Most successful financial investors will acknowledge the merit of the following: In order to make money, you generally have to spend money. Any company attempting to survive or grow will examine and re-examine avenues to maximize cost savings and minimize cost expenditure. Employee health care premiums generally represent a significant expenditure for employers. A September 27, 2006 article posted on SFGate.com written by Victoria Collier, staff writer for the San Francisco Chronicle, highlights that employer-paid health care premiums grew 7.7% in 2006, which actually represented a decrease from 9.2% in 2005. Premiums for policies offered by employers have risen more than 57% since 2000 (USA Today, Even the Insured Can Buckle Under Health Care Costs, Appleby, Julie, 4/25/06).

The adaptation that many companies have made in order to survive involves restricting healthcare benefits to employees. Average premiums for employer-sponsored coverage are now $11,480 a year for families and $4,242 for individuals. Workers on average contribute $2,973 per year toward family coverage and $627 for individual benefits. More and more consistently, employers are unwilling to accept the full burden of providing healthcare benefits and place more of the burden on the employee. The sad reality of this is that a company’s greatest investment, its employees, can also represent its greatest financial burden, specifically, in healthcare expenditure. Conversely, placing more of the financial responsibility on the employee increases the accountability and motivation make healthful decisions. It has been well-documented that the health of the American people can be greatly improved. Lifestyle choices, diet, and exercise have consistently been highlighted as areas for improvement. According to PreventDisease.com, it is estimated that between 70-80% of health care expenditure for the average American is due to preventable causes. For example, the landmark INTERHEART study of 30,000 men and women in 52 countries found that nine lifestyle factors accounted for almost all the risk of a heart attack: smoking, elevated cholesterol, hypertension, diabetes, obesity, poor diet, lack of physical activity, alcohol consumption, and psychosocial issues, such as depression and stress (Newsweek, Tipsheet, Lifestyle Changes May Save Your Life, Ornish, MD, Dean, 4/12/06). Exercise and dietary recommendations are primary treatment recommendations for 9 out of the 10 risk factors listed. This has not gone unnoticed by the business community. Currently, 81% of companies with 50 or more employees now offer some type of wellness programming as part of their benefits package. It has been estimated that between $500-700 per worker, per year is realized in health care cost savings by companies utilizing wellness programming. Johnson and Johnson reduced their absenteeism rate by 15% within 2 years of introducing their wellness program and cut hospital costs by 34% just after 3 years. Coors Brewing Company has saved over $2.3 million in lost wages due to absenteeism and $1.9 million in rehabilitative costs and cost avoidance through preventative health programming (PreventDisease.com, Worksite Wellness page).

Occupational health programs are now being viewed as substantial contributors to improving a company’s financial health. The availability of substance screening, appropriate physical assessments, pro-active safety programming, worksite injury
medical management, and educational resources have been shown to provide a strong return on investment. It has been well-established that individuals need to assume responsibility for their health and work proactively to maintain and improve their health. This is most important regarding the choices an individual makes daily. However, individuals cannot make intelligent choices unless they are first educated as to what an appropriate and healthful choice is.

One avenue to providing this information is early risk identification through employer sponsored wellness assessments. These screenings offer the employee tangible baseline health information. A program comprised of a health/lifestyle personal history questionnaire combined with basic physical measurements of blood pressure, cholesterol (total, HDL, LDL, triglycerides), glucose, height, weight, and waist measurements will reveal opportunities to improve health through informed decisions. Counselors then guide the employee through the results of the screening, providing explanation and highlighting areas of concern. This, in turn, facilitates a better partnership with the employee’s primary care physician. Health assessments not only benefit the employee, but also contribute to generating group data revealing areas of risk among the company’s workforce. This data can then be analyzed by the employer and appropriate resources can be obtained to improve areas of particular concern.

UVA-WorkMed has identified that, of those employees who have participated in health screenings at the University of Virginia, 24% have a family history of heart disease, about 40% do not exercise regularly, and 53% are overweight. Fifty-eight percent have low nutritional status and 93% do not consume 5 servings of fruit and vegetables daily. Through health and wellness programming, UVA-WorkMed has demonstrated health improvement by simply providing an on-site nutrition and fitness lifestyle-change program titled “No Sweat”. This program focuses on employees with cardiovascular risk factors, diabetes, or high blood pressure. With simple changes in eating and exercise over a six-week course, significant improvements in blood pressure, strength, flexibility, endurance, and fruit/vegetable consumption have been noted. The program emphasizes small, incremental changes in daily exercise, through bouts as short as ten minutes. Nutrition is improved with addition of fruit and vegetable servings, whole grains, and water consumption. The emphasis is on healthy choices added to an individual’s life, rather than on things one has to “give up”. Over the course of the six week program, the average weekly minutes of exercise tripled to 200 minutes per week, exceeding the minimum government recommendation of thirty minutes most days of the week. These changes represent potential, annual health care cost savings. Based on national data, a person who never exercised and is now exercising three times per week, saves $235 dollars annually. Those who add exercise save $78 annually for every day of added exercise (JAMA, Dec 1999, “Annual Health Care Costs”). Potential savings, based on the improvements in UVA class participants exceeded the cost of the program. The teaching provided through employee health and wellness programs help many to realize that further steps are required to improve their health. One participant wrote, “This has been extremely helpful in recognizing that my need for exercise and nutrition was sadly lacking. The lab work sent me straight to the doctor where I began medication for cholesterol, and now hypertension. My physician gave me a prescription for 60 days to ACAC where they are working very well with my need for more exercise and less television. I am feeling better and stronger.”
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