

Benefits Forum
October 24, 2018

Wellness Program Roundtable Discussion

Charter Manufacturing

- Typical wellness program design
 - Health survey and onsite screening are required
 - Optional activities online to achieve discounted premium level
 - Company-funded wellbeing reward - \$300 per year but advocating for \$600 for employee + dependent
 - Doubled premiums for tobacco users (uses Quit for Life through Rally) but still allows smoking on campus (one-third of employees smoke)
 - Wellness committee meets quarterly; has wellness committee at each location
- Uses Rally through UHC, seems to be a good partner, but feel they are further ahead in wellness strategy than Rally; likes single sign-on
 - Rally rate is not negotiated through BHCG
 - Uses Real Appeal and feels it is working
 - Has financial fitness program included in Rally
 - Has been able to track ROI – can identify participants and breakout by different metrics. Getting back what they spend and more, but can't get a handle on what costs they are preventing
- Has robust internal communications for wellness
 - Developed internal employee survey re. wellness (three different surveys based on participation) to help develop communication/program strategy; 18% survey participation; 1% are recognized as all-stars and have special communications
 - Use window clings, posters, blogging videos and videos of all-stars to promote them
- Considering changes, other strategies for the future
 - Not going to offer onsite screening for 2019 (still will offer credit for outside screening, not making it a requirement) – some concerns about accuracy and employee dissatisfaction and they really don't do anything with the data
 - Considering life planning reward strategy that will offer \$1,000 that can be used for anything
 - Looking at incentivizing advance directives and incorporating mindfulness into their program
 - Looking to automate anywhere they can to help in recruitment with younger generation
 - Looking at American Heart Association monitor program

Rockwell

- Makes people aware they are an active wellness culture
 - Helps in recruiting – people are attracted to workplaces where health is important
 - Includes people in different areas in wellness committees – meet quarterly

- Wellness rep is at quarterly sales meeting to devote some time to wellness
- Has a couple of walking challenges; encourages people to compete; put a walking track inside the building
- Offers smoking cessation support
- Launched Real Appeal on 11/1
- Seeing increased participation in onsite biometric screening
 - Use the data from screening to recommend actions/program – goal is to make employees responsible for their health
- Offering Aware mindfulness program through EAP
 - Partnering with Beacon Health to offer Workplace Options – regimented program with five 20 minute sessions to work through techniques for stress reduction
 - Employer contributions based on salary tier level
 - Added mid-level employee classification (ee + spouse/dp or ee + children)
- After 10 years seeing what worked and what didn't – feels that they made a cultural impact but don't know if they can change high risk people
 - Looked at specific ROI – every year saw a reduction in risk and cost; might not be those in the highest risk population that participated, but saves money getting people to stay in the middle risk area instead of moving to the high risk
- Uses a communications company to help promote wellness
 - Share people's wellness stories in benefits newsletters and Yammer posts
 - Believe it's important to employ "drip, drip, drip" communications strategy

Reinhart Boerner Van Deuren

- Has required biometric screenings
 - Hasn't seen a big return from Rally, but encourages people to participate regardless
- Looking for a way to get people with underlying conditions to be engaged in wellness
- \$50 surcharge for smoking (self-reported)
 - Wasn't successful, offered program and if employee attended they didn't get charged

Briggs & Stratton

- Single high deductible plan; earned incentives go into HSA or HRA
- Focusing on determining outcomes of biometrics
 - Get points for health measures and activities but emphasis is helping employees having an awareness of health numbers
 - Needs to provide basic information (e.g., what is the result of having a high BMI?), looking to reach out to employees
 - Feels like it's a benefit going toward building a culture of health; a base that is better now through incremental steps

- In the process of conducting RFP for wellness vendor – have onsite clinics for a few locations, looking for one vendor to gain impact and be more proactive about identifying those that need support
- Wants to introduce testing for tobacco use vs. self reporting; smoke-free campus

Baird

- Gives wellness participation premium credit and HSA contribution
 - Has wellness committee and wellness champions; Total Rewards team meets with vendors and makes decisions
- Vendor change – used UHC Health Score last year
 - Extensive RFP process (Staywell, Virgin, Provata)
 - Took six months to select Staywell; objectives are to add culture of wellbeing to the “associate promise” (hasn’t changed in years) and to find a program that could fit everyone’s needs
- Working with HealthNext on 3-year strategy roadmap; interviewed leadership team, wellness champions and Total Rewards team to walk through onsite research
- Has integrated data and communications but working on more organized plan; messaging from leadership has huge impact

Nordco

- Has remote site employees – always a struggle to find the right channel
- Offers \$75 for biometric screening but feels like results go nowhere

Sendiks

- Doesn’t offer any other program but walking wellness; claims have gone up – drove decision to go with UHC
 - Doesn’t have a biometrics program but has considered it – wonders about ROI and if it can catch risks earlier
- Introduced \$50 tobacco surcharge on 5/1
 - Looking at going beyond self-reporting (18% self report now) and going to a smoke-free campus

Elmbrook Schools

- Working with HealthStat
- Use biometric screening but trying to formulate strategy (want to build a culture of health vs. change health)

Western States Envelope

- Did have PCP at onsite clinic (similar to concierge care) as a one-stop shop to keep employees out of the health system – Paladina Health
 - ROI showed claims data going down but very expensive to operate

2018 Wellness Program Roundtable

- Decided to disband it – exam room now empty (may use for blood pressure check room); some employees are paying individual memberships to continue
- Nervous about using UHC for everything