

# **ABOUT THIS SURVEY**

Willis conducted its eighth annual Health and Productivity Survey from November 1, 2013 through November 22, 2013, releasing the report in April 2014.

This year, the survey focused on health care challenges, wellness programs and program design, incentives, global wellness, and health and productivity.

The survey was made available by an online survey tool and through electronic distribution channels.

This survey was open to any U.S.-based company regardless of employee size. Organizations of all sizes are represented. Participating organizations ranged from fewer than 100 to more than 10,000 employees.

Organizations were asked to participate in the survey whether they had a wellness program or not. This enabled us to determine the popularity or use of a wellness program, and for those organizations that did not offer a program, we learned what influenced their decision.

All percentages in the charts and tables are rounded to the nearest percent. Therefore, totals may not always equal 100%. A full technical appendix with all reported survey data is available to Willis clients upon request.

#### **SURVEY PARTICIPANTS**

Willis received responses from more than 900 organizations. Completed survey responses were collected from 708 participants; partially completed responses from 250 participants. Organizations that only completed demographic information were not included in the survey results.

Survey participants are from across the country and represent employers of varying sizes from a variety of industries.

### **ADDITIONAL INFORMATION**

For additional information or questions regarding this survey, please contact:

Lori Waiss at **hcp.survey@willis.com** Custom survey data cuts are available by request for a fee.









# **CONTENTS**

EXECUTIVE SUMMARY	1
Key Findings from Participating Organizations	
Key Insights	2
THE FOCUS ON HEALTH AND PRODUCTIVITY	3
Survey Organization Size	
Survey Participant Locations	
Survey Participant Industries	
CONTROLLING HEALTH CARE COSTS	
HEALTH CARE COST STRATEGIES	
RESOURCES THAT DRIVE HEALTH AND PRODUCTIVITY	8
USE OF MEDICAL CARRIERS	9
THIRD-PARTY WELLNESS VENDORS AND SOLUTIONS	10
WELLNESS PROGRAMS	
Barriers to Programs	
WELLNESS PROGRAM COMPONENTS	
COST OF WELLNESS PROGRAMS	
WELLNESS PROGRAM STRATEGY	14
WELLNESS INCENTIVE ELIGIBILITY	15
HEALTH RISK ASSESSMENTS	16
HEALTH RISK ASSESSMENT INCENTIVES	
BIOMETRIC SCREENINGS	18
BIOMETRIC SCREENING INCENTIVES	19
DISCOUNTED PREMIUM INCENTIVES	20
OUTCOME-BASED INCENTIVE DESIGN	21
TOBACCO USE IN THE WORKPLACE	22
METRICS FOR DETERMINING WELLNESS PROGRAM SUCCESS	23
WELLNESS PROGRAMS IMPACT ON HEALTH RISKS	24
WHAT INFLUENCES WELLNESS PROGRAM SUCCESS?	25
NEXT STEPS FOR WELLNESS STRATEGY	26
MEASURING THE IMPACT OF HEALTH ON PRODUCTIVITY	27
GLOBAL WELLNESS	28
NEXT STEPS FOR GLOBAL ORGANIZATIONS	29

## **EXECUTIVE SUMMARY**

This year's survey indicates that organizations are broadening their focus on the health and productivity of their workforce. Organizations of all sizes recognize that implementing health and wellness programs engages employees in healthier behaviors and fosters a more productive workplace. Increasingly, organizations are adding strategic goals to improve employee engagement and increase workforce productivity in addition to the more traditional strategic objective of lowering health care costs.

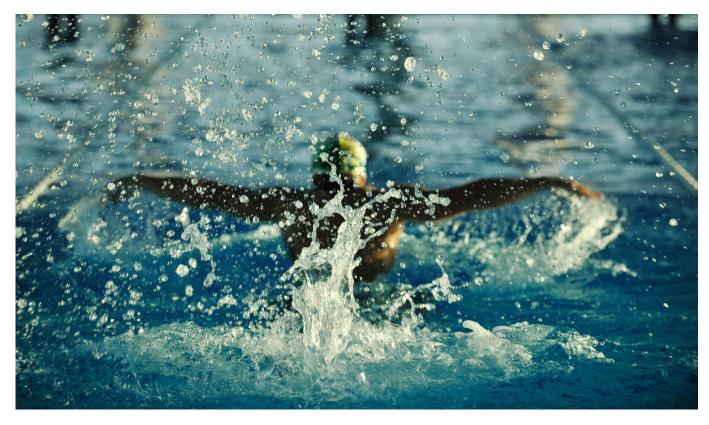
In this era of health care reform with new regulations affecting health plan design and communication efforts, well-designed, employer-sponsored wellness programs are important as tools to not only help mitigate rising health care costs but to also preserve workforce productivity. Organizations see the workplace as a primary area to identify employee health risks and provide wellness resources, activities and support to change behaviors and, in some cases, save lives.

### **KEY FINDINGS FROM PARTICIPATING ORGANIZATIONS**

- **68%** have some type of wellness program.
- 61% identified employees' health habits as the primary challenge in controlling health care costs.
- 54% are implementing a high deductible health plan in an effort to address rising health care costs.
- 64% provide employees with tools and resources to become better consumers.
- 53% said that their organization was effective at leveraging their health insurance carriers to drive health and productivity.
- 56% said that their organization was effective at leveraging their insurance broker or consultant to drive health and productivity.
- 44% use third-party wellness vendors.
- 78% of organizations with a wellness program said that they used some sort of incentive to drive participation.
- 49% of those with a wellness program reported a measurable improvement in either medical costs or health risks.
- 93% believe that healthier employees are more productive, yet very few are measuring the impact of productivity on employees' absenteeism (22%), FMLA (19%) and presenteeism (7%).
- 86% of organizations that have an international workforce believe that wellness opportunities should be introduced to their international working populations.

### **KEY INSIGHTS**

- More employer organizations are increasing health and wellness programs and initiatives.
- Organizations are shifting costs and risks to employees and providing them with more incentives to improve their own health.
- Organizations are relying not only on their health insurance carriers, but increasingly on their brokers, consultants, and third-party vendors to meet their health and human capital business
- More organizations are reducing medical costs and risks through health and wellness programs.
- The overwhelming majority of participating organizations recognize the link between the health of their workers and workforce productivity.
- Most organizations have not yet measured or implemented programs that target lost productivity due to health conditions.
- More organizations are recognizing the business value of healthier employees beyond simply medical costs.
- The survey suggests that more organizations understand that a healthy and productive workforce helps to control costs which offers a competitive edge necessary for sustainability in today's economy.



# THE FOCUS ON HEALTH AND PRODUCTIVITY

Health and productivity is a topic that remains at the forefront of most health care headlines and in the minds of organizations challenged by their health care benefit costs.

The Willis Health and Productivity Survey exemplifies the importance of this topic by surveying organizations and receiving 958 responses.

### **SURVEY ORGANIZATION SIZES**

Willis surveyed organizations of all sizes to measure the prevalence of health and wellness programs and their effect on employee behavior, program participation and health outcomes.

ORGANIZATION SIZE	NUMBER OF EMPLOYEES		
SMALL ORGANIZATION	Fewer than 100	205	21%
(Fewer than 1,000 employees)	100-499	348	37%
(689 or 72%)	500-999	136	14%
LARGE ORGANIZATION	1,000-4,999	180	19%
(1,000 or more employees)	5,000-9,999	47	5%
(269 or 28%)	Over 10,000	42	4%
Total Participants		958	100%

### **HOW MANY EMPLOYEES DOES YOUR ORGANIZATION HAVE?**



### SURVEY PARTICIPANT LOCATIONS

Participating organizations were from every region of the country; the majority being from the North Central Region, followed by the Southeast, Northeast, West Coast, and South Central regions.

#### IN WHICH GEOGRAPHIC LOCATION ARE MOST OF YOUR EMPLOYEES LOCATED?



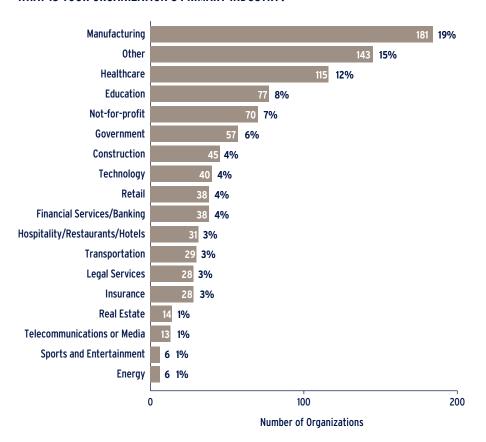
Four hundred and eighty seven or 51% of responding organizations have multi-state locations. This is the first year we asked participants about multi-state locations. According to the Wellness Council of America (www.welcoa.org), coordinating a wellness program in several states can be challenging; however, with a network of wellness champions, this challenge can be overcome.



### **SURVEY PARTICIPANT INDUSTRIES**

Participants represent diverse industries, with the largest response from the specific industries of manufacturing and health care.

#### WHAT IS YOUR ORGANIZATION'S PRIMARY INDUSTRY?



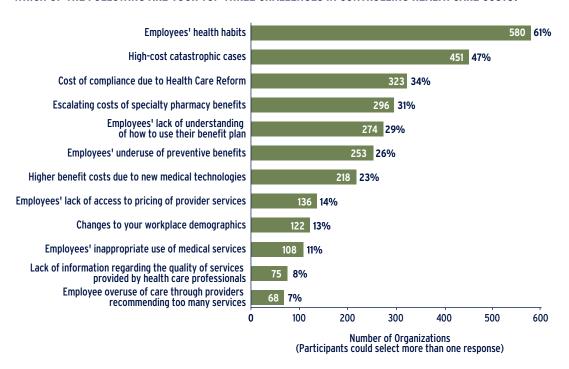
Industries listed as "Other" included Professional Services, Engineering, Distribution, Consulting, Food, Medical Devices, Architecture, Management, Call Centers, Staffing, Advertising, Processing, Publishing, Aerospace, Associations, Community Programs, Oil, Law Enforcement, Life Sciences and Non-Durable Goods.

# CONTROLLING **HEALTH CARE COSTS**

The top three challenges in controlling health care costs identified by survey participants included employees' health habits (61%), high cost catastrophic cases (47%) and the cost of compliance due to health care reform (34%). Topping the list this year is employee health behaviors, suggesting a continued trend of health and wellness intervention. Organizations also appear to be more engaged in addressing high cost health claims, recognizing the cost challenges they face with catastrophic claims.

In 2014, health care reform will continue to impact organizations with mandated benefit plan changes and additional taxes and fees. It is no surprise, then, that cost of compliance due to health care reform has moved into the top three cost factors.

#### WHICH OF THE FOLLOWING ARE YOUR TOP THREE CHALLENGES IN CONTROLLING HEALTH CARE COSTS?

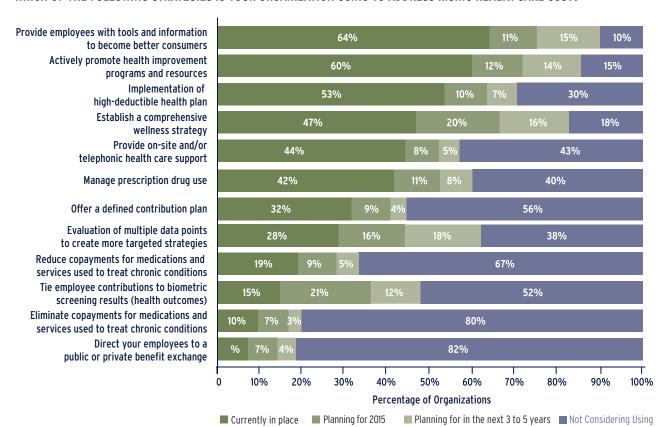


## **HEALTH CARE COST STRATEGIES**

This year's results show that organizations are engaged in a growing number of health and wellness strategies. Providing employees with tools and information in order to become better consumers (64%) is the number one strategy organizations are using to address rising health care costs. Sixty percent (60%) of organizations are actively promoting health improvement programs and resources. This year, the majority of organizations (53%) are implementing a high deductible health plan in an effort to control rising health care costs. The increase in participants implementing high deductible plans demonstrates a shift by organizations to empower their employees to become more informed health care consumers.

Less than 10% of survey participants are currently implementing a plan to direct employees to a public or private exchange as a way to offset rising health care costs.

#### WHICH OF THE FOLLOWING STRATEGIES IS YOUR ORGANIZATION USING TO ADDRESS RISING HEALTH CARE COST?





Our company has been recognized by the Portland Business Journal for one of the Healthiest Employers in Oregon and our premium costs have stayed flat for three years in a row.

Siuslaw Bank

Remaining below medical trend for several years due to wellness programs. Mid-Market Manufacturing Company

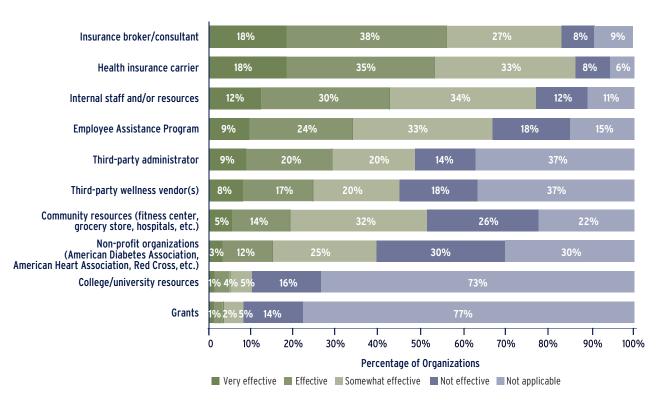


# RESOURCES THAT DRIVE **HEALTH AND PRODUCTIVITY**

Organizations are leveraging an increasing number of resources to support the health and productivity of their employees. While still relying on internal resources, many survey participants are increasingly accessing their health insurance carriers, third party wellness vendors and insurance brokers to help make a meaningful impact on the health of their covered populations.

Health insurance carriers and third-party wellness vendors work hand in hand with the broker/ consultant industry to meet employer needs. Many organizations are implementing new programs tailored to their specific needs. Carrier wellness resources are often built into the administrative costs of the medical plan while third-party wellness vendors are billed separately. As a result, these organizations strive to demonstrate return on investment to justify their costs. Brokers and consultants help employers get the most value for these resources. In fact, brokers and consultants were identified as the most effective resource to drive workforce health and productivity for employer organizations.

### HOW EFFECTIVE IS YOUR ORGANIZATION AT LEVERAGING THE FOLLOWING RESOURCES TO DRIVE THE HEALTH AND PRODUCTIVITY WITH YOUR WORKFORCE?

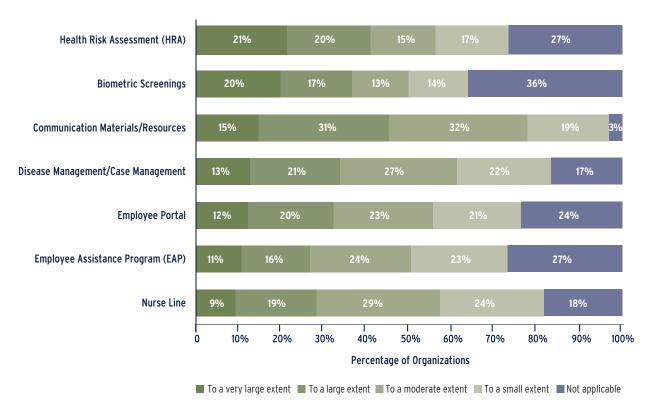


# **USE OF MEDICAL CARRIERS**

Over half of participating organizations (64%) use their medical carriers to support their wellness programs.

Responding organizations also use medical carriers or health plans to offer health risk assessments (73%), biometric screenings (65%) and wellness communications (97%).

### TO WHAT EXTENT DO YOU USE THE FOLLOWING SERVICES OFFERED THROUGH YOUR MEDICAL CARRIER TO SUPPORT **WELLNESS INITIATIVES?**

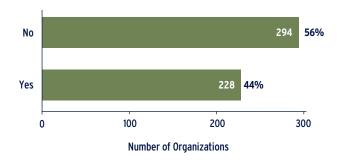


# THIRD-PARTY WELLNESS VENDORS AND SOLUTIONS

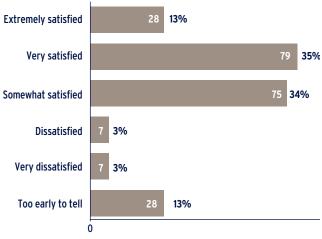
Forty-four percent (44%) of survey participants used a third-party vendor to support their wellness program. This represents an 18% increase over last year's survey results. A third (33%) of those who utilized a third-party vendor had done so for less than one year; nearly another third (30%) have worked with a third-party wellness vendor for between one and two years, and the remainder (38%) had used a vendor for three years or more. The recent proliferation of third-party vendors is transforming how employers might consider addressing the health and productivity needs of their workforce and dependents.

Often, organizations that have maximized their carrier wellness resources that are looking for a customized wellness program, contract with a third-party vendor.

#### DO YOU USE A THIRD PARTY VENDOR/SOLUTION TO SUPPORT YOUR WELLNESS PROGRAM?

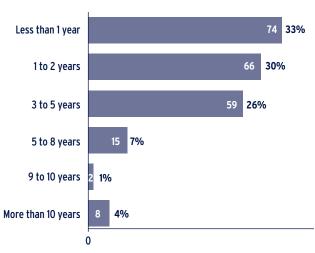


### HOW SATISFIED ARE YOU WITH THE SERVICES/SOLUTIONS PROVIDED BY THE THIRD PARTY VENDOR?



### **Number of Organizations**

### HOW LONG HAVE YOU HAD THIS THIRD PARTY VENDOR IN PLACE?



**Number of Organizations** 

## WELLNESS PROGRAMS

Of the 783 participants who responded to whether they had a wellness program, 583 (68%) have some type of wellness program in place. This represents an increase of 9% compared to last year. Of these 68%, 28% have a basic program, 29% have an intermediate program and 11% have a comprehensive program.

Wellness programs are defined as:

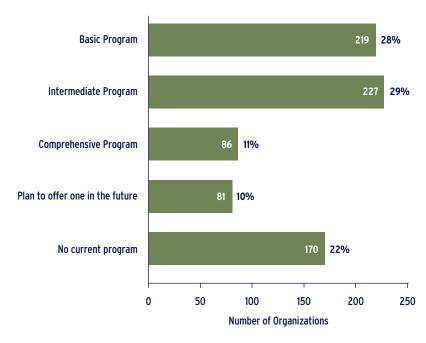
Basic: Just getting started with a wellness program. This program offers a few voluntary activities, such as lunch and learns, health fairs and team challenges. They operate with minimal or no budget.

**Intermediate:** This program has a designated wellness committee or internal program coordinator. This program offers most of the components of a basic program plus health risk assessments, on-site biometric screenings, health coaching and/or a wellness web portal. Some incentives are available for program participation and a designated wellness budget.

Comprehensive: This program offers most of the components of an intermediate program plus targeted behavior change interventions and has significant wellness incentives. The program is offered to spouses, tracks wellness program data year by year, and focuses on evaluating the impact of the wellness program.

Thirty-two percent (32%) of survey participants do not offer a wellness program. Ten percent (10%) of the 32% recognize the importance of programs and plan to implement a wellness program in the future.

### HOW WOULD YOU DESCRIBE YOUR ORGANIZATION'S WELLNESS PROGRAM?



### **BARRIERS TO PROGRAMS**

The biggest organizational barrier to offering a wellness program is that organizations don't have enough time and/or staff to dedicate to it. Budget constraints are also a reason cited for not implementing a wellness program. In addition, the survey shows that very small organizations believe they have too few employees to offer a wellness program. However, an analysis should be conducted of staffing costs versus the high cost of employee poor health habits and claims.

# WELLNESS PROGRAM COMPONENTS

Lifestyle topics, such as physical activity and nutrition, continue to be the leading opportunities organizations address through their wellness program. Behavioral interventions and condition-specific initiatives also show significant uptake among participants.

### WHICH OF THE FOLLOWING TOPICS DOES YOUR ORGANIZATION ADDRESS THROUGH ITS WELLNESS PROGRAM?



## **COST OF WELLNESS PROGRAMS**

Research from The Wellness Council of America (www.welcoa.org) indicates the need for a financial investment to realize a return or benefit from a worksite wellness program. Thirty-six percent (36%) of survey participants do not have a defined budget this year. In a few instances, funds may be available to support the program, but financial support is not specifically identified as a line item on the organization's budget. Seventeen percent (17%) of participants spend \$150 or more per employee per year on their programs.

Organizations use a combination of funding sources for their wellness programs. For example, the carrier wellness budget may pay for biometric screening while the employer pays the employee incentive to drive biometric screening participation. Of the organizations with any budget, 88% of the programs are funded by the organization, 20% are funded by the carrier, and 13% are funded by employee contributions.

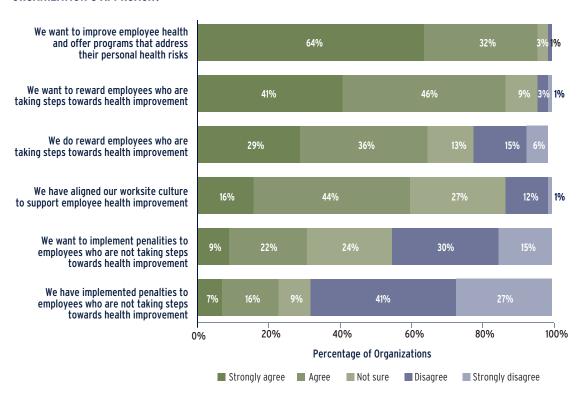
### WHAT IS THE ORGANIZATION'S ESTIMATED PER EMPLOYEE PER YEAR COST FOR THE WELLNESS PROGRAM INCLUDING **INCENTIVES, STAFFING, VENDORS, ETC.?**



# WELLNESS PROGRAM STRATEGY

In recent years, the wellness industry has seen a shift in strategy from a reward (carrots) to a penalty (sticks) approach in an effort to increase employee engagement in wellness programs and drive behavior change. Ninety-six percent (96%) of organizations want to improve their employees' health and reward employees who take steps toward improvement. Sixty eight percent (68%) of participants disagree with a penalty approach. Yet, 31% of participants want to implement penalties in the future. The approach to incentives, whether reward or penalty, is dependent upon the culture and philosophy of the organization and must be carefully considered. Employee feedback is also an important consideration for an organization's incentive program and overall strategy. Over a third (35%) of our survey participants are not soliciting employee feedback about their wellness program.

### WHEN THINKING ABOUT YOUR WELLNESS PROGRAM'S STRATEGY, WHICH STATEMENTS MOST CLOSELY REFLECT YOUR **ORGANIZATION'S APPROACH?**



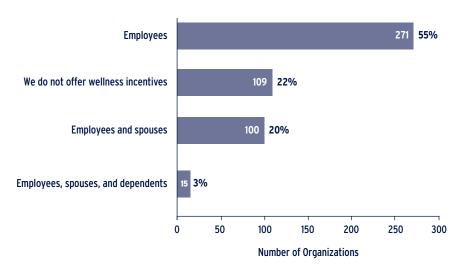
# WELLNESS INCENTIVE ELIGIBILITY

This year, 78% of survey participants said that they employed some form of wellness incentive. Organizations use several types of incentives as part of their wellness program to drive behavior change. Survey participants were asked to indicate which type of incentive criteria they use from the following choices: participation only, program completion, progress-based, outcomes-based or a combination. The most popular type of incentive is participation-based (64%). Fourteen percent (14%) of survey participants are using an outcomes-based incentive. Finally, some survey participants use more than one type of incentive. For example, 22% use a combination of criteria in order to receive the incentive.

Wellness incentives are primarily employee-focused, but this year, the results indicate that covered spouses are also a wellness program target. However, very few employers (3%) offer incentives to the entire eligible family.

- 55% of employers offer employee incentives.
- 20% offer incentives to employee and spouses.

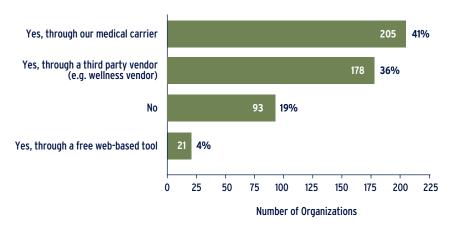
#### WHO IS ELIGIBLE TO EARN WELLNESS INCENTIVES?



## **HEALTH RISK ASSESSMENTS**

A health risk assessment (HRA) is a common component of many wellness programs. The organizational data generated on an aggregate basis can help organizations better understand the health risks of their population, plan targeted programs, and serve as evaluation tools. Eighty-one percent (81%) of survey participants offer a HRA as part of their wellness program which is consistent with last year's survey. The majority of organizations are offering the HRA through their carriers (41%) or third-party wellness vendors (36%). The most prevalent participation range for HRA completion is between 26%-50%, yet 47% of organizations enjoy over a 51% participation rate.

#### DO YOU OFFER A HEALTH RISK ASSESSMENT AS PART OF YOUR WELLNESS PROGRAM?

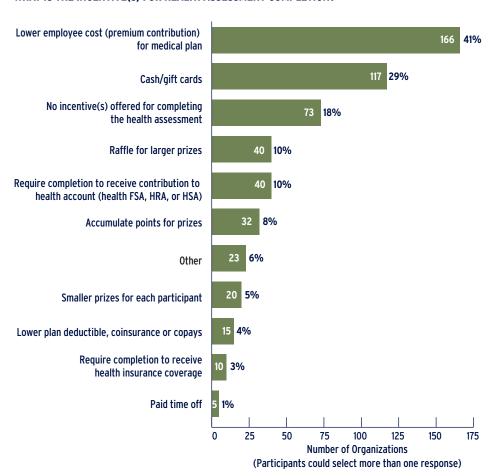


# **HEALTH RISK ASSESSMENT INCENTIVES**

Incentives for completing the health risk assessment remain popular. Similar to last year, the most common incentive is an increased premium contribution to the medical plan that lowers employee cost. Other popular incentives include cash/gift cards (29%), raffles for gifts (10%) and contributions to health savings or reimbursement accounts. Only 18% did not offer an incentive.

The organizations who have recently introduced a wellness program or that do not have an incentive plan in place for their programs, may rely on carriers' health assessment tools that often include incentives. Therefore, some organizations rely on their carriers' program incentives to encourage participation.

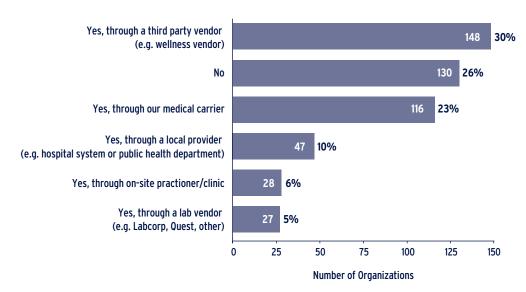
### WHAT IS THE INCENTIVE(S) FOR HEALTH ASSESSMENT COMPLETION?



# **BIOMETRIC SCREENINGS**

Seventy-four percent (74%) of survey participants offer biometric screenings and similar to HRAs, participation rates increase with incentives. Biometric screenings objectively reveal health risks as compared to the subjective self-reporting health risk assessment.

### DO YOU OFFER BIOMETRIC SCREENINGS AS PART OF YOUR WELLNESS PROGRAM?





During our first health fair and on-site screening event, we identified three employees who had not been to the doctor in over ten years whose blood pressure was so dangerously high, they had to be sent to the hospital by ambulance. Upon returning to work, we found them a primary care doctor and cardiologist. At the second annual health fair, all three passed their screenings with flying colors.

### **Destination Maternity Corporation**

At our Health Fair one employee was identified as having extremely high blood pressure and paramedics were called. The employee was transported to the hospital, treated for high blood pressure and thus averted a possible stroke or heart attack.

### Kids in Distress, Inc.

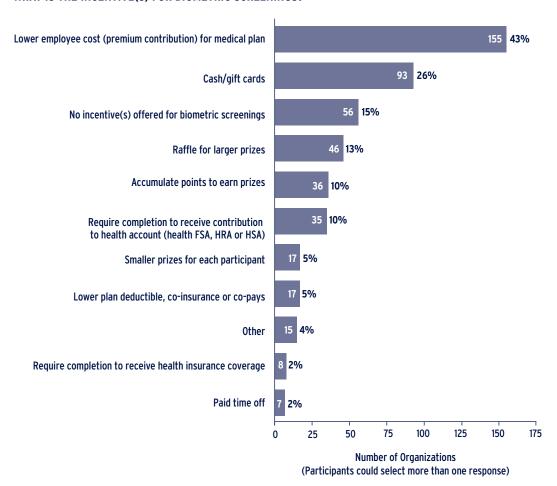
Biometrics program had some employees immediately referred to personal physician and medication prescribed to control high blood pressure.

### **Native American Tribe**

# **BIOMETRIC SCREENING INCENTIVES**

Similar to health risk assessment incentives, the most common incentive for completing biometric screenings is a premium contribution to the medical plan lowering employee cost (43%), followed by cash/gift cards (26%), and raffles for gifts (13%). Fifteen percent (15%) provide no incentive for biometric screenings.

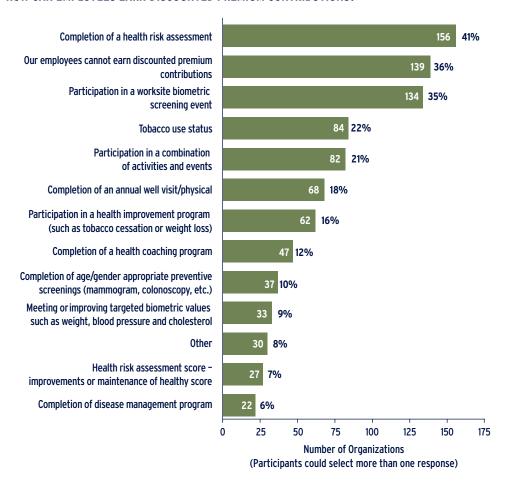
#### WHAT IS THE INCENTIVE(S) FOR BIOMETRIC SCREENINGS?



## DISCOUNTED PREMIUM INCENTIVES

A premium discount is the most popular incentive to encourage employees to participate in a health risk assessment and in biometric screenings. With health risks identified through these two program components, support and outreach can be initiated to help the employee take action to reduce health risks. Overall, a premium discount is a popular incentive for many components of a wellness program.

#### HOW CAN EMPLOYEES EARN DISCOUNTED PREMIUM CONTRIBUTIONS?

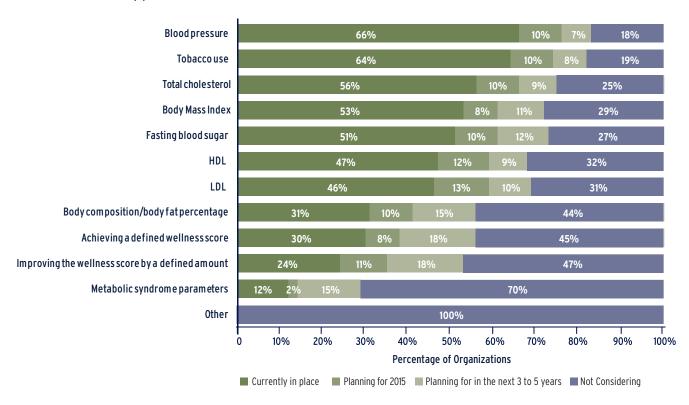


## **OUTCOME-BASED INCENTIVE DESIGN**

Organizations are seeking research to confirm the increasing prevalence of worksite wellness programs and innovative ways to drive behavior change. In the last five years, we have seen organizations advance their wellness program from a participation-based program to a health contingent program adopting an outcomes-based incentive strategy.

Nineteen percent (19%) of survey participants use outcomes-based incentives. The majority of those who have already implemented or those who are planning to do so in 2015 are focused on the following health factors: blood pressure (76%), tobacco use (74%) and total cholesterol (66%). Over half (51%) of the organizations reporting an outcomes-based design say it is too early to assess its impact, although 21% report health risks are improving.

#### WHICH HEALTH FACTOR(S) IS CURRENTLY PART OF YOUR OUTCOMES-BASED INCENTIVE STRUCTURE?



When administering an outcomes-based incentive strategy, organizations must provide reasonable alternative standards to employees to be legally compliant. This year 24% of those who have an outcomes-based incentive strategy in place do not offer reasonable alternative standards. This represents a significant (and favorable) decrease from 42% of last year's survey participants. To ensure your program is HIPAA compliant, discuss incentive compliance with your vendor partners and your legal counsel.

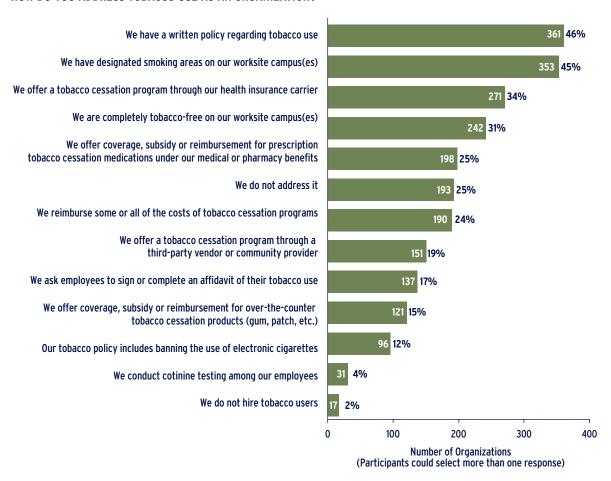


We have had over a dozen employees become aware of life threatening illness as a result of the incentive to participate in the screenings and risk assessments. Mid-Market Training & Consulting Company



## TOBACCO USE IN THE WORKPLACE

#### HOW DO YOU ADDRESS TOBACCO USE AS AN ORGANIZATION?



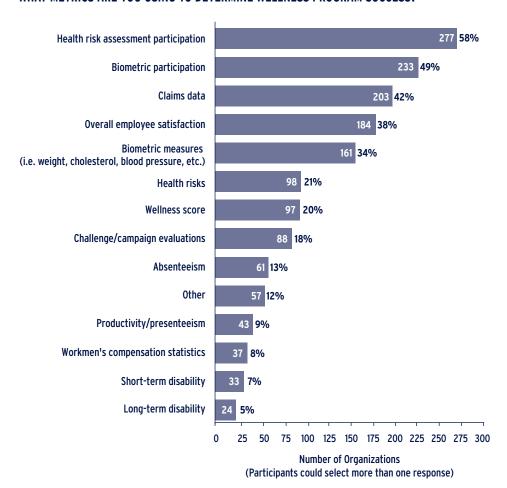
Although recent health care reform legislation has impacted tobacco incentives/disincentives, allowing a larger incentive, there was not a significant change in organizational approach to addressing employee tobacco use compared to last year's survey results. Organizations continue to implement tobacco-free campuses utilizing carrier resources and tobacco cessation aids and subsidies or waivers to assist their employees who want to quit tobacco use. Current research by the Centers for Disease Control and Prevention estimates the productivity loss and additional medical cost impact of a tobacco user at \$4,400/year. Yet, 25% of respondents are not addressing tobacco use in the workplace.

Twelve percent of responding organizations are banning the use of e-cigarettes in their tobacco policy. According to the American Cancer Society (ACS), electronic cigarettes provide nicotine to the user and nicotine is a highly addictive substance. Even though the ACS recognizes that e-cigarettes may have the potential to help some smokers stop, at the time of this publication, it has not endorsed them as a tobacco cessation aid.

# METRICS FOR DETERMINING WELLNESS **PROGRAM SUCCESS**

Health risk assessment participation (58%), biometric screening participation (49%), and claims data (42%) are the top three metrics that participating organizations use to determine the success of their wellness programs. As the sophistication of wellness programs grow, we expect to see a shift of metrics to include productivity measures (absenteeism, presentism, etc.) and an increased importance placed on claims data.

#### WHAT METRICS ARE YOU USING TO DETERMINE WELLNESS PROGRAM SUCCESS?





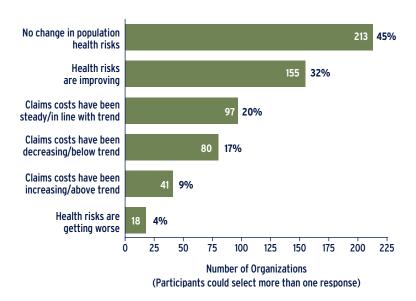
We've seen a decrease in unattended chronic conditions and a corresponding decrease in sick leave usage, resulting in a lower-than-expected rate increase for 2014.

Mid-Market Non-Profit Organization

# WELLNESS PROGRAMS' IMPACT ON **HEALTH RISKS**

About half of survey participants with wellness programs reported a measurable improvement in medical costs and risks. Nearly a third (32%) of survey participants report that the health risks of the population served by their wellness programs were improving. An additional 17% reported their medical claims cost as "below trend," suggesting that they were "bending the health care cost trend." Forty-five percent (45%) of survey participants reported no measured change in population health risks.

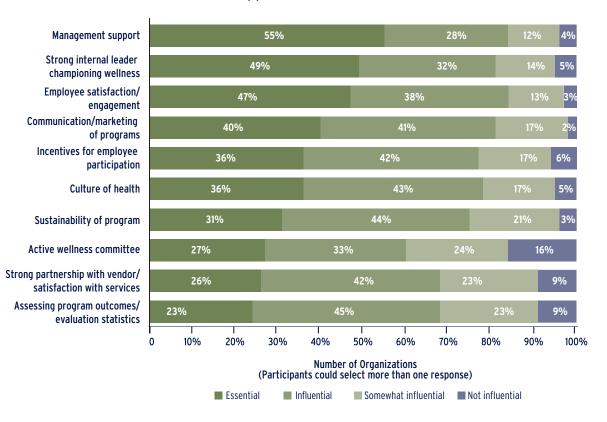
FROM THE WELLNESS PROGRAM REPORTING AVAILABLE TO YOU FROM THE HEALTH RISK ASSESSMENT, SCREENING OR CLAIMS DATA, WHAT HAS BEEN THE OVERALL TREND WITH YOUR POPULATION'S HEALTH RISKS?



# WHAT INFLUENCES WELLNESS **PROGRAM SUCCESS?**

The factors that are considered the most essential in influencing the success of wellness programs include management support (55%), a strong internal leader championing wellness (49%), employee satisfaction/engagement (47%) and communications or the marketing of programs (40%).

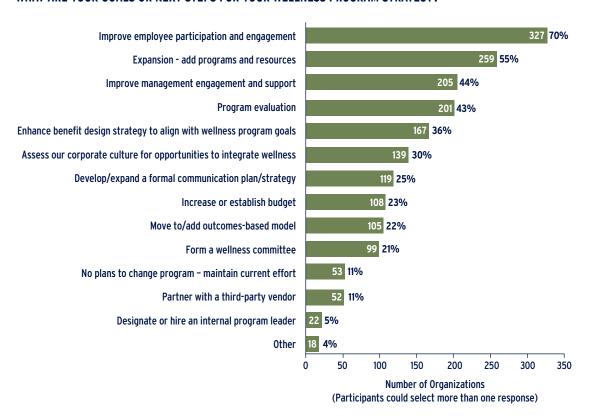
### HOW INFLUENTIAL ARE THE FOLLOWING FACTOR(S) IN THE SUCCESS OF YOUR PROGRAM?



## NEXT STEPS FOR WELLNESS STRATEGY

Improving employee participation and engagement (70%) has been the top stated goal for the past three years in Willis Health and Productivity surveys. Participating organizations also listed program expansion (55%) and improving management engagement and support (44%) as the other two goals for their wellness strategies.

#### WHAT ARE YOUR GOALS OR NEXT STEPS FOR YOUR WELLNESS PROGRAM STRATEGY?



### **EXPANSION OF PROGRAM**

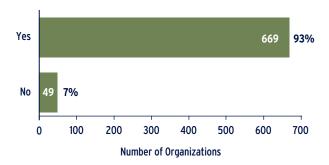
We have been running our program for four months with a participation rate of 35%. We have two employees that have guit smoking and several employees that are working successfully towards weight reduction. For a small company I think we are off to a great start with a plan to expand next year.

Mid-Market Manufacturer

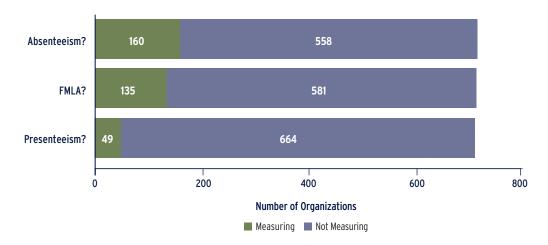
# MEASURING THE IMPACT OF HEALTH ON PRODUCTIVITY

The vast majority of organizations (93%) believe that healthier employees are more productive employees, yet very few are measuring the impact of employees' absenteeism (22%), FMLA (19%) and presenteeism (7%) on their operational productivity. Dr. Ronald Leopold, MD, MBA, MPH, Willis North America's National Medical Director, recently observed: "There is a business value of a healthier working population that transcends health care costs. More employers are starting to look at the productivity implications around health conditions and health risks. We are just now on the verge of seeing a greater focus on how workforce health impacts absenteeism, presenteeism and business operations." This year's study indicates that most employers understand that there is a relationship between health and worker productivity, but most have not looked to measure its impact.

#### DOES YOUR ORGANIZATION EMBRACE THE BELIEF THAT HEALTHIER EMPLOYEES ARE MORE PRODUCTIVE EMPLOYEES?



#### IS YOUR ORGANIZATION MEASURING THE IMPACT OF PRODUCTIVITY OF ITS EMPLOYEE'S?



In our first year, we increased our screening participation by 25% and identified over 50 employees with chronic conditions, mostly pre-diabetics and (high) cholesterol that were previously unmanaged. Last year we started a walking program that really got folks moving and everyone from our President to grounds keeping staff were wearing their company logo pedometers. It was great to see the top-to-bottom participation!

**Ohio Northern University** 

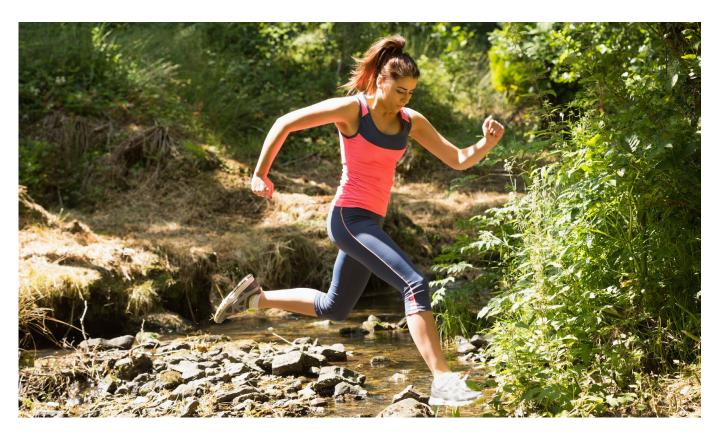
# **GLOBAL WELLNESS**

With the adoption and progress of wellness programs in the United States, the expansion to implementing programs for global employees is the logical next step. A small, but significant subset (22%) of participating organizations have employees outside of the United States.

However, of the 157 (22%) that have employees working outside the U.S., only 14% have implemented some type of wellness program for their international population. We see the growth of wellness programs to international workers as an opportunity to implement culturally sensitive program components with incentives beyond flu shots, EAPs, fitness activities and nutrition. Wellness programs present an opportunity for global organizations to reduce costs.

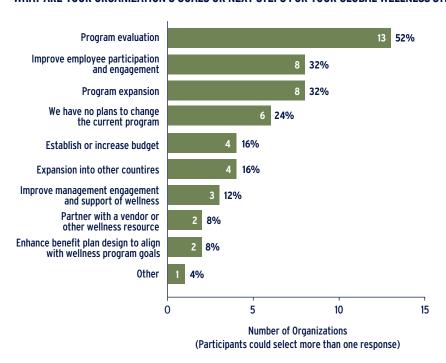
### HAS YOUR ORGANIZATION IMPLEMENTED A WELLNESS PROGRAM FOR EMPLOYEES OUTSIDE THE U.S.?





# **NEXT STEPS FOR GLOBAL ORGANIZATIONS**

### WHAT ARE YOUR ORGANIZATION'S GOALS OR NEXT STEPS FOR YOUR GLOBAL WELLNESS STRATEGY?



Companies with global wellness programs indicate their future goals to focus more on program evaluation. In contrast to U.S. organizations' reported goals, the next steps for participants with a global program include improving employee participation and engagement (32%) and program expansion (32%).



We've seen a decrease in unattended chronic conditions and a corresponding decrease in sick leave usage, resulting in a lower-than-expected rate increase for 2014.

Mid-Market Non-Profit Organization

