

# Preventing Movers

Using wellness to keep employees in *PreZones*

***How employers benefit from their wellness program investment and realize ROI***



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HEALTH

## Introduction

**W**hat are the goals of your worksite wellness program? Are your objectives well thought-out, realistic and obtainable, and have you effectively communicated them internally? Have you set the bar too high or set none at all?

As an employer, you will always have employees with chronic diseases and co-morbidities who require comprehensive disease management and ongoing provider care. And, you will have those healthy self-motivated individuals who are not really the target of your wellness initiative, except to keep them that way. So, what about the ones in the middle, those employees who do not yet have full-blown diseases or conditions but who have preconditions and don't even know it? We refer to these individuals as being in **PreZones**.

First, employers need the right vendor partner with analytic tools to stratify their population by health risk. Predictive modeling can also help show those employees most likely to move to a higher risk category the following year. According to a recent IBM Watson Health sponsored study on Population Health Management, "Only 30% who are high risk today were in that category a year ago."

Now is the time to prevent these movers.



## Scientifically-proven Disease Risk Trackers (DRTs) are replacing traditional HRAs by providing more valuable insight into employee health

**A**s a wellness provider, we consistently see the discrepancies between self-reported information and biometric screenings. Employees tend to fill out information based on how they view their health and the world, which is their current reality – until the biometric screening results come in. Some employers believe that employees just fill in the answers or fulfill a requirement and get it off their “to do” list. Regardless of the perspective, the traditional HRA gives an employee an opportunity to reveal what they *perceive* to be the current state of their health.

According to the Chamber of Commerce’s 2016 report *Winning with Wellness*, the HRA has helped increase an individual’s awareness of their own health status associated with certain lifestyle behaviors. Outcomes-based **Disease Risk Trackers**, however, remove the “perception of health”, and provide a new data-driven reality and unique *pathway to change*, rather than merely a glimpse as to the direction of that change.

When biometric screening numbers come in, it is often the dawning of a new health reality. Through aggregate reporting, this is often the first time an employer finds out just how many employees do not even know they have an illness or even a precursor to illness. The most effective Disease Risk Trackers (such as Orthus Health's Know Your Number®) combines biometric data to precisely target avoidable chronic disease, modifiable risk factors, and age/gender peer group risk...far more effective than relying on HRA data and comparing it to biometric data. Reporting includes a meaningful disease risk SCORE that is often the start of a highly productive health coach-member relationship, if coaching services are being offered as part of a worksite wellness program.

# Preventing health from moving in the wrong direction

Your worksite wellness program should help offset your healthcare costs, and your program objectives should include preventing your employees from moving their health in the wrong direction. When your goal is to realistically keep employees in **PreZones**, instead of expecting employees to get “healthy”, you may begin to realize the true Return on Investment (ROI) of your wellness program.

Here we will look at four preconditions that impact employee health:

- 1) prediabetes, 2) prehypertension, 3) low-to-moderate risk LDL, and 4) overweight Body Mass Index (BMI).**

We will show the average costs of each of these preconditions (independent of other conditions/illnesses), and the impact on employer cost if individuals move up and out of these PreZones. Costs are obtained from industry and clinical sources, as well as sample client claims analytics. Getting the full-blown disease typically results in other illnesses and conditions, increased medication usage, and more, significantly raising healthcare costs even higher. Our objective is to help employers begin to develop the right culture of wellness and understand what tools, resources, support, and education are required to keep employees from moving from preconditions to illness.

| Keeping Members in <b>PreZones</b> |   |              |  |  |
|------------------------------------|---|--------------|--|--|
| PreZone                            | Range   | Pre costs/yr | Cost if move up and out of PreZone pp/yr | Notes  |
| <b>Prediabetes</b>                 | fasting blood glucose<br>100-125 mg/dl            | \$4,305      | \$13,700                                 | only includes diabetes, not other conditions resulting |
| <b>Prehypertension</b>             | (systolic) 120-139 mmHg<br>(diastolic) 80-89 mmHg | --           | \$733                                    |  |
| <b>Low-to-moderate LDL</b>         | 100-159 mg/dl                                     | --           | \$3,000                                  | statins can range from \$6-\$600 per month             |
| <b>Overweight BMI female</b>       | 25-29.9   | \$524        | \$4,879                                  |  |
| <b>Overweight BMI male</b>         | 25-29.9   | \$432        | \$2,646                                  |  |

Sources for Costs: Diabetes – the American Diabetes Association (ADA); Hypertension – the Agency for Healthcare Research and Policy (AHRQ)  
Statin medications - Consumer Reports, Best Buy Drugs, March 2014; Overweight and obesity - US Department of Health Policy

## PreZone 1:

### Preventing prediabetes from becoming Type II diabetes

**P**rediabetes is the wake-up call that it's time to make changes in nutrition and exercise behaviors. There are simple lifestyle changes such as losing weight and moving more that can have a significant impact on this precondition, yet many individuals remain unaware of their risk and/or choose to do nothing about it. Many individuals also have higher risk factors based on age, genetics, family background, weight, and more.

WebMD says lifestyle changes can be made in real time to prevent movers: 1) getting the right amount of exercise – at least 30 minutes daily, 2) controlling weight—even a 5-10% weight loss can significantly thwart prediabetes from becoming diabetes, and 3) eating the right foods, including low-fat protein, vegetables, and whole grains.

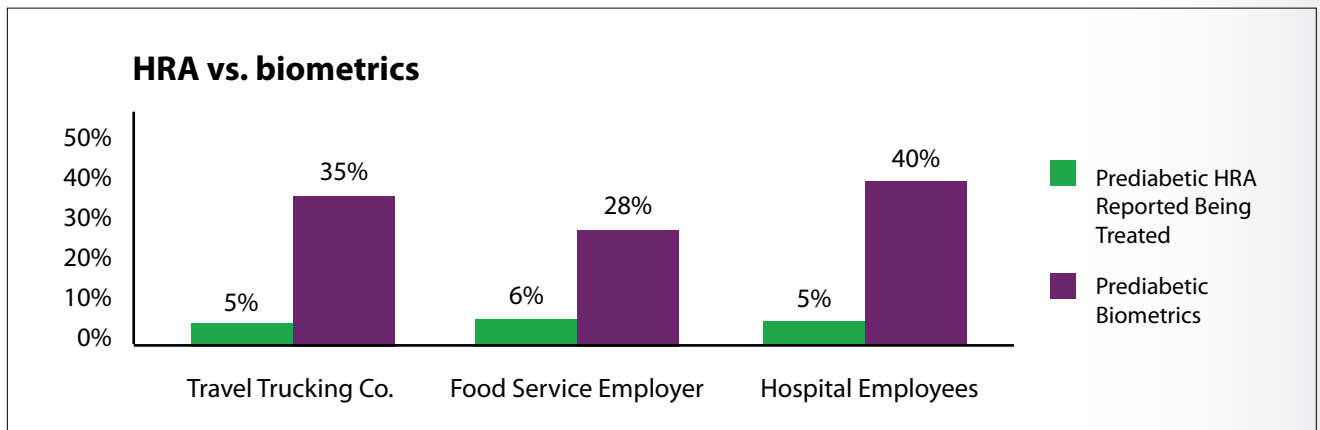
According to the CDC, 1 out of every 3 Americans has prediabetes and over half of people over the age of 65 have it. Ninety percent of those with prediabetes don't even know it, and 15-30% will develop Type II diabetes within 5 years.



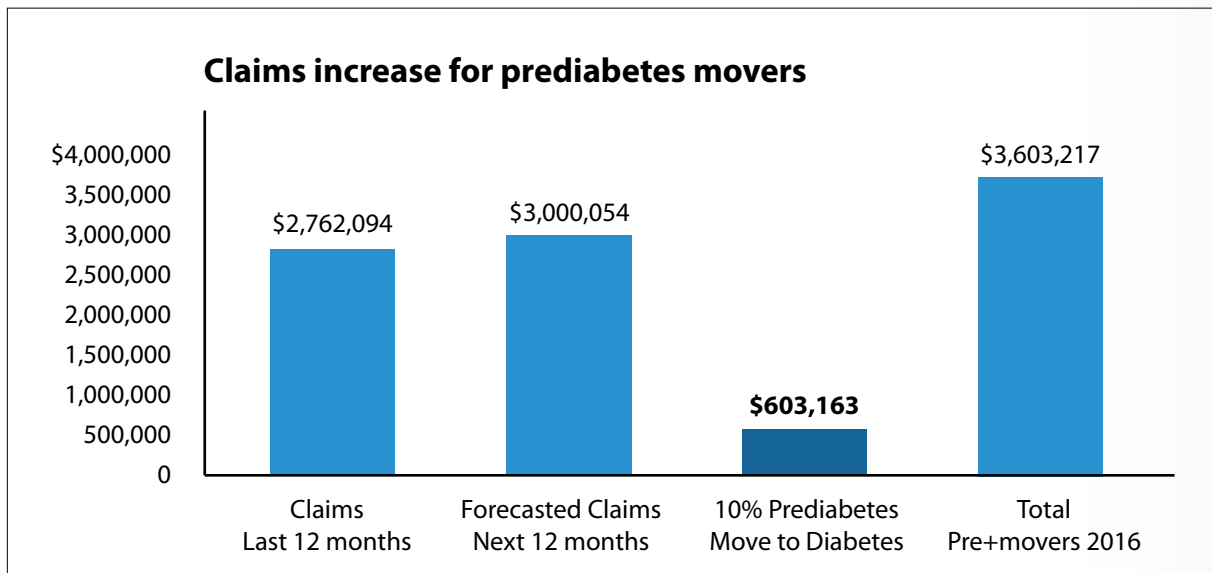
Prediabetes is when blood sugar is above normal - typically between 100 and 125 mg/dL

*American Diabetes Association*

Based on our client experiences, these facts hold true. The graph below shows 3 different employers. The green bar represents those who reported being treated for diabetes, and the purple are those who actually screened positive for high blood sugar. The differences are pretty consistent across all employers.



Another example below demonstrates the financial impact on claims for members on the Orthus Health wellness program who did not know they had prediabetes.



These claims represent one client population with 664 members who indicated they were not being treated for diabetes, but screening results revealed prediabetes. The forecasted claims were already going to increase for this group with prediabetes, but if 10% of those with prediabetes get diabetes, then the amount for those 66 people alone is over \$600K more.

The average spend for a claim is \$4,616 per year for a person with prediabetes. This amount increases to \$13,700 per year for a person with diabetes, according to the American Diabetes Association, not including other ensuing conditions and health problems.

Based on a study published in *The Lancet*, patients with prediabetes who had at least one normal blood sugar reading, even for a short period of time, were 56% more likely to avoid progressing to diabetes during nearly six years of follow-up after the study.

Of note also, according to *The Nurses' Health Study*, 90% of type II diabetes in women is the result of: excess weight, lack of exercise, poor diet, smoking, and alcohol. These are lifestyle factors that can be changed long before a person develops diabetes. To do so, employees need to understand their risk, what having diabetes means, steps they need to prevent and/or reverse diabetes, and what tools, education, and support is available to them.



## PreZone 2:

Prehypertension – no signs or symptoms makes intervention even more critical

The Mayo clinic defines prehypertension as “slightly elevated blood pressure”. Lifestyle behaviors, such as eating healthier and getting physical activity, can impact whether an individual develops high blood pressure. With high blood pressure comes an increased risk of heart failure, heart attack, and stroke.



Prehypertension is a systolic pressure from 120 to 139 millimeters of mercury (mm Hg) or a diastolic pressure from 80 to 89 mm Hg.

*American Heart Association*

Since hypertension does not have symptoms, monitoring blood pressure is critical. Fortunately, blood pressure readings are commonly available and can be done at retail clinics, health fairs, and even dental appointments. Medication might be necessary and is far less costly than the impact of uncontrolled high blood pressure. There are many risk factors for hypertension, so in addition to knowing your numbers it is important to know what those factors are: including being overweight or obese, race, family history, salt intake, and not being physically active, among others.



As medication is not usually indicated for prehypertension, wellness program members may not think they have an issue even if they are prehypertensive. Many health coaches uncover gaps in knowledge and understanding because members may not be on medication, but if they don't make lifestyle changes, medication may ultimately be necessary. According to Harvard Health, prehypertension is serious as it significantly increases the chance of stroke—by 95% for those in the pre-hypertensive high range, and 44% for those in the low pre-hypertensive range.

So how does your wellness program keep members out of pre-hypertensive ranges? Your screening availability, health coaches, programs, and support tools should make it easy for employees to find out and monitor their blood pressure readings. If they have high blood pressure, they need to act quickly and see their doctor. We have seen employees' lives saved through their employer wellness program because a routine screening uncovered a high-risk situation that warranted immediate attention.

With pre-hypertensive readings, people need the right intervention and ongoing support, at work and at home. They need practical options for how they can make necessary behavior changes and develop better lifestyle habits that make sense for them. Not everyone interacts with a health coach the same way, or understands a health program completely, or tracks their food and exercise all the time. Gentle and sometimes persistent reminders that those tools are available, along with training to use them, can go a long way.

### **PreZone 3:**

## **Low-to-moderate LDL – the “lousy” or bad cholesterol – keeping it on the low down**

**T**wenty-two percent of Americans over 45 take statin drugs, according to the National Health and Nutrition Examination Survey (NHANES), accounting for more than \$16.9 billion in US sales in 2012 (*Consumer Reports, Best Buy Drugs*, March 2014). Statins can vary widely in cost, typically from \$6 to over \$600 per month.

Many components make up cholesterol: total cholesterol, HDL (good cholesterol), LDL (bad cholesterol) and triglycerides. For the purpose of this discussion and the impact a wellness program can have on preconditions people can do something about, we will focus on keeping low-to-moderate LDL from becoming high LDL (which puts individuals at high risk for heart attack, stroke, and peripheral artery disease or PAD).



**Low-to-moderate LDL  
is 100-159 mg/dL**

*NIH-NHLBI*

Diet and lifestyle changes, stopping smoking, exercising, and losing weight all help to lower LDL and decrease risk for certain diseases. Cholesterol guidelines center on preventing heart attacks and strokes, not lowering LDL. This presents an opportunity to focus wellness and health education on reducing LDL. If LDL increases to 190 mg/dL or greater, doctors recommend a high intensity statin due to greater risk for heart and kidney disease and stroke.

**Prevention is key.** People on statins sometimes feel like they don't need to make lifestyle changes as medication seems like an easy fix. However, statistics show that people have difficulty staying on statins consistently over the long term. Studies show medication compliance is a serious issue with only 50% continuing their statin medication after 6 months, and after one year only 30-40% stay with their medication. Wellness can play a part in creating a greater understanding of why changes are necessary, as well as helping people stay on life-preserving medications. Keeping LDL low is an all-around good wellness strategy.

## PreZone 4:

### Overweight – Keeping obesity at bay. The precondition affecting all others.

Being overweight and obese are both a condition of bad health. Keeping people overweight may not seem like an ideal goal, but the objective of a sound wellness program isn't to keep them overweight, it's to keep employees from becoming obese.

According to the 2010 research report by the Department of Health Policy and Stop Obesity Alliance, the annual costs of being obese are \$4,879 for an obese woman and \$524 for an overweight woman. Costs are \$2,646 a year for an obese man and \$432 for an overweight man. If we include loss of life, these costs jump significantly to \$8,365 for an obese women and \$6,518 for an obese man.

These are tangible costs and do not take into consideration comorbidities. Today, 2 of every 3 individuals are either overweight or obese, and if the trend continues, 50% of the U.S. population will be obese by 2030. Employers are bearing a large amount of these costs.

The costs of obesity extend far beyond health costs to lost wages and productivity, absenteeism, fuel costs, life insurance, worker's compensation, disability, and consumer-related costs that necessitate the need for larger furniture, expanded doorways in buildings, clothing, and more. What's more, according to the Stop Obesity Alliance, the incremental costs of obesity in lost wages is significantly and disproportionately higher for obese women than for obese men. Obesity is a significantly costly trend showing few signs of slowing down, and we are all paying for it.



Overweight –  
BMI 25 to 29.9

*NIH-NHLBI*

“Preconditions are a sign of what’s yet to come.”

- Dawn Koch, Orthus Health coach

## Health coaching helps keep members in **PreZones**

**A**t Orthus Health, health coaches guide members in helping them stay in **prezones**, at a minimum, and frequently have to explain to members why doctors don’t always point out their “pre” conditions but simply tell them to lose weight and exercise.

According to Dawn Koch, Orthus Health coach:

“This is when I take the opportunity to educate on the precondition, what it means, and have the member tell me what they think may be their contributing factors. I then share that even modest lifestyle changes and weight loss can prevent the onset of Type II diabetes when someone is in the pre-diabetes range.

Then the “aha” moment comes and members typically begin sharing that siblings or parents are on medication for diabetes and hypertension, and they don’t want to have to take medication the rest of their lives, or they are reminded of a loved one who died from an uncontrolled condition. This is a very empowering moment for a member. I can tell the light bulb is going off when they realize now is the time to take control and make sure they don’t move out of this **prezone**.”

## Planning interventions and change-oriented behaviors

Staying in a **prezone** and preventing the downhill momentum to developing a disease requires awareness and planning. To help members not become overwhelmed and have fear get the best of them, coaches usually start with small, incremental changes based on what a member articulates is their biggest obstacle. This might be finding time to exercise, changing a work stressor, or simply learning what food aisles to stay away from in the supermarket, among others.

Wellness is ongoing, but implementing shorter-term weight loss and tobacco cessation programs can jumpstart the right wellness initiative. As part of an overall wellness plan, these shorter term programs can help make health and wellbeing a mainstay in employees lives as they become an integral and expected part of the workplace culture. High risk members on Orthus Health' First5 Weight Loss and Tobacco Cessation programs have had much success when these programs have been included as part of their employer's overall wellness plan.

Employers have experienced more than a 70% completion rate on First5, with an average weight loss of almost 6.5 pounds per person in 6 weeks . It works because these members were accountable and had the coaching support needed to make it happen.

– Dawn Koch, Orthus Health coach

## Moving from participation to engagement

It's important for any wellness initiative that employers establish guidelines for what being engaged means on the front end, prior to the start of the plan year. ROI is a "muddy" place as the perceptions and assumptions of how to measure ROI is as "clear as mud" when there are so many intertwined conditions, lifestyle factors, and behaviors affecting a person's wellbeing.

Instead, focus on making wellness an effective business decision for your company and employees. Does the plan make sense? Is it easy to understand and participate in? Do your goals support your unique employee population and culture? Objectives should be challenging, yet attainable and inclusive.

As an employer, you will want a return on your wellness investment and employees should benefit from the program. Employees should enjoy it, feel empowered, and it should make a difference in their lives. Data and claims can help pinpoint the issues to help with a more strategic program design and a more targeted use of wellness dollars. Engaging employees requires they understand: 1) the benefit of participating and the impact if they do not, 2) what's in it for them, 3) how they can start feeling good immediately, 4) understand their personal and private information is protected under HIPAA, and 5) know their employer only ever sees aggregate group reporting on the workforce.

Incentives may help encourage participation initially, but an engaged individual typically requires little to no external incentives. Support, however, is always welcome and usually needed regardless of where a person is on the path to better health and wellness.

## Keeping up with employee communication

**D**igital devices have changed the way we read, receive, and assimilate information. Today's reading habits are influencing consumer behavior, and this includes how people respond to making behavior changes. Visual content is key to getting people to pay attention to a message and important in reminding people. Since social media is now the top internet activity worldwide (according to *Business Insider*) the value of using social media to educate and inform cannot be overstated. Any communication, regardless of the format, is better than none when it comes to health and wellness. Make sure you have the right easy-to-understand appealing content so wellness stays front-of-mind for each and every employee.

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call 800.550.2427

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