


# Evaluating wellness in your organization

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Measuring and managing your wellness program is important for the health of your organization. This tool will help you assess the wellness of your employees and understand your cost drivers.

 **Use this tool to set a benchmark for the following metrics before and after the implementation of your wellness program.**

Collaborate with your health plan, PBM, EBC, or a database organization to access existing benchmarking models that may help you estimate any data you may be missing

# Assess the health of your wellness program

Use the metrics below to analyze how many of your employees are taking advantage of the company's wellness program, as well as how it's affecting your bottom line.

▶ You do not have to fill in information for every field. If you do not have the data, consider revisiting this document and completing it after discussing the missing information with your health plan, EBC, PBM, or database organization.

	<input type="text"/>	<input type="text"/>
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**PROGRAM PARTICIPATION<sup>1</sup>** | The degree to which employees are enrolled and taking part in available health-related programs

Employees participating in wellness programs as a percentage of all eligible employees (%)	<input type="text"/>	<input type="text"/>
Employees participating in disease management programs as a percentage of all eligible employees (%)	<input type="text"/>	<input type="text"/>
Employees participating in disability management programs as a percentage of all eligible employees (%)	<input type="text"/>	<input type="text"/>

**FINANCIAL<sup>1</sup>** | Expenditures for all health-related benefits programs

Medical cost per employee (\$)	<input type="text"/>	<input type="text"/>
Pharmacy cost per employee (\$)	<input type="text"/>	<input type="text"/>
Incidental absence cost per employee (\$)	<input type="text"/>	<input type="text"/>
Disability cost per employee (\$)	<input type="text"/>	<input type="text"/>
Workers' compensation medical cost per employee (\$)	<input type="text"/>	<input type="text"/>

If participation rates are low and you're spending more than you'd like, consider raising awareness about your wellness program and informing employees of the benefits of getting involved

# Evaluate the wellness of your employee population

Use the metrics below to see where you should focus your program's efforts

<b>BIOMETRIC SCREENINGS<sup>1</sup>   The biometric profile of the workforce</b>		
Employees with fasting glucose <125 mg/dL (%)	<input type="text"/>	<input type="text"/>
Employees with LDL cholesterol <130 mg/dL (%)	<input type="text"/>	<input type="text"/>
Employees with systolic blood pressure <130 mm Hg (%)	<input type="text"/>	<input type="text"/>
Employees with BMI <25 kg/m <sup>2</sup> (%)	<input type="text"/>	<input type="text"/>
Employees meeting all 4 goals (%)	<input type="text"/>	<input type="text"/>
<b>CHRONIC CONDITIONS<sup>1,a</sup>   The prevalence and distribution of employee chronic health conditions</b>		
Employees with 0-1 chronic conditions (%)	<input type="text"/>	<input type="text"/>
Employees with 2-3 chronic conditions (%)	<input type="text"/>	<input type="text"/>
Employees with 4-5 chronic conditions (%)	<input type="text"/>	<input type="text"/>
Employees with >5 chronic conditions (%)	<input type="text"/>	<input type="text"/>
Prevalence of top 5 chronic conditions (%)	<input type="text"/>	<input type="text"/>

<sup>a</sup>Chronic conditions include heart disease, stroke, cancer, diabetes, obesity, and arthritis.<sup>2</sup>

# Evaluate the wellness of your employee population (cont'd)

	<input type="text"/>	<input type="text"/>
<b>HEALTH RISKS<sup>1,a</sup>   The profile of risk factors existing in the workforce</b>		
Employees with 0 to 1 health risks (%)	<input type="text"/>	<input type="text"/>
Employees with 2 to 3 health risks (%)	<input type="text"/>	<input type="text"/>
Employees with 4 to 5 health risks (%)	<input type="text"/>	<input type="text"/>
Employees with more than 5 health risks (%)	<input type="text"/>	<input type="text"/>
<b>PREVENTIVE CARE<sup>1</sup>   The degree to which employees are being screened for age- and gender-appropriate health conditions</b>		
Employees having a breast cancer screening (%)	<input type="text"/>	<input type="text"/>
Employees having a colon cancer screening (%)	<input type="text"/>	<input type="text"/>
Employees having a prostate cancer screening (%)	<input type="text"/>	<input type="text"/>
Employees having a cervical cancer screening (%)	<input type="text"/>	<input type="text"/>

<sup>a</sup> Health risks include lack of exercise or physical activity, poor nutrition, tobacco use, excessive alcohol consumption, high blood pressure, hyperlipidemia.<sup>3</sup>

# Evaluate the wellness of your employee population (cont'd)

<b>UTILIZATION OF SERVICES<sup>1</sup>  </b> The amount of care delivered and the health care setting in which it occurs		
Employees with inpatient hospitalizations (%)	<input type="text"/>	<input type="text"/>
Average inpatient hospital days (#)	<input type="text"/>	<input type="text"/>
Employees with emergency department visits (%)	<input type="text"/>	<input type="text"/>
Employees with primary care visits (%)	<input type="text"/>	<input type="text"/>
Average number of primary care visits (#)	<input type="text"/>	<input type="text"/>
Employees with specialist visits (%)	<input type="text"/>	<input type="text"/>
Average number of physician visits per employee (#)	<input type="text"/>	<input type="text"/>
Employees with chronic conditions having a medication adherence rate of >80% (%)	<input type="text"/>	<input type="text"/>
Cost of preventive care as a percentage of the cost of all medical care (\$)	<input type="text"/>	<input type="text"/>
Rates of hospital readmission (%)	<input type="text"/>	<input type="text"/>

**Now that you know the health of your overall workforce, consider tailoring your wellness program to manage specific conditions and their corresponding costs**

# Calculate the cost of obesity

Use the metrics below to analyze the financial impact obesity has on absenteeism and presenteeism in your organization to determine the importance of managing this disease

▶ If you do not know the breakdown of your workforce's BMI, consider filling in only the information for Class I to create a benchmark. If you know the cost of obesity per employee in your organization, replace the approximate costs with your company-specific numbers for a more accurate representation.

OBESITY   The approximate cost of obesity in your organization						
	CLASS I (BMI 30-34.9 kg/m <sup>2</sup> ) <sup>4</sup>	CLASS II (BMI 35-39.9 kg/m <sup>2</sup> ) <sup>4</sup>	CLASS III (BMI ≥40 kg/m <sup>2</sup> ) <sup>4</sup>	CLASS I (BMI 30-34.9 kg/m <sup>2</sup> ) <sup>4</sup>	CLASS II (BMI 35-39.9 kg/m <sup>2</sup> ) <sup>4</sup>	CLASS III (BMI ≥40 kg/m <sup>2</sup> ) <sup>4</sup>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
MALE COSTS <sup>5,a</sup>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
FEMALE COSTS <sup>5,a</sup>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
TOTAL COSTS	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

This table is only intended to be used as a model. All costs shown are projected estimates based on the referenced publications.

<sup>a</sup> Approximately 34% of adult males and 37% of adult females in the United States were obese in 2011-2012.<sup>6</sup> If you do not know how many of your employees are obese, these percentages may act as a guide for the above calculations.

**REMEMBER:** You do not have to fill in information for every field. If you do not have the data, consider revisiting this document and completing it after discussing the missing information with your health plan, EBC, PBM, or database organization.

# Calculate the cost of obesity (cont'd)

LOST WORK TIME DUE TO OBESITY   The approximate financial consequence of obesity-related absenteeism on total revenue		
 <b>RESET</b>	<input type="text"/>	<input type="text"/>
Company yearly revenue (\$)	<input type="text"/>	<input type="text"/>
Number of employees in organization (#)	<input type="text"/>	<input type="text"/>
Number of working days per year (#) <sup>a</sup>	<input type="text"/>	<input type="text"/>
Average number of lost days of work due to obesity (#) <sup>7,b</sup>	<input type="text"/>	<input type="text"/>
Number of employees with obesity (#)	<input type="text"/>	<input type="text"/>
<b>APPROXIMATE TOTAL REVENUE LOST<sup>c</sup></b>	<input type="text"/>	<input type="text"/>

**This table is only intended to be used as a model. All costs shown are projected estimates based on the referenced publications.**

<sup>a</sup> There are approximately 250 working days per year. If you know the number of working days appropriate to your organization, then use that number instead.  
<sup>b</sup> Employees with BMI=40 kg/m<sup>2</sup> miss 18.2 days per year, according to 1 study. In comparison, employees with BMI=25 kg/m<sup>2</sup> miss 10.3 days per year. This leads to a difference of 7.9 days of lost revenue each year per employee with BMI=40 kg/m<sup>2</sup>. If you know the average number of lost days of work due to obesity in your organization, then use that number instead.<sup>7</sup>  
<sup>c</sup> Total revenue loss is based on the number of days missed due to absenteeism, workers' compensation, and short-term disability for an individual with BMI=40 kg/m<sup>2</sup>.<sup>7</sup>

# Calculate the cost of obesity (cont'd)

## LOST PRODUCTIVITY AND OBESITY | The approximate financial consequence of lost productivity, due to obesity, on total revenue

 <b>RESET</b>	<input type="text"/>	<input type="text"/>
Company yearly revenue (\$)	<input type="text"/>	<input type="text"/>
Number of employees in organization (#)	<input type="text"/>	<input type="text"/>
Number of working days per year (#) <sup>a</sup>	<input type="text"/>	<input type="text"/>
Average number of lost days of work due to obesity (#) <sup>b,b</sup>	<input type="text"/>	<input type="text"/>
Number of employees with obesity (#)	<input type="text"/>	<input type="text"/>
<b>APPROXIMATE TOTAL REVENUE LOST<sup>c</sup></b>	<input type="text"/>	<input type="text"/>

**This table is only intended to be used as a model. All costs shown are projected estimates based on the referenced publications.**

<sup>a</sup> There are approximately 250 working days per year. If you know the number of working days appropriate to your organization, then use that number instead.  
<sup>b</sup> Employees with BMI=40 kg/m<sup>2</sup> are less productive by approximately 21.9 days, according to 1 study. In comparison, employees with BMI=25-29.9 kg/m<sup>2</sup> experienced no presenteeism. In fact, according to the same study, these individuals were overproductive and had -3.3 days of presenteeism. This leads to a difference of 25.2 days of lost revenue each year per employee with BMI=40 kg/m<sup>2</sup>.<sup>8</sup>  
<sup>c</sup> Total revenue loss is based on an individual with BMI=40 kg/m<sup>2</sup>.<sup>8</sup>

**Weight loss may lead to increased productivity in employees with obesity.<sup>9</sup> Consider focusing your wellness program on treating obesity and see the effect it may have on your workforce**



Interested in learning more? Visit [www.NovoNordiskWORKS.com](http://www.NovoNordiskWORKS.com)

**References:** **1.** Parry T, Sherman B. A pragmatic approach for employers to improve measurement in workforce health and productivity. *Popul Health Manag.* 2012;15(2):61-64. **2.** Centers for Disease Control and Prevention. CDC's chronic disease prevention system. <http://www.cdc.gov/chronicdisease/about/prevention.htm>. Updated May 27, 2015. Accessed May 15, 2018. **3.** Brauer UE, Briss PA, Goodman RA, Bowman BA. Prevention of chronic disease in the 21st century: elimination of the leading preventable causes of premature death and disability in the USA. *Lancet.* 2014;384(9937):45-52. **4.** Poirier P, Giles TD, Bray GA, et al. Obesity and cardiovascular disease: pathophysiology, evaluation, and effect of weight loss. *Circulation.* 2006;113:898-918. **5.** Ostbye T, Stroo M, Eisenstein EL, Peterson B, Dement J. Is overweight and class I obesity associated with increased health claims costs? *Obesity.* 2014;22:1179-1186. **6.** Ogden C, Carroll MD, Kit BK, Flegal KM. Prevalence of childhood and adult obesity in the United States 2011-2012. *JAMA.* 2014;311(8):806-814. **7.** Van Nuys K, Globe D, Ng-Mak D, Cheung H, et al. The association between employee obesity and employer costs: evidence from a panel of U.S. employers. *Am J Health Promot.* 2014;28(5):277-285. **8.** Finkelstein EA, DiBonaventura MD, Burgess SM, Hale BC. The costs of obesity in the workplace. *J Occup Environ Med.* 2010;52(10):971-976. **9.** Bilger M, Finkelstein EA, Kruger E, Tate DF, Linnan LA. The effect of weight loss on health, productivity, and medical expenditures among overweight employees. *Med Care.* 2013;51(6):471-477.