggle with the term culture, this need not be the case. In essence, culture is how things get done in your organization. It’s the way people collectively and individually go about doing their jobs

day-in and day-out. Obviously, your health culture is how people go about staying healthy while they’re employed by your organization.

From our experience, it is essential to collect information relating to the overall health of your company’s culture because your culture is a powerful influence on individual health status. This audit will provide you with important information as to how people are perceiving and embracing your company’s health and productivity initiative.

If you are on the fence about the need for offering a health culture audit, consider this. It is possible to improve employee health and, at the same time, destroy individual trust and morale. For example, we’ve encountered companies that have been zealous in their approach to improving employee health status. They’ve gone to great lengths to implement health risk appraisals and behavior management programs. Utilizing a “big stick” approach (as opposed to carrots) companies have strong-armed their employees into adopting healthier behaviors. While generally well-intended, many of these companies have also systematically destroyed their company’s culture. By offering an annual or bi-annual health culture audit, these companies could have been forewarned to the damage that was being done and changed their tactics. However, by failing to utilize the health culture audit process, strong-arming companies have won the risk factor reduction battle, but lost the war because employees became alienated, disengaged, and hostile to the overall health management process.

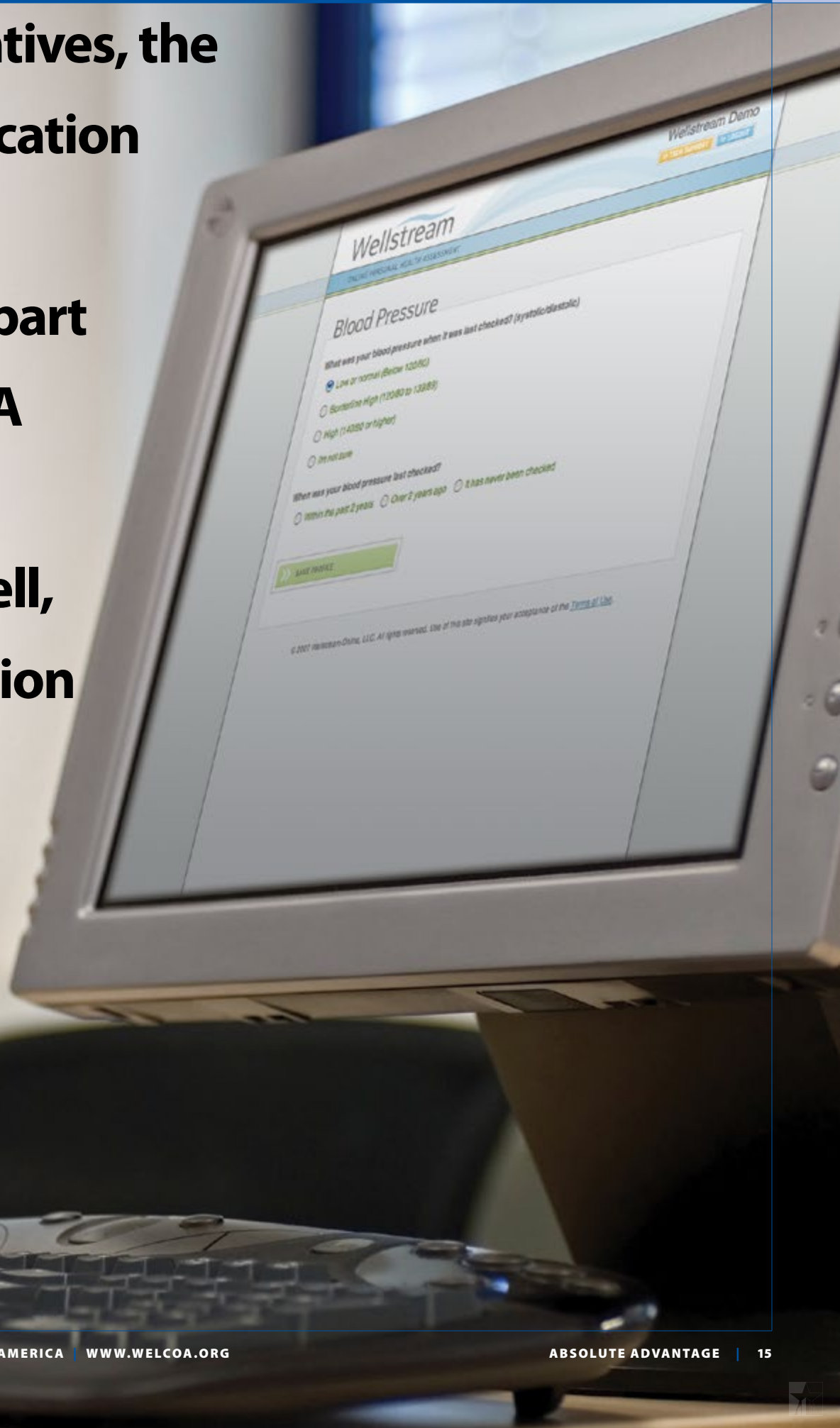
Although the concept of a health culture audit has been around for a long time, there are still relatively few on the market. But, because the priority of maintaining employee health and well-being has been elevated, there’s little doubt to the fact that there will be more audits available in the future. If you are interested in learning more about the health culture audit process, we encourage you to log on to www.healthyculture.com.

The 3 Primary Data Sources

#1	Health Risk Appraisals
#2	Health Culture Audit
#3	Employee Interest Survey



Like incentives, the communication plan is an essential part of the HRA process. If done well, participation rates will remain high.



3 Data Source #3: An Individual Interest Survey

The third primary source of data is an individual interest survey. An individual interest survey will uncover both met and unmet health interests within your employee population. Like the HRA and health culture audit, an individual interest survey should be considered a non-negotiable part of the annual or bi-annual data collection process.

Indeed, an individual interest survey is more than just a nice complement to the aforementioned data sources. To be sure, this data source provides an opportunity to triangulate all of the information gathered and systematically sift through it to ensure that your employees are being offered programs and interventions that are of particular importance to them. If you choose to forgo an annual interest survey, you do so at significant risk—to both you and your employees.

In reality, there are several reasons why we feel so strongly about interest survey administration.

An interest survey can uncover hidden opportunities. By committing your organization to doing an annual interest survey, you can uncover hidden opportunities that can exponentially move your wellness program forward. For example, an interest survey allows your people to tell you

what's important to them. And, if we're smart enough to listen, the payoff can be significant. In fact, without an annual interest survey, it's unlikely that anyone would have uncovered the burning desire for newly emerging financial wellness programs. If you still question whether interest surveys can uncover hidden opportunities, we encourage you to contact practitioners who are offering leading-edge programs. More often than not, they'll tell you that it's due to staying in close touch with their employees. This closeness, many times, is due to a well-designed interest survey.

Interest surveys make employees feel a part of the process. In addition to uncovering hidden opportunities, an interest survey makes your employees feel a part of the overall programming process—and this is of great value. Indeed, the more involved your employees are in your company's health management process, the more committed they are to making it successful. Plain and simple, employees feel good when they are given the opportunity to make their opinions known. In some instances, employees may be telling you things you've known for a long time. But just because you've known them, doesn't necessarily mean that your employees have felt that their opinions mattered.

Interest surveys offer you the opportunity to balance needs and interests. This is a crucial aspect of interest surveys. In fact, by collecting interest survey data,

An aggregate report is an important source of data that will help you better understand your employees' collective health status.



practitioners can balance both needs and interests thereby creating programs that advance both individual health interests and organizational wellness priorities. For example, imagine a company that, because of the enormous healthcare costs and the toll that tobacco use takes on productivity, places a high priority on tobacco cessation programs. While the organization's aggregate health risk appraisal report indicates that there is indeed a need to address this important topic, few employees are interested in this intervention—without providing an employee interest survey, this company is basically programming for an organizational need that has little employee interest. And, unfortunately, many organizations have found this out the hard way.

Now consider how an employee interest survey might have avoided this situation altogether. By gathering interest data, the practitioner would have identified that employees place an enormous emphasis on physical activity and weight management interventions. The astute practitioner would have seen that the organizational need was to address tobacco cessation, but employee's interests lied in physical activity and weight management.

In this case, to balance both needs and interests, the company's wellness practitioner chose to widely promote physical activity and weight management programs among the employee population—and once employees were actively engaged, the practitioner began to integrate the very real need of tobacco cessation into the actual content of the physical activity and weight management programs. By taking this approach, this practitioner was able to engage larger numbers of people in listening to the merits of quitting tobacco products or in supporting those who would like to quit. At the same time, they avoided the negative pushback—and lethargy—associated with programs that are of low overall interest to the organization as a whole.

Developing An Interest Survey

While it is possible to use an off-the-shelf interest survey, we would recommend that you develop your own. The best way to do this involves a two-step process.

- ▶ **Conduct Focus Groups.** The first step to developing your own interest survey is to conduct a series of focus groups with your employees. Focus groups should incorporate a diverse group of employees who represent the typical consumers who would take part in your programs. The focus group itself should be held in a quiet room and will generally take about 1 to 1½ hours. During this focus group

discussion, it is essential that you pose broad-based, open-ended questions that engage participants in the communication process. To be sure, each question posed to focus group participants should start with how, what, why, when, and/or where. These types of questions give participants an opportunity to elaborate—which is precisely what you are looking for. If you ask questions that, for example, begin with the word “Do,” you will get “yes, no, or I don't know,” as a response. Speaking from experience, the silence created in the group will be uncomfortable to say the least.

Once you've conducted your initial focus groups, it's time to make sure that you transcribe your notes, audio tapes, or video to uncover common themes among the group. Again, speaking from experience, you do not want to let your notes get cold.

- ▶ **Developing the Interest Survey.** With focus groups behind you, it's time to start crafting the interest survey itself. Given the vast amount of information you'll have from your focus groups, you'll be surprised how quickly the survey will come together. Generally, it's just a matter of structuring your questions into yes/no or Likert scale response mechanisms. Prior to launching your interest survey to the population at-large, you'll definitely want to pilot test the survey with a small sample of colleagues and employees. While it can be a hassle to do this—not to mention that it slows the process down—you'll sleep easier knowing that there aren't any landmines in your survey.

The Three Primary Sources of Data

In this article, we've outlined the three primary sources of data that you'll need to collect in order to develop and advance a results-oriented wellness program. From experience, we recommend gathering data utilizing health risk appraisals, health culture audits, and employee interest surveys—at a minimum! Certainly, there are other important forms of data that can be collected. If you have the opportunity to utilize other forms of data like a modifiable medical claims analysis and/or absenteeism records just to mention a few, we would encourage you to do so. However, the three primary sources of data discussed in this article should remain at the core of your initiative. ★



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Choosing a Personal Health Assessment

WELCOA Introduces a
Comprehensive Personal
Health Assessment

By David Hunnicutt, PhD



In an effort to help both large and small businesses manage rising healthcare costs and assist a rapidly aging workforce, WELCOA has developed a comprehensive personal health assessment. With more than 149 million Americans now online—a number that is growing by two million people each month—we believe that the Internet has proven itself to be a powerful communications and health enhancement vehicle. Indeed, with some 73 million Americans now using the Internet to search for health information, the introduction of the *Wellstream* Personal Health Assessment will be a great asset for any company looking to manage the health and well-being of their employees.

About Wellstream

Wellstream is an extremely user-friendly and intuitive personal health assessment. It was designed to ensure that from the moment employees log on to the site, they are given easy-to-understand instructions which allow them to expediently move through the personal health assessment process. All questions and instructions have been presented in straightforward language to ensure that each and every employee will be engaged in the process every step of the way.

Specifically, *Wellstream's* questions and the accompanying algorithms have been developed by several of the nation's leading experts in worksite health promotion. Specifically, *Wellstream* correlates an individual's personal health information, family health history, and general health status with the following health issues:

✗ Blood Pressure	✗ Cholesterol/Blood Sugar
✗ Tobacco Use	✗ Exercise
✗ Emotional Health	✗ Nutrition
✗ Alcohol Use	✗ Sun Protection
✗ Safety	✗ Dental Health
✗ Men's/Women's Health	

All questions and responses are based upon nationally recognized and accepted guidelines. These guidelines have been used for such things as the national standards for physical activity, nutrition, alcohol use, etc. In addition, preventive screening recommendations

were taken from the guidelines set forth by the American College for Preventive Medicine.

How Wellstream Works

Once an organization decides to move forward with the *Wellstream* Personal Health Assessment, there are five steps to implementation and completion.

Step 1: Completing the Wellstream PHA Planning Form

In the first step of the *Wellstream* process, company representatives will be asked to complete a brief planning form. This form will ask information surrounding items like the enrollment period, employee population, communication intentions, incentives, etc. This information will provide *Wellstream* staff with everything we'll need to make sure the process runs smoothly.



Step 2: Forwarding Participant Eligibility File

Once the organization has completed the planning form, the next step is to forward the participant eligibility file. This file includes important information about the participants who will be eligible to complete the *Wellstream* Personal Health Assessment. Again, a *Wellstream* representative will work with your organization to ensure that the appropriate fields are formatted in order to successfully launch the personal health assessment to your employees.



Step 3: Formatting the Email Message Announcing Wellstream

The next step in the *Wellstream* process is to format an email that will announce the assessment to your employees. This email contains your personalized message in addition to the employee's username and password to access the *Wellstream* website. Once received by employees, they can access the PHA immediately by clicking on the link contained in the email. The entire process is HIPAA compliant and completely secure as each user is required to personalize their password once they log in.



Step 4: Completing PHA and Access Individual Report

Once employees have logged in and completed the *Wellstream* PHA, they will be prompted to download their customized and tailored individual report. This report contains an important summary of the employee's current health status and risk level. The report is generated immediately upon completion of the PHA, and employees can access the report from their computer. They can view the report online, print a hard copy to any local printer, or email themselves a copy to their home address. There's also a responsive help desk if anyone struggles throughout the PHA process.



Step 5: Receiving the Aggregate Report

After the PHA enrollment period has ended, your organization will be sent an aggregate report detailing and highlighting the collective findings. This report addresses modifiable and non-modifiable risk factors, the organization's overall risk status, key productivity indicators, stages of change, and recommendations for priority programming. Again, this report will contain the collective findings of your organization—no individual health information is contained in this document.



Ensuring Success With *Wellstream*

Because we are committed to helping you gather the important health information that you need to move your program forward, we have developed a number of ancillary services and information.

To help you successfully communicate your commitment to offering a personal health assessment, we've developed a full-color, fully-illustrated communications piece that your organization can customize and tailor. This document is available to you in PDF format at no-charge. Again, we're committed to helping you increase participation rates and advance your health and wellness initiative within your organization.

If your organization requires additional help—like personalized assistance with developing incentives or expert feedback on interpreting the results of your aggregate report—*Wellstream* staff can provide the expertise you'll need to develop a plan that will work for your organization.

For example, *Wellstream* staff recently helped a Midwest-based organization with approximately 1,000 employees to develop a customized communication and incentive plan that generated 85%+ participation in the *Wellstream* Personal Health Assessment.

To Learn More About *Wellstream*

To help you learn more about the *Wellstream* Personal Health Assessment, you can log on to www.getwellstream.com. When you do, you can get a lot of helpful information including PDFs and sample reports. You can even take a free test drive of the entire personal health assessment. ★



Wellstream was designed to ensure that from the moment employees log on to the site, they are given easy-to-understand instructions which allow them to expediently move through the personal health assessment process.



Wellstream Q&A

What Health Issues Does *Wellstream* Address?

Specifically *Wellstream* incorporates an individual's personal health information family health history and general health status and correlates it with the following health issues:

- Blood Pressure
- Cholesterol/Blood Sugar
- Tobacco Use
- Exercise
- Emotional Health
- Nutrition
- Emotional Health
- Nutrition
- Alcohol Use
- Sun Protection
- Safety
- Men's/Womens Health

Does *Wellstream* Incorporate The Stages Of Change?

Yes. *Wellstream* is stage-based and provides participants with questions and report information that address all of the stages of change.

Is *Wellstream* HIPAA Compliant?

Yes. *Wellstream* has been reviewed by health experts and legal advisors to ensure that this new assessment meets HIPAA regulations and standards.

Is There a Hard Copy Available?

Definitely. If your organization would prefer to administer the *Wellstream* PHA via hard copy format one is available.

Can *Wellstream* Be Customized?

If you're looking for a custom tool we can help you create a look and feel that's uniquely your own. From adding your logo to complete customization *Wellstream* can be personalized to meet your needs.

How Can I Communicate *Wellstream* To My Employees?

With extensive communication experience in worksite wellness WELCOA can help you set up an aggressive and effective communication campaign and incentives to drive up participation.



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The Costs Of



f Unhealthy Behaviors

Data Collection
Is Only Useful
If You Have
Something To
Compare It To...



In this interview, nationally recognized expert, **Dr. Steve Aldana**, sat down with WELCOA President, Dr. David Hunnicutt to discuss the incidence, prevalence and costs of unhealthy behaviors in the United States. What you're about to read will both alarm and encourage you.

How much does it cost if an employee is physically inactive?

Aldana: We don't have the exact cost of sedentary living by employee, but we do have some fairly good numbers in three specific areas: 1.) what physical inactivity costs society as a whole; 2.) what physical inactivity costs us in terms of healthcare; and 3.) what are the actual costs for the group—however, individual employee is not as good as the first two sources.

Basically, it's estimated that sedentary living—the fact that we're not moving around very much—costs us as a nation \$150 billion. This is in 1987 dollars. That's just due to healthcare costs associated with diseases that we get from not moving around. So that takes care of the first area. When it comes to the second area, this is where the numbers get serious. In fact, 15% of all of the healthcare costs we pay in the United States is due to sedentary lifestyles. Now, if employers want to calculate what physical inactivity is costing their company, I would suggest that they take a look at their total healthcare expenditures for a year and take 15% of that. In reality, that's going to be pretty close to the actual expenditures.

Those are some pretty stark numbers. Just for background, can you share with our readers what we know about the percentage of the population that is not active, marginally active and active?

Aldana: Sure. First, it's important to understand that experts and scientists have pretty much changed the way we measure physical activity over the last few years based on the recommendations from the Surgeon General. The new recommendations include 30 minutes of moderate,

intensive physical activity every day. So to answer your question, about 78-80% of the entire U.S. population does not get enough physical activity to get the benefits. Looking at it another way, there's about 20-25% that are actually moving around enough to lower their risks and to lower their prevalence of disease. The rest are not. So it's the vast majority; and it has changed a little for the better over the last few years—not very much—a couple of percentage points.

As a sidebar, has it hurt or has it helped when the physical activity recommendations changed?

Aldana: I think it's a good thing because it really lets us zero in on the metrics that we need to be measuring. The people who complain the most are mostly the researchers because their data sets now need to be updated and modified. And, as a researcher, I can tell you that's a pain. But all in all, the recommendation is a good one.

So now let's turn our attention to the costs of tobacco use. What do we know about this particular behavior?

Aldana: Smoking and tobacco use is a big, big deal in the United States. And this is true on both sides—the tobacco industry and the public health professionals. The good news is with all of the attention that tobacco use has received; it's the one behavior on which we have a lot of really good data. First, it's important to understand that approximately 23% of the population uses tobacco. If you're a female and you're 24 years of age and you're a smoker, it's going to cost \$106,000 for you over your lifetime to treat the diseases that you get from tobacco use. That's everything. That's private insurance, Medicare, Medicaid; it's going to cost \$106,000 to treat you. If you're a man, and you're a tobacco user at age 24 and you

use tobacco your whole life, it's going to cost \$220,000. This equates to about \$40 in healthcare costs for every pack of cigarettes you smoke.

So if you spent \$4.25 for a pack of smokes, the real cost of that purchase is about \$44.25—\$40 of which will be paid for by someone else.

What are the benefits of quitting the use of tobacco? How long will it take? What kind of costs can be prevented or avoided for employees if they can quit smoking?

Aldana: The benefits are a direct reduction in disease which occurs in the human body—remember this is a direct reduction. And this reduction in disease is going to occur very quickly. This is where the largest and most tangible benefit occurs—a reduction in medical spending for adults as of result of quitting the use of tobacco. For those who continue to use the costs are staggering. First, there's the cost of lost economic output because tobacco users die premature. In fact, tobacco users die 12 to 14 years earlier than non-tobacco users. That's a huge reduction in productivity. In addition, as we've mentioned previously, tobacco users will incur significantly more medical care than non-users. Those are the big two. But let's not forget there's also the cost of things like home fires, and other insurance-related issues. All in all, the costs are enormous both in terms of the toll on health and human life, and the economic impact on the rest of society.

You mentioned that health benefits can occur relatively quickly...what else can you tell us?

Aldana: Depending on how long these people have used tobacco products, it's not uncommon that health benefits can be seen or realized in as little as three or four weeks. For example, if they're getting treatment for asthma or if they're using an inhaler to help clear them up, those things go away very, very quickly in the beginning. The big change obviously occurs a bit later. Believe it or not, blood pressures actually come back down to where they're supposed to be. That's a very good thing. One of the drawbacks to quitting is that many people gain a little bit

of weight along the way. But the benefits far outweigh the consequences. With more time, medical expenditures will actually reduce.

For an employer who is hoping to manage tobacco-induced high blood pressure, do you have a good sense of when those changes will occur?

Aldana: If you're talking about acute, short-term changes, it's not uncommon to see changes in vessel by dilation within 12-24 hours after stopping tobacco use. Blood pressure can correct itself in three to six months in some cases.

It's estimated that sedentary living—the fact that we're not moving around very much—costs us as a nation \$150 billion. This is in 1987 dollars. That's just due to healthcare costs associated with diseases that we get from not moving around.



So what do we know about the cost of overweight and/or obesity?

Aldana: When it comes to calculating costs, overweight and obesity are pretty much the same thing—they're just varying degrees of the same thing. By the way, about 67% of the population is either obese or overweight, and that number has some consequences associated with it.

In a nutshell, about 12% of total healthcare costs are obesity related. So for an employer, you can pretty much take all your healthcare costs for the year, take 12% of that, and you'll be pretty close to approximating your obesity burden—the amount of cost you have that is directly due to treating obese individuals. But there's more than that, and it's really interesting.

If you take, for example, someone who's obese and someone who's not, and they both have the same health condition or the same disease, it costs \$1,200 more to treat the obese person than it does the person who maintains

a healthy weight—even though it may not be an obesity-related condition. This increase in treatment costs occurs because it's more difficult to treat obese patients. It's tougher to get IV lines in them; it's tougher to do surgery on them; they have more complications. As a result, it costs \$1,200 more on average to treat an obese person than it does to treat a non-obese person for the same condition.

So between physical inactivity and obesity, it could cost an employer as much as 27% of their total healthcare claims?

Aldana: It's worse. The piece we're missing here is the diet piece. The diet piece plus sedentary living are both contributing to the obesity epidemic. That's when the numbers start to get really, really concerning. Indeed, when you factor this variable in, you're now looking at 35-40% of total healthcare costs. If you add in tobacco use, you're now sitting at 65-70% of total healthcare expenditures within your organization.



It costs \$1,200 more to treat an obese person than it does the person who maintains a healthy weight—even though it may not be an obesity-related condition.





Steve Aldana Speaks Out On...



▶ **The Cost of Physical Inactivity To Employers**

“If employers want to calculate what physical inactivity is costing their company, I would suggest that they take a look at their total healthcare expenditures for a year and take 15% of that.”

▶ **The Cost of Tobacco Using Female Employees**

“If you’re a female and you’re 24 years of age and you’re a smoker, it’s going to cost \$106,000 for you over your lifetime to treat the diseases that you get from tobacco use.”

▶ **The Cost of Tobacco Using Male Employees**

“If you’re a man, and you’re a tobacco user at age 24 and you use tobacco your whole life, it’s going to cost \$220,000.”

▶ **The Benefits of Quitting Tobacco**

“Depending on how long these people have used tobacco products, it’s not uncommon that health benefits can be seen or realized in as little as three or four weeks.”

▶ **The Cost of Healthcare For Someone Who’s Obese And Someone Who’s Not**

“If you take, for example, someone who’s obese and someone who’s not, and they both have the same health condition or the same disease, it costs \$1,200 more to treat the obese person than it does the person who maintains a healthy weight—even though it may not be an obesity-related condition.”

▶ **The Cost of Preventable Healthcare Claims To Employers**

“...when you factor in (preventable health conditions), you’re now looking at 35-40% of total healthcare costs. If you add in tobacco use, you’re now sitting at 65-70% of total healthcare expenditures within your organization.”

▶ **The Future**

“What we need now is boldness on the part of employers and health promotion practitioners. We really have to stop apologizing for suggesting changes in the workplace.”



So it really makes good sense for employers to get on these issues?

Aldana: It absolutely does. If you take the top 10 causes of death in the United States, diet is directly related to the top three—heart disease, cancer and stroke—not to mention diabetes. So you've got four of the top ten killers and you have the top three, which makes up about 70% of the total deaths in the United States. If you look at it in those terms, it's pretty significant.



Since we're talking about obesity, I would be remiss if I didn't ask the question concerning the CDC's own admission that it may have dramatically over-inflated the number of deaths associated with overweight and obesity in this country. How do you reconcile that as a researcher?

Aldana: First, we all have to admit that their numbers were flawed, and that in and of itself is an issue. But, you also have to look at the overall disease burden and total morbidity associated with the condition. And you have to look at all the diseases: coronary heart disease, cancer, stroke, diabetes, hypertension, and all the others that are related to carrying excessive body weight. When you look at it in those terms, it helps to reconcile the CDC's original estimates.

We've been talking about problems and costs for most of this interview. What do we know about the efficacy of interventions like physical activity?

Aldana: A good intervention is going to get those people who are not already exercising to either start thinking about and/or participating in some form of regular physical activity. It's not going to be a huge impact because it's very difficult to make that kind of dent in this problem. But, if we can increase physical activity among the general population, I think you're going to see that a few small percentage points will make a huge difference.

Here's one way to think about it.

Let's acknowledge the fact that 78% of our employees are sedentary. What if we dropped that number down to 75%? This would represent a three percent reduction in the number of people who are physically inactive. So what would that really mean for us if we were able to make a change like that?



Well, if you look at Dee Edington's data, that's \$1,500-\$3,500 savings for each person that reduces one of their risk factors. So, if you have 100 employees and you get a three percent increase in physical activity, on a monetary dollar-for-dollar basis, you would see a \$9,000 reduction in excessive claims for that one change alone. Obviously, those are rough estimates based on Dee Edington's work. But, let's say you could get a 20% increase in physical activity. Now the numbers start to get very compelling. But, you could expect far more from this type of change because with increased physical activity, you would start to see a reduction in musculoskeletal issues, diabetes, and blood pressure. With all of those changes would come additional savings.

The numbers from effective interventions are pretty compelling. But what does an effective intervention look like?

Aldana: Well there's still a lot of learning to do in this area, but we do know without hesitation, that the more intensive and more comprehensive, the better. It's like a dose response: the bigger dose you give them, the more they respond. So just a health risk appraisal will have some impact, but it will be very small. A health risk appraisal that's followed up by walking programs and competition between departments, including spouses and walking groups on their own and incenting them and giving them pedometers to help them track it, and having contests and then pulling all those together, it's going to have an even greater impact than if you just did an HRA as a stand alone. So my advice to employers is to make your interventions as intensive and comprehensive as possible.

Any final thoughts?

Aldana: I can tell you personally that I'm concerned about what the future holds. By 2015, we're going to be spending 20% of our GDP on healthcare. As a researcher, and as a citizen, I can tell you that is a big number. In fact, it's the biggest number the world's ever known. What we need now is boldness on the part of employers and health promotion practitioners. We really have to stop apologizing for suggesting changes in the workplace. If anything, we need to take the whole health promotion thing to the next level in organizations. The future depends on it. ★

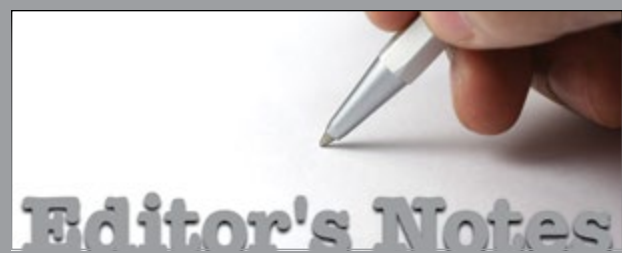
About Steven G. Aldana, PhD



Dr. Steve Aldana is a professor of Lifestyle Medicine in the Department of Exercise Sciences at Brigham Young University in Provo, Utah, and he is an adjunct faculty member of the University of Illinois School of Medicine. He has spent his career researching and teaching about the impact of lifestyle on disease and quality of life.

He has published over 60 research articles and has written five books on the connections between healthy living and disease prevention. He is a regular consultant to Centers for Disease Control and Prevention, the National Institutes of Health, and the California Department of Health Services. In the past few years he has given over 80 invited lectures and keynote speeches around the United States. He has received numerous state, private, and federal grants to research how the adoption of healthy behaviors can prevent, arrest, and even reverse many common chronic diseases such as cardiovascular disease, diabetes, and cancer.

As one who practices what he preaches, Dr. Aldana is passionate about educating people about the tremendous impact lifestyle has on disease and is devoted to helping individuals adopt and maintain healthy lifestyles. As a nationally recognized expert on healthy living, he is a highly sought after speaker and advisor. He lives in the heart of the Rocky Mountains with his wife and children. When he is not working in his garden he can often be found playing flag football, mountain biking, or running.



We've chosen to include this interview with Dr. Steve Aldana in this issue of *Absolute Advantage* because it addresses the cost of unhealthy behaviors to the nation's employers. In the context of this issue, we believe that this information can be invaluable to practitioners as they think about their present data collection efforts.



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BLUEPRINT FOR HEALTH

*A Framework For
Total Cost Impact*

*Estimating healthcare costs, absence, and presenteeism
and their relationship to poor employee health.*

John E. Riedel, MBA, MPH & Wendy Lynch, PhD

The Blueprint for Health (Blueprint) is a new decision tool for health and productivity management. The Blueprint estimates medical costs, absence and work impairment (presenteeism) among employees. It is intended primarily for companies that don't have access to productivity data or resources for their own data analysis.

The Blueprint was created because employers want to know the total costs of poor employee health including absence and work impairment as well as direct medical costs. Productivity loss due to absence and work impairment is typically greater than direct medical costs. Without knowing the full costs of employee health, decision makers are at a disadvantage when estimating how much they are spending on the health of their workforce. This also limits their ability to create effective health care strategies that target all aspects of cost.

Therefore, decision-makers often must choose among policies and interventions without sufficient information to assess their implications. Which medical conditions are most costly? How much of the cost is from medical care versus productivity loss? Among those who have these conditions, who is generating the highest costs? What is the distribution of costs and how can this information be used to devise overall healthcare strategy or intervention tactics?

Estimating Costs And The Inputs Required

The Blueprint estimates the full implications of cost including medical expenses, absences, and work impairment. Estimation models

based on actual multi-employer data are used to estimate total costs based on eight workforce characteristics including number of employees, age, gender, marital status, salary level, geographic location, exempt/non-exempt status, and deductible level. This gives users (especially large national companies) the opportunity to assess productivity loss and health care costs by these various characteristics. For instance, it may be useful to look at costs for the northeastern region of the country versus the southwest. The Blueprint provides a shorthand approach for estimating these differences.

These eight workforce characteristics were selected based on three criteria. First, the dataset needed enough cases to provide a reliable estimate of the effects of each variable. For example, there were hundreds of thousands of individual employees, enough to be confident about the effects of age and gender. However, to estimate the impact of a variable like industry sector, the dataset would have needed large multiples of employers in each industry. Thus, industry, at this time, is not included. Second, a variable needed to matter in the estimation calculations. If a variable did not help predict an outcome it was not included. Third, users needed to have the information readily available. If most employers do not know how to answer the question, eg. percent of people who have high numbers of risk factors, it was not included.

Estimation Accuracy Of The Blueprint

The Blueprint is quite accurate in the prediction of cost distributions for a workforce population. In hundreds of repeat internal tests fewer than

3% were misclassified into the wrong category. However, the more extreme the workforce characteristics chosen in the inputs (for example, all unmarried women over the age of 50, living in Alaska) the more likely it is that the Blueprint will be less accurate.

Despite these limitations, all populations have skewed distributions where a large portion of health-related costs are generated by a small portion of users. The distributions of costs across estimated levels are likely to be very representative of the distributions for most companies.

Outcomes Estimated By The Blueprint

The Blueprint provides cost data for three outcomes: medical costs, absence, and work impairment.

Medical costs are for employees only (not dependents) and include all medical and pharmacy claims. The total includes that paid by the insurer and the individual. The continuum of costs is organized into five segments: \$0 to \$1,199; \$1,200 to \$2,999; \$3,000 to \$8,999; \$9,000 to \$34,999; and \$35,000 plus.

Absence costs include paid sick leave and the STD benefit. Days are converted to costs by converting days to a percent of time absent (days absent divided by 240 work days). The salary equivalent is calculated by multiplying the percent of time missed by average salary. The continuum of absence is organized into four segments: up to 5 days; 6 to 10 days; 11 to 30 days; 31 or more days or more.

Work impairment is based on scores assigned by the Work Limitations Questionnaire (a proprietary tool available through the Tufts-New



England Medical Center). The scores have been validated against other measures of self-reported productivity loss, health status, and actual productivity measures. The total work impairment scores equate to a percent of time that a person is impaired while doing their job. A salary equivalent is calculated by multiplying the percent of time impaired by average salary. The continuum of work impairment is organized into five segments: 0%; 0 to 9.99%; 10 to 24.99%; 25 to 49.99%; 50% or more.

Assessing Absence And Work Impairment Costs

Perhaps of greatest value is simply the availability of data with which to understand costs and consider options. The majority of employers do not track absences in a formal system, and even fewer have detailed information about work impairment.

Using conservative estimates these two outcomes produce 60% of total health-related costs compared to 40% for medical expenses. In a population where salaries are high and work continuity leads to losses greater than salary, the value of absence and work impairment can approach 70% to 80% of total costs.

Understanding Skewed Distributions

While most of us know that medical costs are quite skewed across a workforce of employees, eg. very few people account for a high proportion of costs, less is known about this issue for absence and work impairment. What users will see is that significantly uneven distribution exists in these productivity outcomes, although, and importantly, the nature of the distribution is unique to each condition. So, while the average remains the most common

numeric expression used to describe the magnitude of costs, it is an inadequate descriptor and often oversimplifies the elements of overall cost to an employer.

Addressing The Issue Of Migration

Employers need to incorporate into their health management strategies the amount of migration that is likely to occur between cost levels. For instance, a diabetic who costs over \$9,000 in medical costs or is absent more than 30 days this year is likely to cost much less next year. People migrate up and down the cost continuum from year to year. Understanding how much migration is occurring is useful in terms of most effectively utilizing limited health care assets. For instance, where do you expect to get the best results from an intervention—keeping people at low cost/low risk from migrating upward or aggressively managing the most costly employees with the most severe conditions? The Blueprint also incorporates the user's defined turnover rate into estimations of migration and attrition from the company over time.

Understanding The Cost Of Various Conditions

Version 1 of the Blueprint produces specific estimates for all individuals, as well as individuals who have:

- ▶ Diabetes
- ▶ Hypertension
- ▶ Insomnia

The majority of employers do not track absences in a formal system, and even fewer have detailed information about work impairment.



What The Blueprint Can Do For You

Here is a short list of some of the ways the Blueprint may be useful for you:

- ▶ Gauging the overall impact of all health related costs to the bottom line.
- ▶ Understanding the contribution of three essential cost areas (medical care, absenteeism, work impairment) to overall costs of poor health at your company.
- ▶ Knowing the various factors that impact these three cost elements, eg. condition prevalence, age, gender, geographic location, exempt/non-exempt status, deductible level.
- ▶ Understanding the specific size of a particular condition in terms of medical cost, absenteeism, or performance impairment.
- ▶ Knowing the disparate distribution of costs within each cost area and how this impacts strategy or tactical decisions.
- ▶ Understanding the migration of individuals to higher or lower cost over time and the influence this has on how to target interventions.
- ▶ Convincing key leaders about the importance of knowing all elements of health related cost to the company.
- ▶ Making the business case for including productivity in a company's overall healthcare strategy.
- ▶ Assessing various strategy or program scenarios.

User Applications

In order to maximize efficiency of the Blueprint, five user applications have been developed to provide step by step instruction on how to answer specific questions. These are located on the home page. Additional applications will be developed based primarily on the feedback received from users. The user applications cover the following:

- ▶ How to estimate total health related costs including absence and presenteeism.
- ▶ Understanding the skewed distributions of health care cost, absence, and presenteeism.
- ▶ Estimating the costs for various health conditions.
- ▶ Understanding salary level and salary equivalence on productivity loss.
- ▶ Understanding the dynamics of the migration from year to year between various cost levels.

Who Developed The Blueprint?

This resource was developed by the Health As Human Capital Foundation, and Riedel & Associates Consultants, Inc. in collaboration with the American College of Occupational and Environmental

Medicine, and the National Business Coalition on Health, with support from Sanofi-Aventis Pharmaceuticals. A National Advisory Council provided ongoing input into the development process. Advisors included:

- ♥ **Larry Boress**
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Manager, Major Medical Plans
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- ♥ **Phillip Franklin, MD**
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- ♥ **Chris Goff**
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- ♥ **Stephen Goldman, MD**
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Caterpillar
- ♥ **Susan Heller, MD**
Medical Director
Southern Cal Edison
- ♥ **Rob Johnson**
Director of Global Benefits
Eastman Chemical
- ♥ **Laurel Pickering**
Executive Director
NY Business Group on Health
- ♥ **Bill Smith, MD**
Medical Director
Boeing
- ♥ **Mary Beth Stevens**
Director, Disability and Absence
General Electric

Access The Blueprint

To start benefiting from this unique resource log onto *blueprint.hbcfoundation.org* ★



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Developing a Data Dashboard

The Art and Science of Making Sense

By David Hunnicutt, PhD



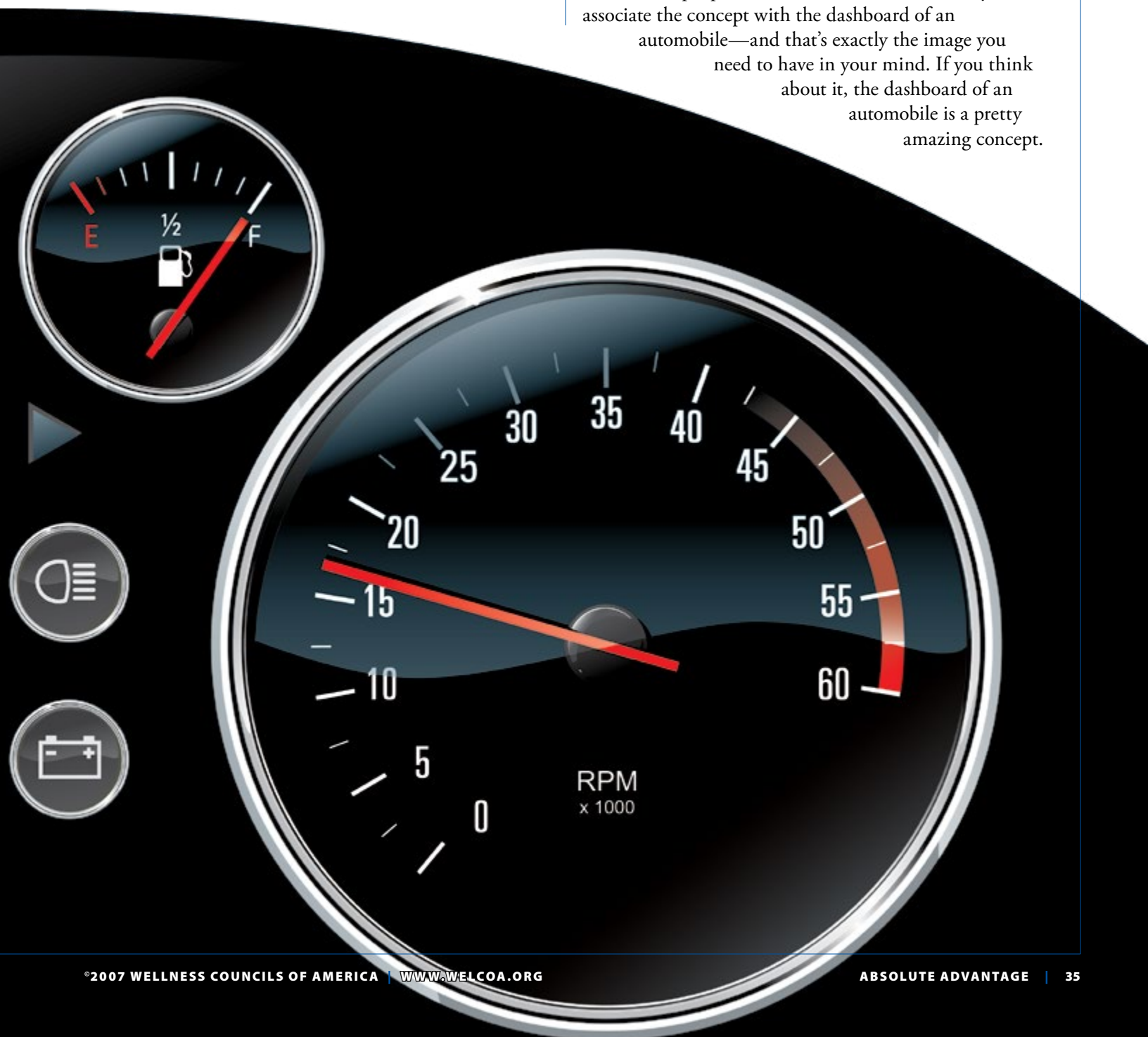
If you're looking to build a results-oriented wellness program, you'll need to collect data—a lot of it. Therein lies the challenge. It's a big job to put data collection mechanisms in place within your organization. But, believe it or not, once these systems are actually in place, it can be an even bigger job communicating the findings to those who need to be kept in the loop. Thus, once you have your data in hand, your challenge is to develop a communications methodology to make sure that stakeholders throughout the organization know what the numbers are and what they mean.

Perhaps the best way to ensure that everyone is kept in the loop is by developing a data dashboard. This article will discuss the art and science behind the concept of developing a data dashboard.

Defining The Data Dashboard

Data dashboards have been used in the business world for decades. However, the concept is still relatively new in the arena of worksite wellness. If you're unfamiliar with this concept, it should be reassuring to know that it is pretty straightforward. Here's a quick overview.

When most people think of a data dashboard, they associate the concept with the dashboard of an automobile—and that's exactly the image you need to have in your mind. If you think about it, the dashboard of an automobile is a pretty amazing concept.



“The interesting thing about the dashboard is that it provides you with the important information you need to know about how your automobile is functioning at a single glance—without having to understand how each of the individual parts work together.”

After all, even the most modest of motor vehicles have thousands of parts. All of these parts need to work together in order for the automobile to function properly. The interesting thing about the dashboard is that it provides you with the important information you need to know about how your automobile is functioning at a single glance—without having to understand how each of the individual parts work together.

For example, when you're driving it's not uncommon for you to glance at the dashboard dozens of times during even the shortest of trips. That's the power of the dashboard. In a single glance you can get the information you need to make sure that your vehicle is operating safely and legally. And, while it may take you some time to get your bearings when you're first learning to drive, with a little practice, you don't even notice how often you're processing the information contained on your automobile's dashboard.

If we zoom in on this concept a little further, we find that most people can operate this very complicated piece of machinery for years without ever having to understand anything about mechanics or automotive technology. In fact, with five pieces of information, it's possible for people to drive safely with little worry. Indeed, if you know how much gas you have in the tank, how fast you're going, how many miles to your next service, what gear you're in, and whether or not your lights are on, you're pretty much good to go.

A data dashboard for your worksite wellness initiative will work in much the same way.

Developing Your Data Dashboard

We recommend that every organization develop a data dashboard using the metrics associated with your particular worksite wellness program. Systematically, one of the first challenges in developing your data dashboard is choosing which metrics you're going to focus on. While there's no standard answer to which metrics you should use, we do have some suggestions.

► Health Risks

One set of metrics that lends itself beautifully to the data dashboard concept is the risk status of your employee population. Now here's where simplicity must rule the day. There's no question that your employees have diverse health histories and numerous modifiable and non-modifiable risk factors. Trying to communicate all of this information with a huge amount of detail is virtually impossible. However, if your employee population can be categorized into three basic groups—low-risk, moderate-risk, and high-risk—you've got the beginnings of a great data dashboard.

For example, imagine how easy it will be for your stakeholders to obtain a snapshot of the overall health of your workforce by looking at these three simple pieces of information. In a single glance, it will be possible for your company's decision-makers to know exactly what percentage of the employee population is at low, moderate, or high-risk.

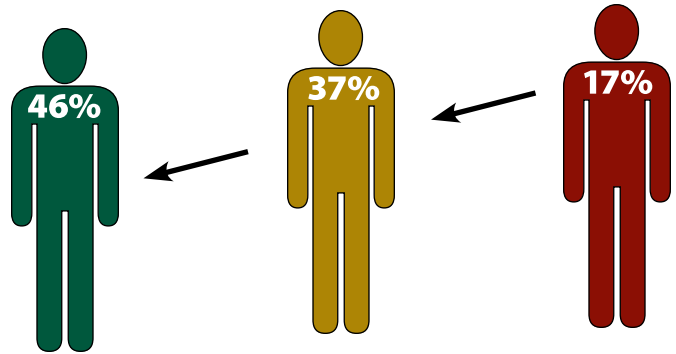


ABC Company Data Dashboard

1

High-Risk To Low-Risk

The first section of your data dashboard should be an overview of your employee population concerning what percentage is considered to be at high-risk, moderate-risk, and low-risk.



2

Modifiable Healthcare Expenditures

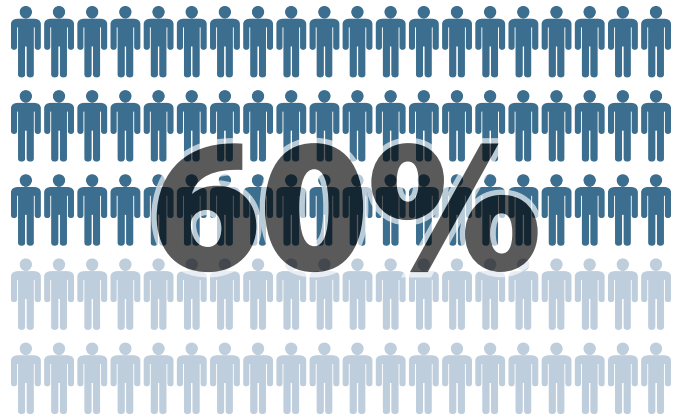
The second section of your data dashboard should be a summary of the modifiable healthcare costs your organization is incurring.



3

Participation Rates

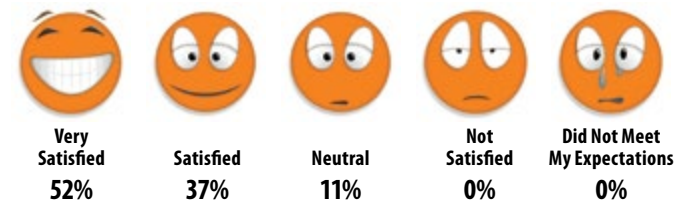
The third section of your data dashboard should present the participation levels as it relates to your company's health promotion initiative.

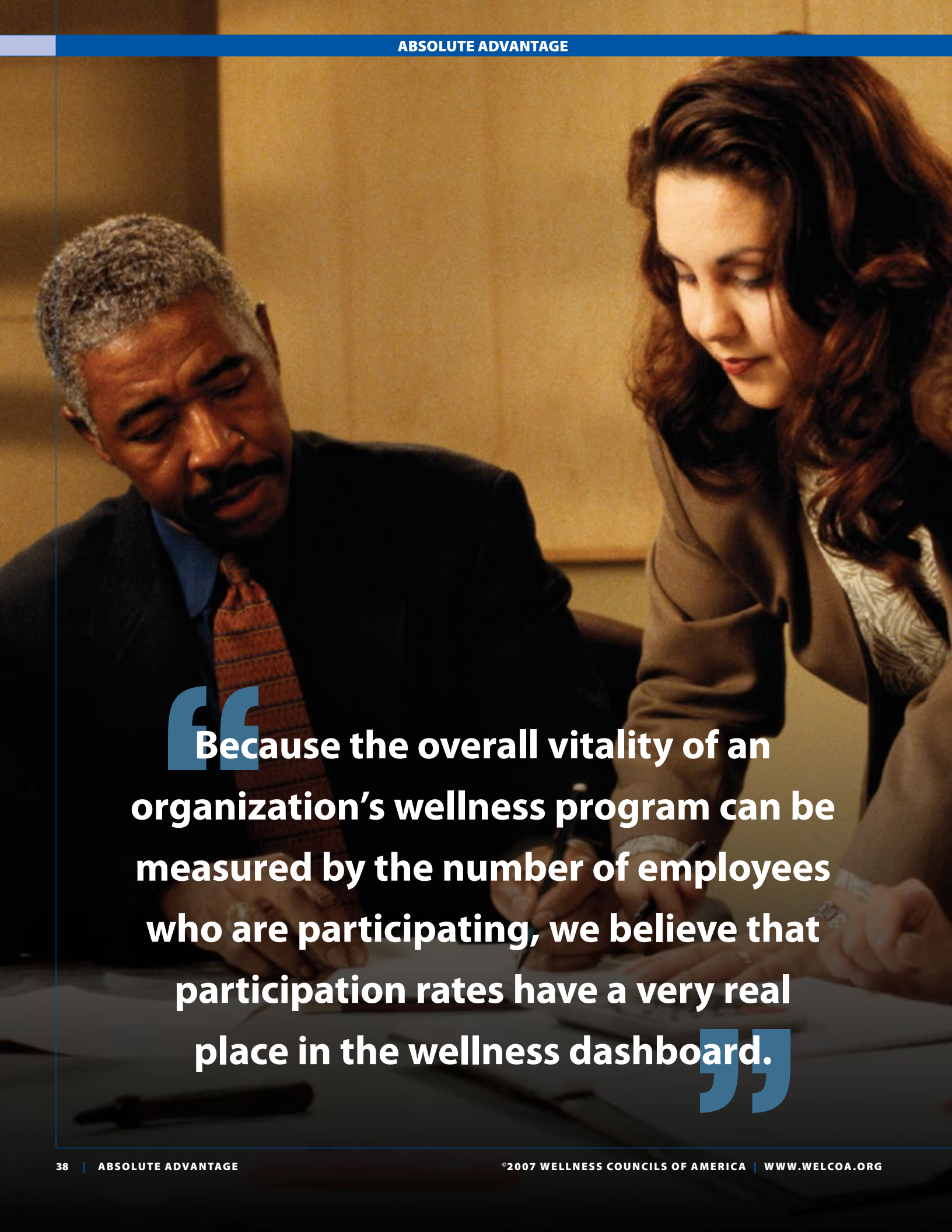


4

Participant Satisfaction

The fourth section of your data dashboard should communicate the percentage of employees who are very satisfied and/or satisfied with your company's wellness program offerings.



A photograph of a man and a woman in business attire. The man, on the left, has grey hair and a mustache, wearing a dark suit, blue shirt, and patterned tie. The woman, on the right, has long, wavy brown hair and is wearing a brown blazer over a patterned top. They are both looking down at documents on a table, with the woman holding a pen. The background is a plain, light-colored wall.

“ Because the overall vitality of an organization’s wellness program can be measured by the number of employees who are participating, we believe that participation rates have a very real place in the wellness dashboard. ”

▶ Modifiable Healthcare Expenditures

Another excellent metric for your data dashboard is the dollar amount of your modifiable healthcare expenditures. Although this is a little more of a sophisticated analysis, you need not be intimidated by it. Specifically, a modifiable healthcare expenditure analysis examines your existing medical care claims. Using specific algorithms, this analysis will determine what percentage of your company's overall healthcare claims are potentially modifiable. While not going too deep, it's not uncommon for 30-60% of an organization's total healthcare expenditures to be potentially modifiable. Nine times out of 10, your CFO will find this number very compelling. In fact, in our experience, we've found that this metric can be extremely valuable to an organization because it provides leaders with a specific dollar amount that can be reduced through comprehensive worksite health promotion initiatives.

Now imagine how this modifiable healthcare metric can be used within your data dashboard. In addition to understanding what percentage of your employee population is at low, moderate, or high-risk—by including this metric—your executives will also be able to see what percentage of the organization's total claims are potentially modifiable through comprehensive health promotion programs.

▶ Participation and Participant Satisfaction

Another metric that lends itself wonderfully to the data dashboard concept is participation and participant satisfaction. Because the overall vitality of an organization's wellness program can be measured by the number of employees who are participating, we believe that participation rates have a very real place in the wellness dashboard. And by providing participant satisfaction data (perhaps in the form of those who were satisfied or very satisfied), executives can have an even better grasp on how well your program is functioning.

▶ Other Potential Metrics

We've suggested four potential metrics that can get you started with your data dashboard. Needless to say, depending on your organization's industry and specific health concerns, your data dashboard may contain additional and/or different metrics. These metrics could include absenteeism rates, healthcare utilization, employee engagement, health culture audit results, just to mention a few.

Formatting Your Data Dashboard

Once you've defined the metrics that will be included in your data dashboard, it's time to concentrate on formatting. This is where you're going to want to spend some time to make sure that your dashboard is streamlined and elegant in its appearance—much the same way your automobile's dashboard is presented. Specifically, your dashboard should fit on one page and it should include more graphics than metrics. Remember, if people want more detail, they can read the wellness program's annual report or dig deeper into aggregate reports and excel spreadsheets. The dashboard provides a one-page visual of the overall health of your company's wellness initiative, and you should be able to read it in less than 15 seconds.

To develop a dashboard that's both informative and visually attractive, we suggest spending some time sketching your ideas. Again the concept here is to present a visual that everyone knows what it is when they get it, and they can read it in just a few seconds. If you're fortunate enough to have a graphic design department, they can help you with this. If not, we've provided a snapshot of what a data dashboard could look like in this article.

Once you have a working prototype of your dashboard, it's time to get some feedback. I would suggest running it by a sample of the people who are going to actually be reading it. Be prepared to listen carefully and take some serious feedback. Your executives can help you immensely by giving you their overall impressions. You've got to be willing to take the feedback constructively and use it to make your document better.



Communicating Your Data Dashboard

Once your wellness dashboard has been defined and formatted, it's time to start communicating the metrics to the organization. To ensure that executives understand how the dashboard works and what information is contained in it, it's ideal to have perhaps a 30-45 minute orientation session. This can be accomplished by getting on the agenda at senior staff meetings or incorporating this presentation into an annual strategic planning retreat. If you feel like you don't have the power to get on these agendas, it's time to start working closely with those who can get the job done. It may even mean handing the dashboard concept off to a senior-staffer who can carry the ball from there. Remember, the dashboard is all about communicating a shared understanding of how the wellness program is doing. It's not important who shares the information with the organization's stakeholders, but the important thing is that the information gets shared. In fact, in our experience, we've worked with dozens of astute wellness practitioners who have brilliantly

Keeping to an unalterable schedule is a critical concept in successfully developing and promoting your wellness data dashboard within the

organization.

developed top-notch ideas and empowered others to get the job done. While many times people don't see it, this is the idea of managing upward and it is a critical talent for wellness practitioners—especially if you want your programs to take hold within the organization.

Promoting Your Data Dashboard

The final step to fully integrating a wellness dashboard into your organization's culture is regularly promoting the data dashboard. By promoting, we are referring to the notion of disseminating important information so that stakeholders can be updated often enough but not too often. For many, data within the dashboard is communicated quarterly with more comprehensive information occurring on an annual basis. This seems to be a very good interval as a lot of other important business data is communicated on a quarterly basis.

If you make the commitment to communicating on a quarterly basis, it's important that you get the job done. If you want to be taken seriously, you'll have to follow through with the information on time. Indeed, just imagine how the company's shareholders would react if the company were late with the earnings report. We can assure you that this would only happen once. Keeping to an unalterable schedule is a critical concept in successfully developing and promoting your wellness data dashboard within the organization.

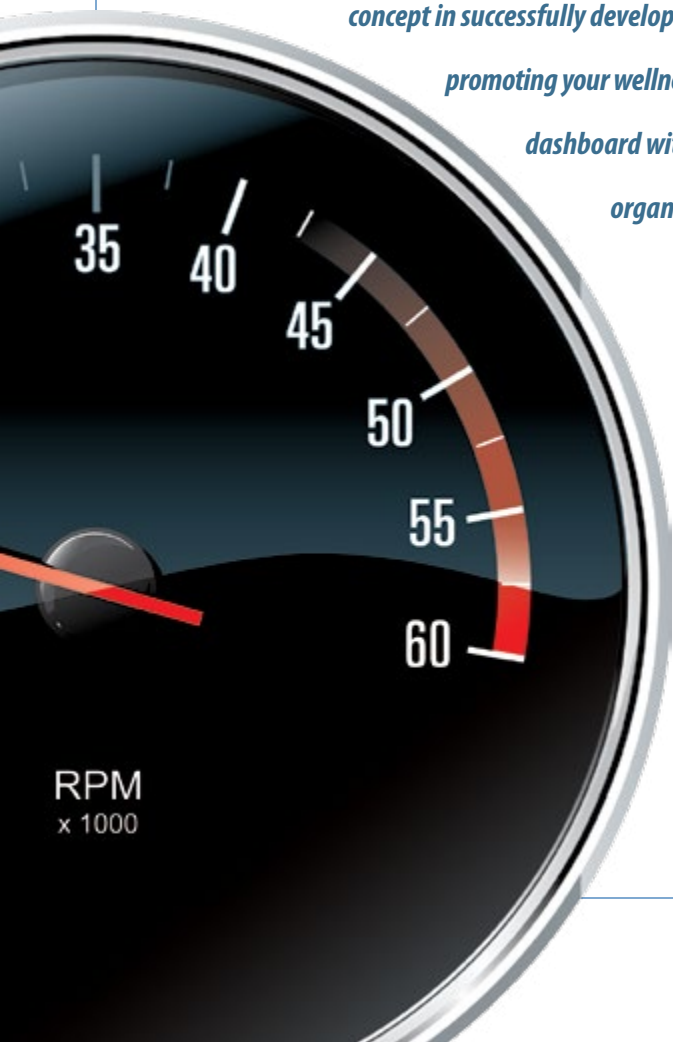
Summary

In this article we have discussed the notion of developing a data dashboard for your wellness initiative. To accomplish this task, it's important that you address what metrics will be included, how the dashboard will be formatted, and how often the metrics will be communicated. We're convinced that a data dashboard is the way to go. If you'd like to learn more about developing data dashboards, we encourage you to look into the mainstream business literature as well as contact practitioners who are leading the charge in some of America's healthiest companies. ★



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About The Wellness Council of America [WELCOA]



Based in Omaha, Nebraska, WELCOA was founded in 1987 as a national non-profit membership organization dedicated to promoting healthier life styles for all Americans, especially through health promotion initiatives at the worksite. Organizationally, WELCOA serves as an umbrella, linking communities and coalitions together into a supportive network that includes locally affiliated Wellness Councils, Well City initiatives, Well Workplaces, and individual and corporate members throughout the United States.

Working Well—Specifically, WELCOA focuses on building Well Workplaces—organizations that are dedicated to the health of their employees. The Well Workplace process provides business leaders and members with a structure or blue print to help their organizations build results-oriented wellness programs. Ultimately these programs help employees make better lifestyle choices, and positively impact the organization's bottom line. To date, over 700 companies have received the prestigious Well Workplace award. In addition, nine cities have been designated as Well Cities—Jacksonville, FL; Omaha, NE; Chattanooga, TN; Hobart, IN; Lincoln, NE; Kearney, NE; Kanawha Valley, WV; and Gainesville, FL and Bangor, ME—while several other cities have made the commitment to join this exclusive group.

Leading Edge Wellness Information—In addition to helping organizations build structurally sound wellness programs, WELCOA serves as a national clearinghouse and information center on worksite wellness. WELCOA responds to thousands of requests for information and materials by publishing a number of source books, a monthly health and wellness newsletter, an extensive line of brochures, as well as conducting numerous training seminars.

Wellness Council of America [WELCOA]

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The Well Workplace Checklist

Data Collection

To assess the data collection within your organization, we encourage you to answer the following 16 questions. If you're interested in getting a score and a response to these questions, be sure to log on to InfoPoint—WELCOA's members only website—and take the Well Workplace Checklist in its entirety. In so doing, you will receive a set of scores for each of the seven benchmarks as well as a customized, in-depth report on your company's overall wellness efforts.

1 Our organization has conducted a demographic analysis in the last 12 months on:

- Employees Only Employees and Spouses
- Employees, Spouses, and Dependents
- Employees, Spouses, Dependents, and Retirees
- We have not conducted a demographic analysis in the last 12 months.

2 Our organization has conducted a healthcare claims analysis in the last 12 months on:

- Employees Only Employees and Spouses
- Employees, Spouses, and Dependents
- Employees, Spouses, Dependents, and Retirees
- We have not conducted a healthcare claims analysis in the last 12 months.

3 Our organization has conducted a corporate health culture audit in the last:

- 12 months 24 months
- 36 months 48 months
- We have not conducted a corporate health culture audit.

4 Our organization has conducted an analysis of employee productivity/presenteeism/engagement in the last:

- 12 months 24 months
- 36 months 48 months
- We have not conducted an analysis of this type.

5 Our organization has conducted a health interest survey in the last 12 months to assess:

- Employee Interests
- Employee and Spouse Interests
- Employee, Spouse, and Dependent Interests
- Employee, Spouse, Dependent, and Retiree Interests
- We have not conducted a health interest survey in the last 12 months.

6 Our organization has offered employees the opportunity to participate in a Health Risk Appraisal in the last:

- 12 months
- 24 months
- 36 months
- 48 months
- We have not conducted an analysis of this type.

7 Our organization has offered employees the opportunity to participate in a Health Screening in the last:

- 12 months
- 24 months
- 36 months
- 48 months
- We have not offered employees the opportunity to participate in a Health Screening.

8 Our organization has offered a survey in the last 12 months to assess health knowledge of:

- Employees Only
- Employees and Spouses
- Employees, Spouses, and Dependents
- Employees, Spouses, Dependents, and Retirees
- We have not offered this type of survey in the last 12 months.

9 Our organization has conducted an ergonomic/work station analysis for all employees in the last:

- 12 months
- 24 months
- 36 months
- 48 months
- We have not conducted an ergonomic/work station analysis.

10 Our organization has conducted a facility assessment in the last:

- 12 months
- 24 months
- 36 months
- 48 months
- We have not conducted a facility assessment.

11 Our organization has conducted an analysis of the effectiveness of our benefit plan in the last:

- 12 months
- 24 months
- 36 months
- 48 months
- We have not conducted this type of analysis.

12 Our organization has conducted an analysis of our cafeteria/vending machines/physical activity centers in the last:

- 12 months
- 24 months
- 36 months
- 48 months
- We have not conducted this type of analysis.

13 Our organization has conducted an analysis of absenteeism records in the last:

- 12 months
- 24 months
- 36 months
- 48 months
- We have not conducted this type of analysis.

14 Our organization has conducted an analysis of disability claims in the last:

- 12 months
- 24 months
- 36 months
- 48 months
- We have not conducted this type of analysis.

15 Our organization has conducted an analysis of workers' compensation claims in the last:

- 12 months
- 24 months
- 36 months
- 48 months
- We have not conducted this type of analysis.

16 Our organization has conducted an analysis on injury/accident records in the last:

- 12 months
- 24 months
- 36 months
- 48 months
- We have not conducted this type of analysis.

For more information, log on to WELCOA's InfoPoint website:



The Well Workplace Checklist—a copyrighted and trademarked tool of WELCOA—is an interactive assessment that will help you determine how your organization is doing with respect to worksite wellness. To complete the online assessment, you'll

need to log on to *InfoPoint*—WELCOA's members only website. Once there, the Checklist should take you about 20 minutes to finalize. Once you are finished, you will be able to download a short report outlining your overall scores. Shortly thereafter, a full report will be emailed directly to you.





WELCOA's Seven Benchmarks of Success

For the past 20 years, the Wellness Councils of America has dedicated its efforts to studying and promoting the efforts of America's Healthiest Companies. During that period, WELCOA developed its patented Well Workplace process. At the core of the Well Workplace model, we have identified seven key benchmarks of success.

Specifically, these seven benchmarks are inherent in companies that have built results-oriented workplace wellness programs.

Benchmark #1: Capturing CEO Support

From our experience, CEO support is essential to the process of developing best-in-class programs. Indeed, we know of very few programs that have contained costs and improved employee health that don't have strong senior level support.

Benchmark #2: Creating Cohesive Wellness Teams

Once CEO support has been captured, the next task is to create a cohesive wellness team. Teams are essential to building great wellness programs because they help to distribute the responsibility for wellness throughout the organization.

Benchmark #3: Collecting Data To Drive Health Efforts

The team's first and primary responsibility is not to start offering programs, but rather to step back and gather important data. The data will be collected using corporate culture audits, health risk appraisals, and knowledge and interest surveys. This data is extremely important because it will reveal the specific areas of health needs and interests within the organization.

Benchmark #4: Carefully Crafting An Operating Plan

With essential forms of data having been collected, the task is now to develop an operating plan for health and wellness within the organization. This operating plan will serve as the roadmap and will guide the company's efforts and investments in workplace wellness.

Benchmark #5: Choosing Appropriate Interventions

With the first four benchmarks completed, it is now appropriate to begin choosing and implementing the appropriate health and productivity interventions. These interventions will most likely include tobacco cessation, physical activity, weight management, self-care, and stress management. But, they also may include things like fatigue management and ergonomics—depending on what the company's data reveals.

Benchmark #6: Creating A Supportive Environment

Once the appropriate health promoting interventions are up and running, it's time to create a supportive environment. Indeed, by having a supportive environment, organizations can be confident that employees will be supported in their efforts to lead healthier lives. Environmental interventions may take the form of policies, physical modifications, and rewards and incentives.

Benchmark #7: Carefully Evaluating Outcomes

The seventh and final benchmark in the Well Workplace model is carefully evaluating outcomes. It is within this benchmark that companies will religiously keep score when it comes to their wellness program. Evaluation targets include things like participation, participant satisfaction, behavior modification, and cost containment.

Wellstream

Health Risk Assessment

WELCOA's Online Health Risk Assessment

The Wellness Councils of America, one of the nation's premier resources for workplace health promotion, is proud to introduce *Wellstream*. *Wellstream* is an innovative, user-friendly health risk assessment. This powerful online tool will help your employees to assess and monitor their personal health status. More importantly, *Wellstream*—through its aggregate reporting function—will allow you as an employer to decipher important organizational health trends and introduce the appropriate health management interventions.

Wellstream Is More Than Just An HRA

With more than two decades in the business of worksite wellness, WELCOA can help you set up an aggressive and effective communication campaign and incentives to drive up participation. So when you purchase *Wellstream*, you'll get much more than just an online assessment...you'll get a partner who is committed to helping you succeed.

Wellstream Can Be Customized

If you're looking for a custom tool, we can help you create a look and feel that's uniquely your own. From adding your logo to complete customization, *Wellstream* can fit any desire.

Wellstream Is Affordable And Cost Effective

When choosing a health risk assessment, cost is always a factor. That's why we've chosen to price *Wellstream* competitively. In fact, you'll find that *Wellstream* is perhaps the most cost effective HRA in the industry. Please contact a *Wellstream* representative at **402.827.3590** or send an email to **info@wellstreamonline.com** to inquire about custom pricing.

Contact WELCOA Today for Your Price Quote

Phone: 402.827.3590

Email: info@wellstreamonline.com

Web: www.getwellstream.com



Collecting Data To Drive Health Efforts

Developing Results-Oriented Wellness Programs One Company At A Time



This issue of *Absolute Advantage* is dedicated to the notion of collecting data to drive your company's health efforts. The third of the seven critical benchmarks of success,

Collecting Data To Drive Health Efforts, is an essential step in developing a results-oriented wellness program. To help you get a better understanding, we've devoted the entire issue to this benchmark.

Initially, we begin by presenting 10 reasons why data collection is a key step in building a results-oriented program. We then turn our attention to specifying the three "non-negotiable" forms of data that must be collected in order to be successful.

To help you understand what your data actually means, we've conducted an expert interview with Dr. Steve Aldana. In this interview, Dr. Aldana lays out the specific costs of unhealthy behaviors. This information should be useful to you as it will provide you with an opportunity to compare your data against national norms and approximate the cost of unhealthy behaviors within your company.

With respect to communication, we've also included an article about developing a data dashboard. This dashboard will help you to distribute data effectively to all stakeholders within your organization.

Perhaps the most exciting part of this month's edition is that we present two new tools. The *Wellstream* Personal Health Assessment is WELCOA's newest data gathering tool. In addition, we also present *Blueprint For Health*. This tool is a useful framework to help you estimate healthcare costs, absence, and presenteeism and their relationship to poor employee health.

We hope that you enjoy this issue of *Absolute Advantage*.

Yours in good health,

Dr. David Hunnicutt
President

10 Reasons— Why Data Collection Is An Essential Step In Building A Results-Oriented Wellness Program

In this article, we'll outline 10 reasons why data collection is important to your company's overall population health management initiative.

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10 By The Numbers

When it comes to collecting data, there are three sources that should be considered non-negotiable. Is your company measuring up?



18 Choosing A Personal Health Assessment

In an effort to help both large and small businesses manage rising healthcare costs and assist a rapidly aging workforce, WELCOA has developed a comprehensive, personal health assessment.



22 The Costs of Unhealthy Behaviors

Data collection is only useful if you have something to compare it to. In this expert interview, Dr. Steve Aldana speaks out on the costs of unhealthy behaviors.



30 Blueprint For Health

The *Blueprint For Health* is a new decision tool for health and productivity management. The blueprint estimates medical costs, absence, and presenteeism among employees.



34 Developing A Data Dashboard

If you're looking to build a results-oriented wellness program, it's essential that you develop a data dashboard for your organization. Read on to learn more about the art and science of making sense of your data.