The World of Wellness

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American Benefits Council

April 5, 2011
The World of Wellness

- PPACA
- ERISA
- HIPAA Nondiscrimination & Wellness
- ADA
- GINA
- Tax
- HIPAA Privacy
- Sample Wellness Scenarios
PPACA Impact on Wellness

- More employers/insurers considering whether to use wellness programs to encourage healthier behavior or to offer preventive care services, such as screenings.

- HIPAA wellness program rewards increased from 20% to 30% in 2014 (and Secretary has discretion to increase to 50%).

- White House meetings with employer and consumer groups about possible need for additional consumer protections.

- Tri-Agency meeting (HHS, DOL, IRS) on whether additional consumer protections needed.
Is program an ERISA plan?

- If employer is involved and program provides “medical care,” program likely is an ERISA plan.

- “Medical care” if individualized and provided by trained professionals. E.g., coaching by nurse, counseling by therapist, biometric screening.

- Not “medical care” if general education. E.g., articles about health condition, weight loss class (without individual assessment).

- Real Life Example: Biggest Loser Program offered by Employer. If coupled with individualized coaching, may be an ERISA plan.
Where is the “ERISA” line?

- Probably Not ERISA Benefit
  - Health Newsletter
  - Email Appointment Reminders
  - Weight Watchers Class
  - Fitness Center
  - Subsidy for Healthy Options in Cafeteria
  - Pedometers

- Probably ERISA Benefit
  - Traditional Employee Assistance Program
  - Comprehensive, Individualized Coaching
  - Disease Management
  - Flu Shot?
  - Biometric Screenings?
  - Smoking Cessation? (Smoking cessation is medical care for tax purposes.)
If an ERISA Plan . . .

- HIPAA Nondiscrimination & Wellness Rules
- SPD / Plan Amendment
- COBRA
- Claims Procedures
- PPACA
Does program discriminate based on health status?

- Does program offer different reward/penalty based on health? E.g., Only individuals with diabetes eligible.

- Does program require participants to meet a health standard? E.g., Reward if cholesterol is below certain level or for not smoking.

- If so, must comply with HIPAA nondiscrimination rules (next slides). If not, no HIPAA nondiscrimination issue.
If HIPAA Nondiscrimination Rules Apply . . .

- Generally, a group health plan cannot differentiate at all based on a health factor.

- Two Exceptions:
  - “Benign” Discrimination
  - Wellness Program that meets HIPAA Rules

1\textsuperscript{st} Exception - Does program involve “benign” discrimination?

- HIPAA allows group health plan to discriminate in favor of individual with adverse health status.

- Real Life Example: Only individuals with diabetes are eligible for a disease management program. If participate in program, earn one month premium holiday.

- Note that if program is structured differently so that penalty is imposed for not participating, that would not be benign discrimination and must meet 2\textsuperscript{nd} exception (wellness program).
2nd Exception – Does program meet wellness rules?

- Five Factors
  - Amount of Reward/Penalty
  - Reasonable
  - Annual Qualification
  - Reasonable Alternative
  - Disclosures
HIPAA Wellness Rules
Factor #1 – Amount of Reward

- Reward for all health standard-based wellness programs cannot exceed 20% of cost of single employee coverage (increases to 30% in 2014).

- Cost of coverage includes employer + employee contributions.
  - For example, if employer contribution is $60, employee contribution is $40, total cost is $100. Reward limit = $20.

- Use single rate if only employee is eligible for wellness program (may use family rate if dependents also eligible).
  - For example, single coverage is $100, family coverage is $200. If wellness program only open to employees, maximum incentive is $20, even for employees who have family coverage. If wellness program open to dependents, too, maximum incentive is $40 (total for all family members).
HIPAA Wellness Rules
Factor #2 – Reasonable Standard

- Must be reasonably designed to promote good health.

- Will be “reasonable” if –
  - Reasonable chance to improve health or prevent disease;
  - Not overly burdensome;
  - Not a subterfuge for discrimination based on health; and
  - Not “highly suspect” (e.g., illegal).
HIPAA Wellness Rules

Factor #3 – Annual Qualification

- Must give plan participant opportunity to qualify at least once per year.

- Precludes plan from “locking in” reward based on initial health status.
HIPAA Wellness Rules

**Factor #4 – Reasonable Alternative**

- Must allow “reasonable alternative” to those who can show it is unreasonably difficult due to medical condition, or medically inadvisable, to satisfy standard.

- May require doctor’s certification.

- Examples:
  - Reasonable alternative to stop smoking requirement – attend smoking cessation class.
  - Reasonable alternative to lower cholesterol requirement – require participant to follow doctor’s advice.
  - Reasonable alternative to low BMI requirement – exercise 20 minutes per day.
HIPAA Wellness Rules

Factor #5 – Disclosure

- Plan must disclose availability of reasonable alternative standard in plan material describing wellness program.
- Not required to determine alternative ahead of time (may determine if individual requests).
- Regulations provide safe harbor language.
ADA

- ADA prohibits “medical examinations and inquiries” unless voluntary.
  - For example, a biometric screening or health risk assessment may trigger this rule.
- EEOC has indicated that an employer may request information as part of a “voluntary” wellness program if the employer neither requires participation nor penalizes employees who do not participate.
- No further guidance on what is “voluntary.”
- EEOC has issued informal guidance that mandatory HRA may violate this rule.
- EEOC has said compliance with HIPAA wellness rules does not mean compliance with ADA (it is separate law).
- Note possible exception for bona fide plans if HRA not used as subterfuge for discrimination.
Recent Florida case (*Seff v. Broward County, S.D. Fla.*)

Plaintiff suing plan that has HRA and biometric screening. If do not participate, must pay $20 more in premiums per pay period.

Plaintiff says this violates the “voluntary” requirement of ADA prohibition on disability-related inquiries and medical examinations.

EEOC declined to investigate and issued Right to Sue letter.

Case has been certified as a class action.
Genetic Information Nondiscrimination Act (GINA) Title I

- DOL/HHS/IRS issued regulations that apply to group health plans (Title I).
- Plan cannot offer any type of incentive (even a t-shirt) for completion of a Health Risk Assessment that asks family history. Plan either must remove those questions or set them apart and be clear that incentive will be paid regardless of whether family history questions are answered.
- Plan cannot collect genetic information prior to or in connection with enrollment.
- Plan cannot use genetic information to automatically enroll an individual for disease management (but may target individuals to invite to them to join).
Genetic Information Nondiscrimination Act (GINA) Title II

- EEOC issued GINA regulations that apply to employers (Title II). EEOC says that these would apply to employer-sponsored plans.

- An employer generally cannot request or require genetic information (including family history).

- Exception for voluntary wellness program where participant authorizes. Genetic information only may be disclosed to the individual or a health care provider (not employer).

- May not provide financial incentive for completion of an HRA that includes family history question (but may separate out questions and make clear incentive is not paid for family history questions).

- May not provide financial inducement based on genetic information to participate in disease management unless also offer to others (e.g., those who are at-risk for other reasons or who have current condition).
Is reward taxable?

- Cash reward is taxable.
- Gift certificates / gift cards are taxable.
- Gifts are taxable (unless below de minimus).
- Premium holidays, lower deductibles, contribution to HRA/HSA not taxable (but HSA/HRA contributions may need to be reported on W-2 for information purposes).
Are there HIPAA privacy restrictions?

- May need privacy procedures to safeguard information.
- May need to include in HIPAA privacy notice.
- May need business associate contract with wellness program vendors.
- May need authorization to disclose PHI (for example, to employer to pay incentive).
Wellness Scenario

Health Risk Assessment

- Plan wants all participants to take an HRA.
- The HRA asks about the participant’s weight, habits, conditions, and family medical history.
- The plan will pay $25 to each person who completes the HRA.
- If there is not enough participation, next year the plan will impose a premium surcharge (penalty) on those who do not participate.
- If that doesn’t work, plan will require participation.
Wellness Scenario
Smoker Surcharge

- Plan wants all participants to certify at enrollment whether they smoke.
- $25 per pay period smoker surcharge for those who smoke.
- The plan will pay $25 to each person who completes the HRA.
- If there is not enough participation, next year the plan will impose a premium surcharge (penalty) on those who do not participate.
- If that doesn’t work, plan will require participation.
Wellness Scenario
Biometric Screening

- Program offers on-site health fair with biometric screenings.
- Screenings for cholesterol, BMI, and nicotine.
- $25 reward for just undergoing screening.
- $75 reward ($25 each) if good result on 3 areas of screening.
- Health-based rewards must be subject to 20% limit, with reasonable alternative.
Wellness Scenario
High Blood Pressure

- Plan identifies those with high blood pressure through claims history and HRA.
- Plan offers case management with mentoring and monitoring by a nurse, including regular blood pressure checks.
- If identified, individual must participate or must pay 20% more for premiums each month.
- Individual only has to participate (does not have to show results).
Wellness Scenario

Diabetes Disease Management

- An insurer offers a diabetes disease management program for those who are identified as at-risk.

- Program includes coaches, appointment reminders, and, in some cases, additional benefits (extra eye exams).

- **Employer A** - if an identified individual participates, he pays $20 less a month for health coverage.

- **Employer B** - if an identified individual does not participate, he pays $20 more a month for health coverage.
Wellness Scenario
Second Transplant

- Plan has case management program for transplant services.

- Program assists those with transplants with setting up appointments and following doctor’s orders.

- If individual does not participate in transplant case management, plan will not pay for second transplant (where individual did not follow recommended care).
Bonus Wellness Scenario

Motorcycle Helmets

- Plan encourages responsible behavior.
- Plan will not cover treatment for motorcycle accidents where individuals did not wear a helmet.
- HIPAA Nondiscrimination Rules – may not deny eligibility altogether because engage in risky behavior (such as motorcycles or bungee jumping).
- But can exclude benefits related to certain activities.
The World of Wellness

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ENGAGEMENT!

Findings From The Willis 2010 Annual Health & Productivity Survey

Beth Stewart
Regional Wellness Consultant
April 5th, 2011
About The Survey...

- 1,949 participants (1,352 complete)
- 1,030 currently offer a program
  - 57% basic
  - 33% intermediate
  - 10% comprehensive
- Representation from all regions & industries

Download the report at:
http://www.willis.com/What_We_Think/Publications/Employee_Benefits
Why Employee Engagement Matters

- Higher productivity
- Lower turnover
- Attract top talent
- Enhanced reputation
- Improved customer satisfaction and loyalty
- Reduced absenteeism
- Sustainable growth
- More supportive of organizational change initiatives
- Resilient in the face of change
The value of strategies maximizing both health and engagement are dramatic.

- $3,335 expense reduction/employee (v. low performers)
- 350% Growth variance (v. low performers)
- 250% Earning increase (v. low performers)
- 150% Margin expansion (v. low performers)

### The Size Of The Prize

<table>
<thead>
<tr>
<th></th>
<th>High Performers</th>
<th>Low Performers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Cost</td>
<td>$7,138/ee</td>
<td>$8,167/ee</td>
</tr>
<tr>
<td>Turnover</td>
<td>4%</td>
<td>11%</td>
</tr>
<tr>
<td>Cost of Turnover</td>
<td>$500/ee</td>
<td>$1,375/ee</td>
</tr>
<tr>
<td>Absenteeism</td>
<td>$1,430/ee</td>
<td>$2,861/ee</td>
</tr>
<tr>
<td>Income Growth</td>
<td>14%</td>
<td>4%</td>
</tr>
<tr>
<td>Earnings</td>
<td>28%</td>
<td>11%</td>
</tr>
<tr>
<td>Margin</td>
<td>2.1%</td>
<td>1.4%</td>
</tr>
</tbody>
</table>

Data source: 2010 Raising the Bar TowersWatson
Engagement

The Health & Productivity Link

- When health is compromised, difficult to engage in anything
- As workers become more engaged, physical health improves in equal measure
- Clinical risk values go up & down in correlation to engagement
- Core elements of worksite wellness essential to managing energy & resilience

Engagement is defined variously as:

- Emotional involvement or commitment to the organization, its values and goals
- Willing to “go the extra mile” for the company, expend discretionary effort toward the achievement of goals
- When employees feel positive emotions toward their work, find their work to be personally meaningful, consider their workload to be manageable and have hope about the future of their work
- A positive, fulfilling work-related state of mind characterized by three aspects:
  1. Physical component, or vigor (e.g., “At my work I am bursting with energy”);
  2. Emotional component or dedication (e.g., I am enthusiastic about my job”);
  3. Cognitive component or absorption (e.g., I am immersed in my work”)
Organizational Engagement

Our organization has a specific and defined strategy in place to improve employee engagement.

- Yes: 72%
- No: 28%

We consider our wellness program to be an important part of our overall employee engagement strategy.

- Yes: 64%
- No: 36%
# Measuring Engagement

## We Measure Employee Engagement in the Following Ways:

<table>
<thead>
<tr>
<th>Method</th>
<th>Total</th>
<th>Fewer than 100</th>
<th>101 to 500</th>
<th>501 to 1,000</th>
<th>1,001 to 5,000</th>
<th>5,001 or more</th>
</tr>
</thead>
<tbody>
<tr>
<td>We do not currently measure employee engagement.</td>
<td>51%</td>
<td>61%</td>
<td>51%</td>
<td>62%</td>
<td>50%</td>
<td>24%</td>
</tr>
<tr>
<td>We conduct our own internal survey of all employees.</td>
<td>30%</td>
<td>25%</td>
<td>32%</td>
<td>17%</td>
<td>33%</td>
<td>38%</td>
</tr>
<tr>
<td>We solicit feedback from managers/supervisors about the engagement level of their respective departments.</td>
<td>17%</td>
<td>16%</td>
<td>19%</td>
<td>10%</td>
<td>16%</td>
<td>21%</td>
</tr>
<tr>
<td>We have contracted with an external organization who conducts an annual survey of our associates.</td>
<td>14%</td>
<td>4%</td>
<td>9%</td>
<td>13%</td>
<td>18%</td>
<td>35%</td>
</tr>
<tr>
<td>Other, please specify:</td>
<td>6%</td>
<td>2%</td>
<td>6%</td>
<td>13%</td>
<td>4%</td>
<td>7%</td>
</tr>
</tbody>
</table>
Top 5 factors to improve employee engagement

- Increasing marketing and communication with potential program participants: 56%
- Setting more specific public goals for achievement: 45%
- More coordinated efforts: 44%
- Addressing trust or morale issues with employees: 37%
- Personalizing messages to recruit program participation: 33%
Prevalence of Wellness Programs

- Wellness Program in place: 75%
- Plan to offer one in the future: 11%
- No current program: 46%

Legend:
- Large employers (1,000 or more employees)
- Employers under 1,000 employees
- All employers
Wellness Program Types

Of those with a wellness program:

- 57% have a basic program
- 33% have an intermediate program
- 10% have a comprehensive program
Who Can Participate?

This year, slightly fewer spouses and dependents and spouses of retirees were eligible to participate in wellness programs.

- 38% included wellness benefits for spouses, slightly down from 43% last year.
- 18% covered dependent children.
- 7% covered retirees.
- 5% covered spouses of retirees.
Healthy Lifestyle Programs Offered

Top 3 programs offered:
- Weight Management 50%
- Tobacco Cessation 49%
- Physical Activity 48%
Leadership Support
## Critical Success Factors

<table>
<thead>
<tr>
<th>Factor</th>
<th>Not Important</th>
<th>Neutral</th>
<th>Somewhat important</th>
<th>Very important</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strong internal leader championing wellness within company</td>
<td>4%</td>
<td>11%</td>
<td>21%</td>
<td>63%</td>
</tr>
<tr>
<td>Culture of health throughout the organization</td>
<td>4%</td>
<td>10%</td>
<td>28%</td>
<td>59%</td>
</tr>
<tr>
<td>Incentives for employee participation</td>
<td>5%</td>
<td>16%</td>
<td>36%</td>
<td>43%</td>
</tr>
<tr>
<td>Communication of program goals and components</td>
<td>4%</td>
<td>10%</td>
<td>26%</td>
<td>60%</td>
</tr>
<tr>
<td>Management support</td>
<td>3%</td>
<td>10%</td>
<td>20%</td>
<td>67%</td>
</tr>
<tr>
<td>Sustainability of program</td>
<td>4%</td>
<td>10%</td>
<td>30%</td>
<td>56%</td>
</tr>
<tr>
<td>Leadership role provided by supervisors and co-workers</td>
<td>4%</td>
<td>14%</td>
<td>33%</td>
<td>49%</td>
</tr>
<tr>
<td>Strong partnership with vendor/satisfaction with services</td>
<td>6%</td>
<td>17%</td>
<td>33%</td>
<td>44%</td>
</tr>
<tr>
<td>Return on investment statistics</td>
<td>9%</td>
<td>26%</td>
<td>40%</td>
<td>25%</td>
</tr>
</tbody>
</table>
## Leadership Support

**Do you regularly request that your leadership team and other levels of management participate in ongoing wellness program activities?**

<table>
<thead>
<tr>
<th>How many workers does the company employ?</th>
<th>Total</th>
<th>Fewer than 100</th>
<th>101 to 500</th>
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<th>1,001 to 5,000</th>
<th>5,001 or more</th>
</tr>
</thead>
<tbody>
<tr>
<td>N = 583</td>
<td>583</td>
<td>85</td>
<td>225</td>
<td>87</td>
<td>115</td>
<td>71</td>
</tr>
<tr>
<td>Yes</td>
<td>44%</td>
<td>42%</td>
<td>45%</td>
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<td>44%</td>
<td>38%</td>
</tr>
<tr>
<td>No</td>
<td>56%</td>
<td>58%</td>
<td>55%</td>
<td>55%</td>
<td>56%</td>
<td>62%</td>
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**Do you regularly request from your leadership team that they communicate program success stories, challenges, status updates and/or financial impact results to the employees?**

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<td>23%</td>
<td>24%</td>
<td>29%</td>
<td>32%</td>
</tr>
<tr>
<td>No</td>
<td>76%</td>
<td>85%</td>
<td>77%</td>
<td>76%</td>
<td>71%</td>
<td>68%</td>
</tr>
</tbody>
</table>
# Leadership Support

**Do you conduct any specific trainings with senior leadership to help facilitate their buy-in and understanding of the employee wellness program?**

<table>
<thead>
<tr>
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<th>Total</th>
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<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>15%</td>
<td>Fewer than 100</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>85%</td>
<td>85</td>
</tr>
</tbody>
</table>

**Do you regularly (biannually, quarterly, etc.) meet with your leadership team to provide program updates that outline program accomplishments, success stories, challenges, status updates and/or financial impact results?**

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<td></td>
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<td>61%</td>
<td>68%</td>
</tr>
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</table>
Leadership Support

- The percentage of survey participants who strongly agreed that their leadership is committed to improving employee health significantly increased from 6% in 2009 to 42% in 2010.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly agree</th>
<th>Somewhat agree</th>
<th>Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Leadership in the company is committed to improving employees' health.</td>
<td>42%</td>
<td>49%</td>
<td>8%</td>
</tr>
<tr>
<td>Employees understand the correlation between their health and health care costs.</td>
<td>18%</td>
<td>61%</td>
<td>21%</td>
</tr>
<tr>
<td>Management believes that financial awards should be used to encourage improvements (such as being a non-smoker or losing weight) in employee health.</td>
<td>25%</td>
<td>44%</td>
<td>31%</td>
</tr>
<tr>
<td>Leadership in the company is committed to improving the work-life balance of its employees.</td>
<td>30%</td>
<td>52%</td>
<td>18%</td>
</tr>
<tr>
<td>Management believes that employee health is linked to reducing absenteeism and increasing productivity.</td>
<td>46%</td>
<td>45%</td>
<td>9%</td>
</tr>
</tbody>
</table>
Incentive Trends
New Thinking?

In 2010, about one-third of survey respondents did not agree that financial rewards should be used to encourage healthy lifestyles; basically doubling the 15% that disagreed in our 2009 survey.
A Choice in Philosophy

Carrots, Sticks, or Carrot-Flavored Sticks?
What is your objective?

**Participation**
- Check the box
- Complete the task
- Externally motivated to earn the incentive
- Go through the motions

**Engagement**
- Value personal health
- Commitment to change
- Intrinsically motivated, likely to do without incentive
- Encourage & support others
Premium Differentials

Some organizations provide lower health care premiums for individuals based on certain criteria:

- 22% completion of health assessment
- 15% participation in biometric screening
- 12% tobacco use status
Premium Discounts

How much of monthly premium discount?

- Less than $10: 9% (Employee), 9% (Family)
- $11 to $25: 23% (Employee), 18% (Family)
- $26 to $50: 37% (Employee), 18% (Family)
- $51 to $75: 22% (Employee), 24% (Family)
- $76 or more: 24% (Employee), 12% (Family)

$132-$300 PEPY
Health Care Reform

According to our recent Willis Health Care Reform Survey:

- 30% disagreed or strongly disagreed that HCR will improve employee health & wellness.
- 44% agreed or strongly agreed that wellness programs will require more mandatory participation as a result of health care reform.
- 38% agreed or strongly agreed that adoption of voluntary disease management and wellness programs will increase.
- Only 25% of small businesses (<100) were aware of the small business wellness grant program; 17% plan to apply.
Health Care Reform

Two main areas the PPACA may impact your wellness strategy:

- **The use of incentives**
  - Current HIPAA limit of 20% of total cost of health coverage increases to 30% on January 1, 2014.

- **Small business wellness grants**
  - Eligible if you have no more than 100 employees who work at least 25 hrs. per week, **AND** did not provide a worksite wellness program prior to March 23, 2010.
  - No funds have been appropriated, nor guidelines or regulations created to clarify the application process. Grants are supposed to be available in 2011.
“Financial benefits are what drives our employees. They are doing great with premium discounts and reduced/waived co-pays for participation in various programs.” (Health Care – Southeast)

“We are going to switch from a ‘carrot’ to a ‘stick’ method to require all employees, even those reluctant to change, to participate in health improvement activities.” (Finance/Insurance/Real Estate – Nationwide)

“Lesson learned – we mandated completion of health risk assessments (in order to have health insurance) in year 1. This was too aggressive for our group and was met with tremendous opposition. Ultimately we had to back off of the mandate and make it voluntary. Needless to say, we had less than 10% participation.” (Government – Southeast)

“Direct communication with the ‘hold outs’ as opposed to group emails, announcements, etc. seemed to get a better response.” (Services – West Coast)
“$1.7 million savings from 2009 to 2010 in medical plan – overall wellness focus and plan were large components of positive outcome.” (Health Care – SE)

“Health Screenings found one Leukemia very early and two Thyroid Cancers also very early.” (Insurance – Southeast)

“One of our weight mgt programs is so successful that many of the participants are getting off all or most of their RX drugs, seeing improved blood sugar, blood pressure & cholesterol. Some type II diabetics have even been able to get off their insulin.” (Health Care – North Central)

“Tobacco usage has decreased significantly. Our program components: policies support our goals, premium incentives for being tobacco-free, and annual quit week includes counseling, training and a support group.” (Other – Northeast)

“Introduced a summer walking program estimating about 1/3 of employees would sign up. Had over 50% sign up. An employee from a nearby office came over and stated that seeing all of our employees out walking our campus inspired her to start walking!” (Non profit – North Central)
“Smoker of 33 years quit because we paid 100% of his smoking cessation course.”

“HRA points went up an average of 4 points to 79 in one year after implementing health coaching.”

“We have kept our insurance rates flat on average over the last four years.”

“Positive comments after biometric screening – particularly the 1:1 follow-up to explain the numbers. Employees say doctors don’t take the time to do this in the office.”

“One of our associates had her husband come in for biometric screening and from that test discovered he had coronary blockage and has subsequently undergone multiple bypass surgery.”

“Our biggest loser competition lost a total of 574 lbs and 14% body fat in 12 weeks. A third of the participant lost more than 4% body fat, and almost half lost more than 20 pounds.”

“Biometric screening saved an employee’s life. She has shared her story in the employee newsletter.”

“Continual communication along with incentives has made a positive difference in participation.”
What The Future Holds
# Work/Life Balance

If the organization offers a work/life program, note the components it includes or check "no program".

<table>
<thead>
<tr>
<th>Component</th>
<th>Total</th>
<th>Fewer than 100</th>
<th>101 to 500</th>
<th>501 to 1,000</th>
<th>1,001 to 5,000</th>
<th>5,001 or more</th>
</tr>
</thead>
<tbody>
<tr>
<td>Compressed work week</td>
<td>16%</td>
<td>14%</td>
<td>15%</td>
<td>12%</td>
<td>22%</td>
<td>16%</td>
</tr>
<tr>
<td>Elder care resources</td>
<td>10%</td>
<td>1%</td>
<td>8%</td>
<td>16%</td>
<td>16%</td>
<td>11%</td>
</tr>
<tr>
<td>Extended family leave (beyond FMLA)</td>
<td>21%</td>
<td>7%</td>
<td>18%</td>
<td>28%</td>
<td>24%</td>
<td>31%</td>
</tr>
<tr>
<td>Flexible work schedule</td>
<td>39%</td>
<td>32%</td>
<td>40%</td>
<td>34%</td>
<td>45%</td>
<td>41%</td>
</tr>
<tr>
<td>Job sharing</td>
<td>8%</td>
<td>4%</td>
<td>6%</td>
<td>2%</td>
<td>14%</td>
<td>16%</td>
</tr>
<tr>
<td>Onsite child care</td>
<td>4%</td>
<td>0%</td>
<td>1%</td>
<td>2%</td>
<td>11%</td>
<td>7%</td>
</tr>
<tr>
<td>Subsidized child care</td>
<td>3%</td>
<td>0%</td>
<td>1%</td>
<td>5%</td>
<td>4%</td>
<td>10%</td>
</tr>
<tr>
<td>Telecommuting</td>
<td>22%</td>
<td>12%</td>
<td>22%</td>
<td>25%</td>
<td>28%</td>
<td>20%</td>
</tr>
<tr>
<td>Onsite clinic or occupational health nurse</td>
<td>14%</td>
<td>6%</td>
<td>8%</td>
<td>12%</td>
<td>28%</td>
<td>21%</td>
</tr>
<tr>
<td>No program</td>
<td>45%</td>
<td>61%</td>
<td>47%</td>
<td>44%</td>
<td>31%</td>
<td>44%</td>
</tr>
<tr>
<td>Other, please specify</td>
<td>6%</td>
<td>6%</td>
<td>5%</td>
<td>9%</td>
<td>7%</td>
<td>6%</td>
</tr>
</tbody>
</table>
Thank you for your time
P&G Vibrant Living
Our Corporate Journey to Better Health and Wellness
P&G Vibrant Living: What Are We Doing?

• We’ve unified P&G’s US-based health and wellness programs
• We’ve offered easy access to simple health and wellness information
• The P&G Vibrant Living symbol: Our guide to finding health and wellness ideas and programs
P&G Vibrant Living: What does this look like?

Our Goal: Create an environment that makes it easier for P&Gers to make healthy choices

- Fitness
- Nutrition
- Environment
- Information

- Health Care Plan
- Focus on top chronic conditions

- Corporate Athlete
- Blueprint for Healthy Living
- Health Services
Culture of Health

Comprehensive Site Certification Process:

**Fitness:**
- “Fitness-friendly” facilities

**Nutrition:**
- Healthy cafeterias/vending/catering

**Environment:**
- Weight management/smoking cessation

**Information:**
- One-stop health resource; Pervasive branding
Health Education & Training

Corporate Athlete
• Expose more employees to this training program
• Adapt to Manufacturing/PS environment

Blueprint for Healthy Living
• Expand and improve this educational H&W program
• Increased/expanded rewards for participation

Health Services
• Improve access, reach and visibility
• Virtually all sites with populations greater than 250 have fully staffed, on-site Health Services; Most sites less than 250 have satellite access or a remote platform.
Consumer Engaged Health Care

- Health Care Plan introducing a first-ever in-network deductible each employee can earn back via completion of online H&W programs, including a Health Risk Assessment.
- Other H&W programs include Wellness Coaching & Condition Management programs and Your Everyday Health Sessions.