Health Promotion

Health Promotion is the art and science of helping people discover the synergies between their core passions and optimal health, enhancing their motivation to strive for optimal health, and supporting them in changing their lifestyle to move toward a state of optimal health.

Optimal health is a dynamic balance of physical, emotional, social, spiritual, and intellectual health. Lifestyle change can be facilitated through a combination of learning experiences that enhance awareness, increase motivation, and build skills and, most important, through the creation of opportunities that open access to environments that make positive health practices the easiest choice.

– Michael O’Donnell
“Evidence from workplace wellness programs, in both developed and developing countries, show that disease risk can be reduced through programs that address tobacco-free living, healthy eating, and physical activity. These programs are not only cost-effective, but also reduce health care costs, improve productivity, retain human capital, and build sustainable business. Hence workplace wellness programs are enlightened self-interest investments from a health, bottom-line, and national perspective.”

From: The WHO’s World Economic Forum, A Call to Action on Worksite Wellness: A declaration signed by CEO’s of 16 leading American companies.
HIPPA, ACA, and Incentives
HIPAA & ACA

HIPAA (Health Insurance Portability and Accountability Act)

While HIPAA generally prohibits group health plans from charging employees different premiums based on their health status, it allows employers to establish premium discounts or provide other financial incentives for employees who participate in health promotion programs or achieve certain health targets.

ACA (Affordable Care Act)

Grants loans to small businesses to create comprehensive wellness programs; CDC to offer technical assistance to employers to train staff on how to evaluate existing wellness programs.

Starting in 2014, the total amount of all rewards (or penalties) used for an outcome-based incentive will not exceed 30% of the total cost of coverage (sum of employee plus employer contributions).
Three types of Incentives: Participation, Standard, and Progress-Based

**Participation-based**: Rewards employees for completing a task or participating at some level in a wellness program.

**Standard-based**: Rewards employees for achieving a health standard based on specific health outcomes.

**Progress-based**: Reward employees for making meaningful progress toward specific health goals.

All must create allowances for employees with health conditions or disabilities that might prohibit them from participating in these programs.
Participation-Based Incentives

The most widely-used type of incentive.

Besides the upper limit on premium discount, these incentive programs do not have to meet additional requirements.
Standard-Based Incentives

Guidelines:

The program must be “reasonably designed” to promote health or prevent disease (be evidence-based).

The program must give employees the opportunity to qualify for the reward at least once per year.

The program must provide reasonable alternative standards and make allowances for employees with health conditions or disabilities. This must be disclosed in the written material.
Progress-Based Incentives

Reward participants for moving in the direction of improved health.

For instance, it is unreasonable to expect a person with a BMI of 40 to drop down to 27 in a short period of time, but they could be rewarded for losing a percentage of their body weight and get closer to the goal.
Incentivizing the Cost Drivers

The CDC estimates the economic costs of smoking at $3,391 per smoker per year in direct medical costs and lost productivity. One in five of all deaths in the US are prematurely caused by tobacco use.

According to the CDC, the cost of obesity, including medical expenditures and absenteeism, for a company with 1,000 employees is estimated to be $277,000 per year.
Lessons From Behavioral Economics

Many unhealthy behaviors involve immediate benefits and delayed costs (like drinking sugary beverages).

Many interventions involve immediate costs with delayed benefits in the future (like the efforts required for losing weight or getting fit).

The most effective incentives for behavior change provide small but tangible and frequent positive feedback or rewards to keep people engaged.
Is it a Carrot or is it a Stick?

In an attempt to be efficient, a carrot can turn into a stick.

For instance, basing premium contribution on whether or not the employee meets health standards. This approach could lead to cost-shifting.

However, premium differentials work well for encouraging participation.

Reward programs are more likely to convey a sense of cooperation between employer and employee toward the common goal.

However, penalties are often more practical and give better results. The most common example is premium surcharges for smokers.
SNBC Program Components
Physical Activity

- Health club membership discounts
- Monthly fitness tracking card
- Onsite walking path and walking club
- Fitness challenges
- Onsite treadmill
- Fit for Work program: Our own conditioning and stretching pre-shift program
Eating Well and Weight Management

Food preparation classes

Weight management classes

Distribution of eating guides, cookbooks, and healthy recipes in newsletter

Partial reimbursement for Weight Watchers

Regular food-related challenges

Healthy vending machine and lunch program

Fresh fruit distribution once a month (Fruit Fridays)
Stress Reduction and Mindfulness

Massage therapy for stress reduction

Stress reduction mini seminars and publications

Stress reduction messages embedded in programs promoting fitness and eating well

Stress reduction challenges

Promotion of EAP stress reduction component
Injury Prevention

Massage and movement therapy:
Active Release Techniques® (ART), Kinesiotaping, deep tissue massage, corrective exercise, and postural re-education

Ergonomics:
A systematic approach to ergonomic hazard identification, assessment, control, and training

Lift Easy Training: Based on cutting-edge biomechanics principles

Fit for Work:
Pre-shift and micro-break conditioning and stretching program for all employees
Social Wellness

Company-wide events that promote socialization:
   Annual hike in the park
   Hoppy Awards event recognizes the most active participants in the program
   Team challenges

Incentives for participation in community volunteer programs
Self-care

Wellness portal offering links and resources for self-care, prevention, and behavior change, as well as all program components

Distribution of a self-care handbook to all program participants

Tobacco Cessation program and reimbursement for quitting aids

Regular self-care tips and messages (HOP Tip of the Month)

Wellness library and resource center for take-home books and DVDs.
Physical Enhancements

- Tobacco use access at distant, decentralized locations
- Company-owned vending machines carrying nothing but healthy options
- Onsite walking path and future plans for onsite fitness facility
- Visible presence through wellness portal, bulletin boards, and company touch-screens
Cultural Integration

Program promotion and communication:
  Provide opportunities for employees to influence one another

Stress the value of human freedom within a context of accountability, responsibility, and cooperation

Include workforce in planning and promotion (wellness committee)

Regular wellness emails and regular column in the company newsletter
Planning & Evaluation
Program Planning

Planning is done on a quarterly and yearly basis:

- Includes specific goals for improving participation and health outcomes
- Is informed by the needs and interests of the workforce
- Takes into account participation and feedback of previous programs
- Depends on the readiness or capability of the organization to accommodate programs
  - Availability of adequate space
  - Scheduling constraints
  - Computer and internet access
Program Evaluation

Participation: What percentage of the population participated? Are all departments represented? Are specific programs being utilized by the target population?

Health risk, health status, and yearly trends are assessed through the Summary Health Report based on results of the annual health screening.

Health claims and costs are compared year to year.

Absenteeism can be assessed through indicators such as sick days, family medical leave, and workers’ compensation.

Evidence-based best practices increase the likelihood of effective programming.
Closing Thoughts

Participants are rewarded with improved health and both employees and employers are rewarded with reduced health costs and increase engagement and productivity.
Worksite Wellness Resources

Wellness Councils of America (WELCOA)

American Journal of Health Promotion

University of Michigan Health Management Research Center

Health Enhancement Research Organization (HERO) Score Card

U.S. Department of Health and Human Services, Healthy People 2020

Corporate Health & Wellness Association

World Health Organization

CDC: The CDC Worksite Health Score Card

World Congress Conferences


