

Analyzing the Success of Workplace Health Programs

Webinar

Carole Bonner, Researcher <a href="mailto:cbonner@ibiweb.org">cbonner@ibiweb.org</a>



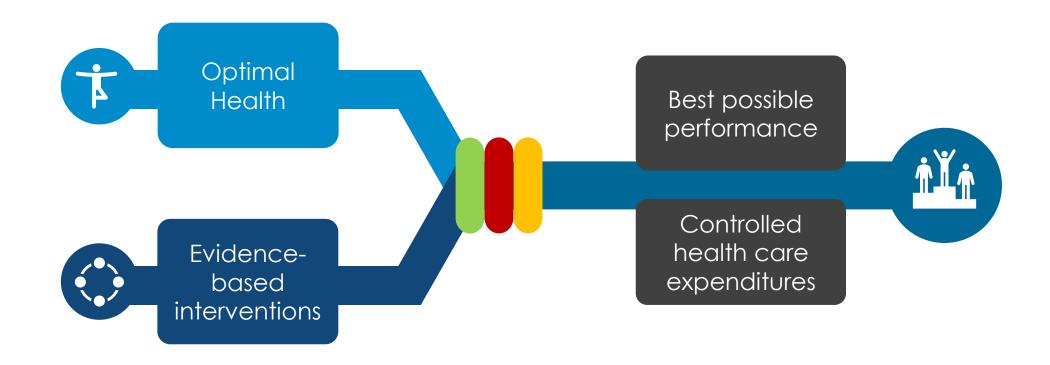
#### **AGENDA**

- 1 Background
- 2 Research Objectives
- 3 WHP Program Components
- 4 Data Trends and Challenges to Measurement
- 5 Defining and Measuring Success



## Background

WHPs have become a widespread model for companies across the globe





## Research Objectives

OFFERING:

What WHP programs are being offered?

Are offerings different crosssectionally? (by company size, Industry, region) What types ofdata are being

captured

regarding WHP

offerings?

How are these data being

used?

What are the challenges to measuring WHP impact?

What defines a successful WHP?

What are effective ways to track performance?

What are effective ways to convey success and value to leadership?

- (1) Background
- 2 Research Objectives
- WHP Program Components
- (4) Data Trends and Challenges to Measurement
- (5) Defining and Measuring Success



## Workplace Health in America

- Data collected by the Center for Disease Control
- Nationally representative sample of 2,483 worksites
- Describes the offerings of U.S. workplace health programs and practices
- It includes data across size, industry, and region
  - This survey is unusual in that it includes worksites with less than 50 employees and public administration

	OBSERVED FREQUENCIES	WEIGHTED PERCENTAGES
NUMBER OF EMPLOYEES		
10-24	1175	57%
25-49	655	21%
50-99	365	13%
100-249	263	7%
250-499	131	1%
500+	254	1%
INDUSTRY SECTOR		
Agriculture, Mining, Utilities, Construction, Manufacturing	525	15%
Wholesale, Retail, Transportation & Warehousing	311	20%
Arts & Rec, Accommodation & Food Svc, Other Services	433	20%
Information, Finance & Insurance, Real Estate, Professional Services, Management, Admin & Waste Management	429	20%
Educational Services, Health Care & Social Assistance	551	17%
Public Administration	256	7%
Hospital Worksites	338	1%
REGION		
Northeast	532	21%
Southeast	530	25%
Midwest	591	20%
Southwest	667	16%
West	523	18%

99% smaller than 500 employees

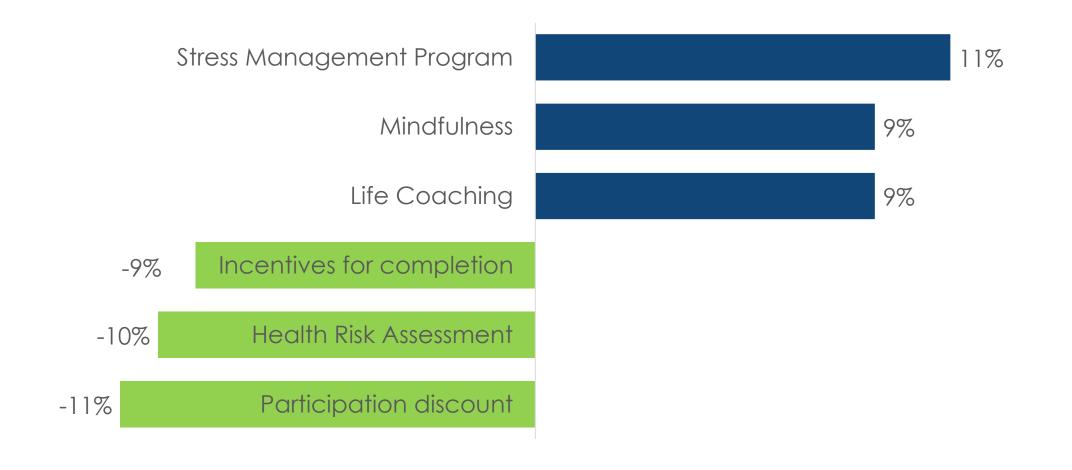
1% 500+ employees Less than half (46%) of U.S. worksites offer some type of health program to employees.



- 1 Background
- (2) Research Objectives
- (3) WHP Program Components
- (4) Data Trends and Challenges to Measurement
- (5) Defining and Measuring Success



## Largest WHP Changes 2019 to 2020



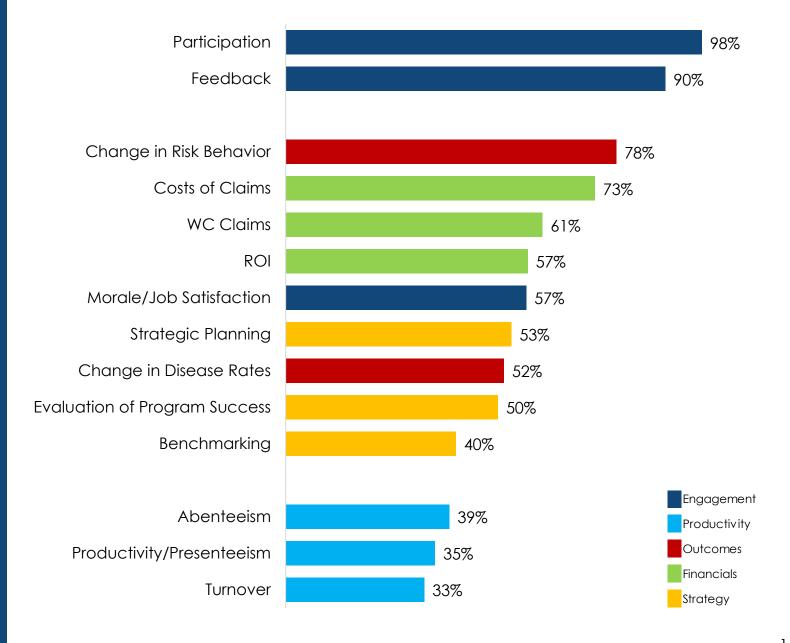


Source: SHRM Benefits Survey 2020

#### The Data Story

50% of worksites with programs reported their worksite used data to evaluate program success.

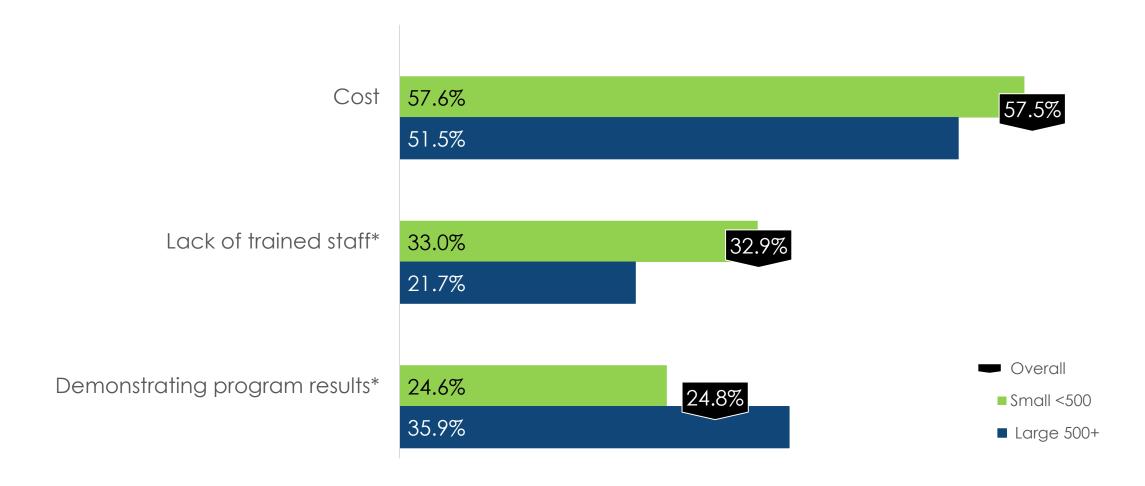
Almost all collect data on employee participation (98%) followed by feedback (90%).





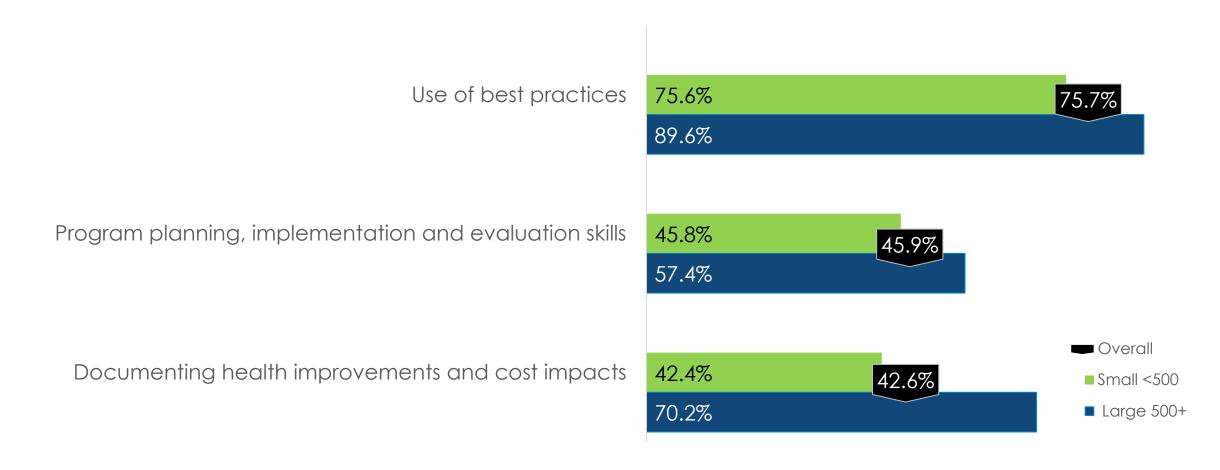
#### **BARRIERS**

Worksites were asked about barriers or challenges to offering WHPs; we report those potentially impacting data collection and evaluation.



#### **BARRIERS**

Worksites were asked "What training or technical assistance topics would be most useful for the people responsible for promoting employee health/wellness and safety at your worksite?"



# HOW DO WE KNOW IF THE PROGRAMS ARE SUCCESSFUL?

(5) Defining and Measuring Success





## STRATEGIC PLANNING

#### Define success through strategic planning

- What are we trying to achieve?
- What will we do to achieve it?

## PERFORMANCE TRACKING

#### Measure and evaluate over time

- How are we doing?
- How can we improve?

## DEMONSTRATING VALUE

#### **Demonstration of value**

- Did we attain our goals?
- How did our progress add value to the organization?





#### For Example:

- Opportunity: Musculoskeletal (MSK) claims are responsible for the 1.6% of the frequency and 40.8% of the cost of all work-related claims
- Goal: Reduce MSK claims by7%
- **Strategy:** Increase utilization of health coaching and attendance to chronic MSK conditions education sessions.

STRATEGIC GOAL	POSSIBLE TOOL	HELPFUL RESOURCES
Identify which conditions are responsible for the largest share of your organization's health care costs.	Claims Data Analysis	Using Claims Data (HSRIC) Provides examples of analyzing claims data. Video, Links, and other resources
Calculate the financial cost of a risk factor.	Risk Factor Cost Appraisal	Health Risk Appraisals (CDC) With tools and checklists
Determine if/when benefits will offset program costs.	Break-even Analysis	Break-Even Analysis in Healthcare Setup Break-even analysis, Cost-volume profit analysis, Multiproduct/service organization
Determine which interventions are more cost-effective	Cost-effectiveness Analysis	Cost-Effectiveness Analysis of a Worksite Clinic (Johns Hopkins) Case study with real-life examples
Compare program costs against benefits.	Benefit-cost Analysis	Benefit-Cost Analysis Toolkit (FEMA) Includes excel workbooks and guidance which can be adapted
Project best, worst and midrange outcomes.	Forecasting	Can be "naive method" or advanced methods. (Can use claims, absentee, turnover, etc)

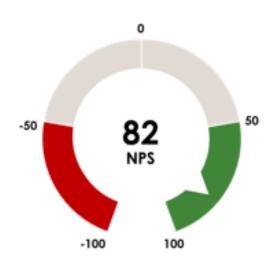


#### Continuing Step 1 Example:

- •Q1: MSK health coaching utilization improved by 2%
- •Q1: 354 employees attended MSK conditions education sessions.
- Improvements: Virtual option to education sessions should be implemented

IF YOU WANT TO	POSSIBLE TOOL	POTENTIAL RESOURCES
EXTERNAL: Know how your programs compare to your competitors.  INTERNAL: Know the general health and needs of your employees	Benchmarking	<ul> <li>Research</li> <li>Industry Tools</li> <li>Health Risk Assessments</li> <li>Claims Data</li> <li>Consultants</li> </ul>
Evaluate and keep track of performance, assess strategies, identify gaps, track improvements	Scorecards	<ul> <li>CDC Worksite Health ScoreCard</li> <li>HERO Scorecard</li> <li>WHAI, Workplace Health Achievement Index</li> <li>Well Workplace Checklist</li> <li>Innovation and Value Initiative</li> </ul>
Develop indicators and follow performance	KPIs/ Dashboards/ Reports	<ul><li>Initial strategic planning</li><li>Scorecards</li><li>organizational goals</li></ul>





#### Musculoskeletal Health Programs

Employees reported a perceived improvement in heath and wellbeing.

**↑6%** Health Coaching Utilization

**2,565** Attendance Educational Sessions

**564** Utilization Virtual Sessions

**0.9%** (**♦0.7%**) Claims frequency

**28.4%** (**♦12.4%**) Portion of Claims Cost

## In Summary

## ARE THE PROGRAMS WORKING?

Evaluation begins with measurable, strategic goals which establish early key performance indicators (KPIs).

Progress toward these goals provides initial indicators of success.

#### **PLAN TO MEASURE**

Refine the strategy to include measurable goals

#### TRACK PERFORMANCE

Track progress and continuously improve the strategy

#### **DEMONSTRATE VALUE**

Steps 1 and 2 provide a definitive path to demonstrate the value



### **Q&A** Discussion



Kelly McDevitt
President,
Integrated
Benefits Institute



Rich Krutsch Vice President, People Services, ArcBest



## Thank you!

Carole Bonner, Researcher cbonner@ibiweb.org

