

The Hidden Cost of Poor Health

HealthFitness Connect: Possibilities in Motion



Measuring—and recovering— productivity in the workplace

July 10, 2012



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- Audience questions will be asked by the moderator at the conclusion of the presentations.

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HealthFitness Connect: Possibilities in Motion



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Today's Discussion

1. The business case for human capital management.
2. How do we know presenteeism when we see it?
3. What have we learned about presenteeism?
4. What can we do to reduce it?
5. Q&A

Health Management is a business strategy

The Business Problem: Human Capital Costs

- Direct health costs
- Productivity
 - Absenteeism
 - Presenteeism
- Safety
 - Critical Incidences



Why Manage Human Capital?

Maximize the profitability of the organization!

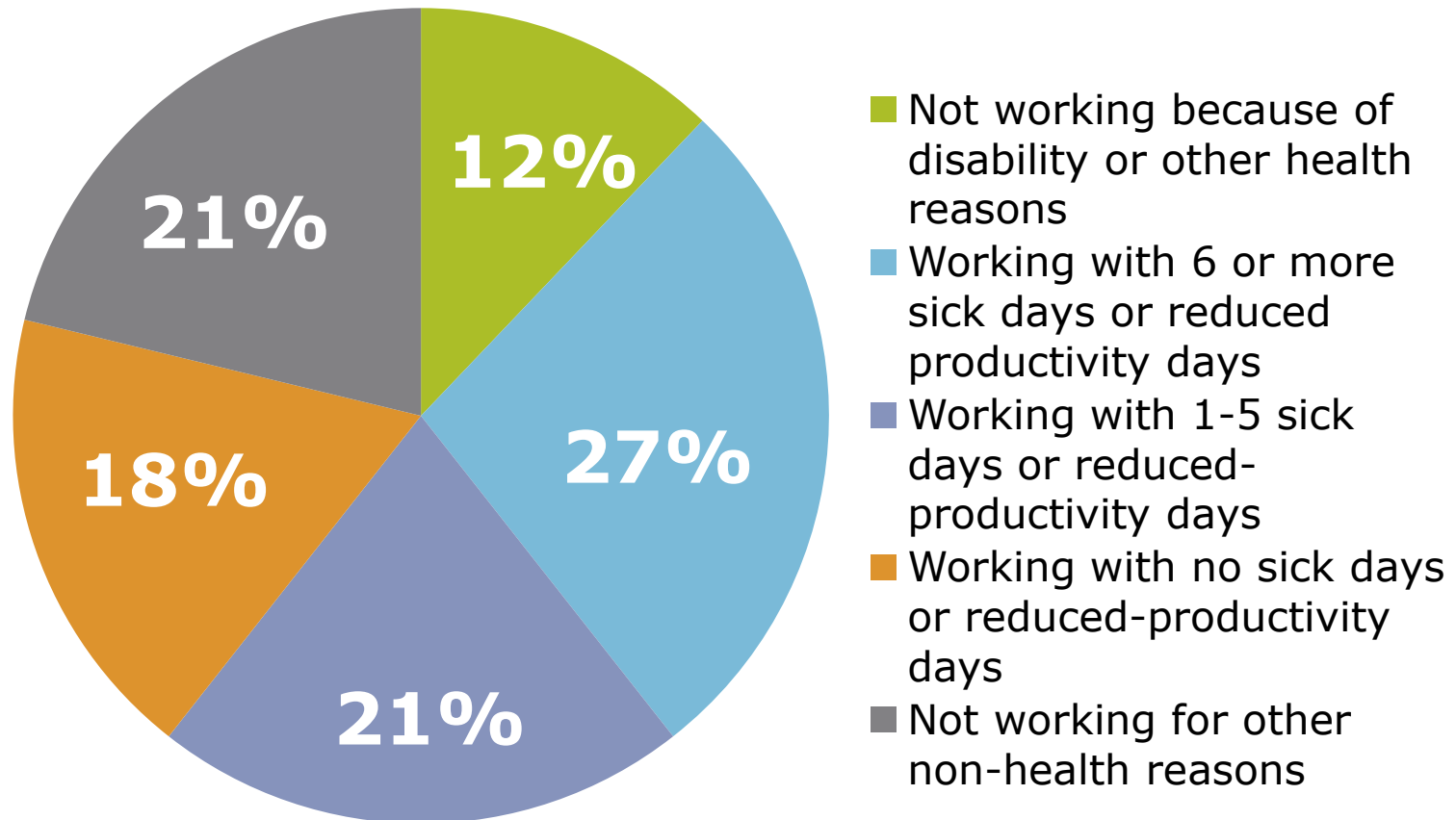
- Employers provide health information and communicate with employees
- Productivity and safety issues are costly and important
- A culture of empowered employees may have bigger business implications
- Employers are influencing their workforce today
- Employers' combined purchasing power currently influences the market

It's Not Just the Direct Medical Cost

	<u>Average Per Capita Health Cost</u>	<u>Percent of Workers with Condition Missing Workdays</u>	<u>Estimated Work Loss Costs (in billions)</u>	<u>Total Costs for Persons with Condition (in billions)</u>
Mood disorders	\$4,328	18%	\$11.5	\$66.4
Diabetes	\$5,646	10%	\$3.5	\$57.6
Cardiac disease	\$10,823	37%	\$3.8	\$42.4
Hypertension	\$4,073	8%	\$11.5	\$121.8
Asthma	\$2,779	20%	\$3.4	\$31.2

Source: Druss, Marcus, et.al., Health Affairs, Nov/ Dec 2001

The majority of working-age Americans experience health problems, take sick days, or have reduced productivity



Note 1: Total excludes among employed adults the self-employed and workers with an undesignated wage rate.

Note 2: Numbers may not sum to 100% because of rounding; sick days are days missed work because self or family member sick; reduced-productivity days are days unable to concentrate fully at work because not feeling well or worried about sick family member.

Source: The Commonwealth Fund Biennial Health Insurance Survey (2003).

The Ceiling of Opportunity (Human Factors)

Health Status

The Ceiling of Opportunity
(Human Factors)

Health Status

Productivity

- Technology
- Work Practices
- Management Practices
 - Quality Improvement
 - Training

Health Management

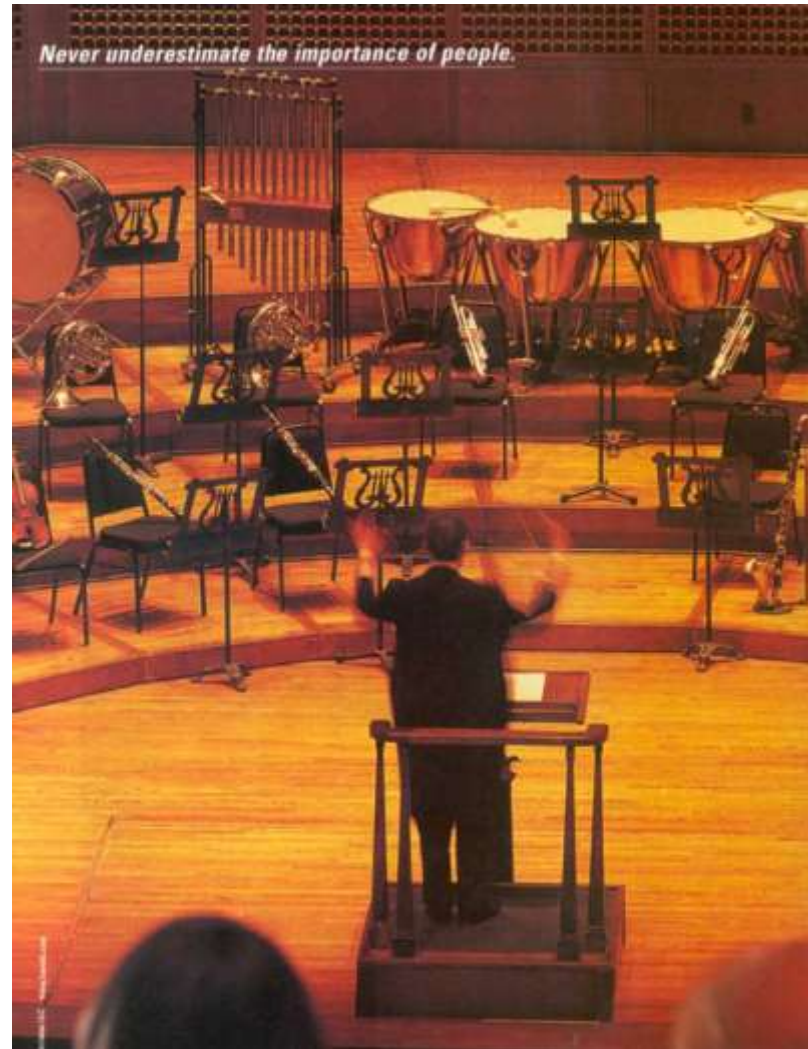
- Measure and quantify health-related costs
- Target prioritized significant health issues
- Implement interventions to:
 - Improve health status
 - Reduce lifestyle risks
 - Improve function
- Measure progress in reducing health-related costs

Presenteeism

Describes the degree to which an employee is present and fully functioning while at work. It addresses the situation where an employee is present at work but limited in some aspect of job performance by health problem(s). Includes:

- (1) time not on task
- (2) decreased quality of work
- (3) decreased quantity of work
- (4) unsatisfactory employee interpersonal factors
- (5) unsatisfactory work culture

Loeppke R, Hymel PA, Lofland JH, Pizzi LT, Konicki DL, Anstadt GW, Baase C, Fortuna J, Scharf T. Health-related workplace productivity measurement: General and migraine-specific recommendations from the ACOEM Expert Panel. *J Occup Environ Med.* 2003; 45: 349-359.



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The Hidden Cost of Poor Health: *Measuring -- and recovering -- productivity in the workplace*

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How do we know presenteeism when we see it?

- It does not have a physical reality (height or weight)
- It is not entirely a characteristic of the person; it occurs with an exposure to a task/challenge/context
- It has an experiential component



My knees
are killing
me...



How do we know presenteeism when we see it?

Through indirect assessment relying on self-report

- We create a test that relies on human response

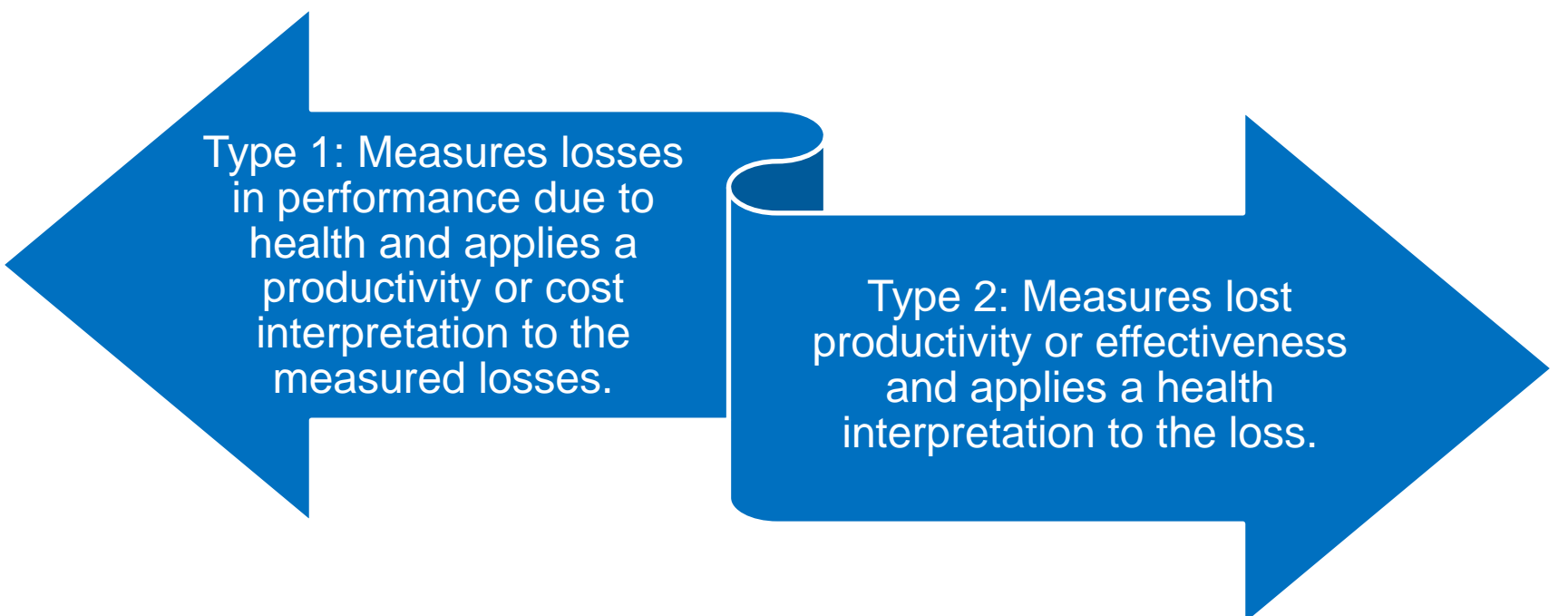
Four key challenges to its measurement:

- Obtaining accurate reports of compromised work activity
- Identifying the component that is health-related
- Converting health-related compromises into a productivity metric
- Translating the metric into money

Our Mission

- Reducing Self-Report Bias
 - The tendency of some decision-makers to reject any information that is based on self-report as “soft.”
- Counteracting the Bias
 - The science of self-report has advanced
 - Major decision-makers in all fields rely on self-report
 - There are few opportunities to validate employee health data against personal productivity data
 - The evidence base for self-report is misunderstood

Two main types of validated presenteeism tools:



Type 1: Measures losses in performance due to health and applies a productivity or cost interpretation to the measured losses.

Type 2: Measures lost productivity or effectiveness and applies a health interpretation to the loss.

The WLQ Approach

A functional approach to measuring presenteeism

- Focus on functional limitations in ability to work
- Does not ask about performance or productivity
- Translates functional limitations into productivity equivalents

We know:

- How to measure health ✓
- How to measure health effects on functioning ✓
- How to convert functional losses in terms of productivity equivalents ✓
- How to ascribe monetary value to productivity equivalents ✓

What have we learned about presenteeism?

The US Norm: Industry

National Norms for the Work Limitations Questionnaire: Scale Score by Standard Industrial Category (Means)*

Industry	WLQ Scales (% time limited)				% Productivity Lost (presenteeism)
	Time Management	Physical Tasks	Mental- Interpersonal Tasks	Output Tasks	
Mining- construction	10.7	11.6	11.3	8.3	2.8
Manufacturing non-durable goods	5.2	6.6	5.6	7.2	1.8
Manufacturing durable goods	10	11.3	9.8	9.9	2.8
Transportation	13	9.8	12.1	10.3	2.9
Retail trade	13.6	11.7	10.6	10.1	3.1
Finance, insurance, real estate	11.1	10.8	10.9	10.4	3.0
Repair services	14.1	10	10.6	10.2	3.0
Personal services	9.4	8.9	8.8	8.6	2.6
Professional and related services	12.7	9.8	11.2	9	2.8
Public administration	9.6	7.9	8.2	8	2.3

* Based on past two weeks

Presenteeism Cost Ranking for Health Risk Assessment 1

Health Problems	Company	Company	Company	Company
	A	B	C	D
Stress Risk	1	1	2	1
Lifestyle Risks	2	2	1	2
Bodily Pain	4	3	3	3
Depression	3	4	4	5
Obesity or Weight Risk	5	5	32	10
Preventive Care Risk	7	6	33	9
Migraine	6	9	8	7
Arthritis	11	7	12	4
High Blood Pressure Risk	12	8	5	6
Hypertension	9	10	7	19

Lifestyle Risks = diet (fat/veggies), tobacco, alcohol, exercise
 Preventive Care Risk = regular check-ups

Presenteeism Cost Ranking for Health Risk Assessment 2

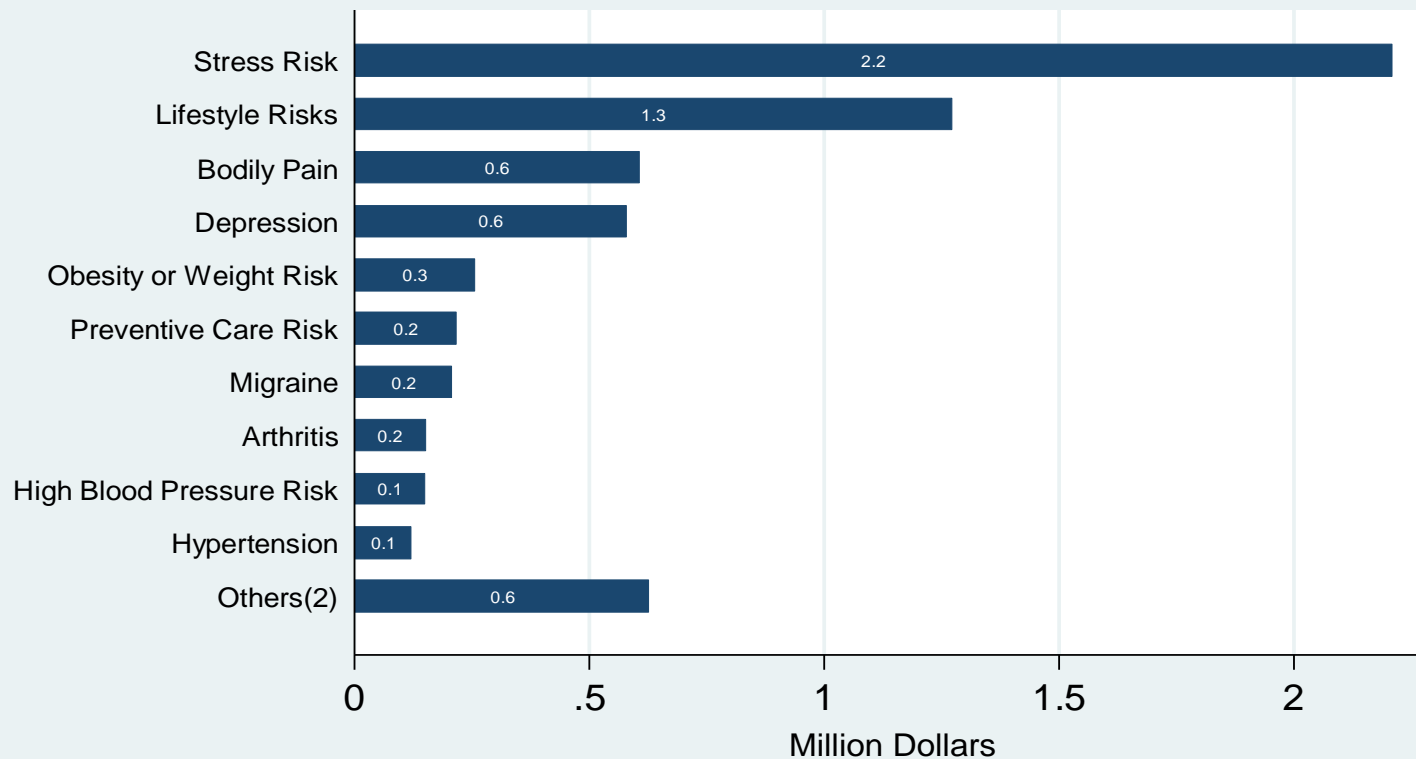
Health Problems	Companies																							
	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X
Emotional Health Risk	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Lifestyle Risks	3	2	2	2	4	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	3	2	2
Safety Risk	6	4	3	3	2	4	3	4	3	4	3	3	3	5	4	3	3	6	3	3	5	2	3	3
Any Depression	2	3	4	4	3	3	4	3	4	3	4	4	4	3	3	7	4	3	4	4	6	5	5	4
Chronic Pain or Back Problems	5	5	5	5	5	5	5	6	5	6	5	6	6	6	5	8	7	5	5	6	7	6	20	6
Sleep Disturbance	10	6	7	7	9	7	8	7	6	9	9	10	13	18	7	10	10	8	9	18	9	8	6	8
Weight Risk	4	7	10	6	7	15	21	5	7	5	12	5	11	20	10	4	8	10	12	16	3	7	4	5
Triglyceride Risk	7	10	8	8	13	9	6	10	9	8	7	12	8	4	16	6	19	20	6	10	12	9	12	14
Arthritis	8	9	11	11	8	6	12	9	8	7	8	11	10	7	11	17	14	7	16	8	8	14	10	9
Migraine	19	11	9	9	17	8	9	11	11	13	11	15	9	9	6	11	11	12	10	17	14	11	19	11

Emotional Health Risk = stress and depression, mood

Lifestyle Risk = nutrition, tobacco, alcohol, sedentary

Safety Risk = seat belts, speed limit, helmets, drinking and drug use, sunscreen, fire extinguisher, smoke alarm

Top Ten Annual Presenteeism Cost Health Problems for HRA 1

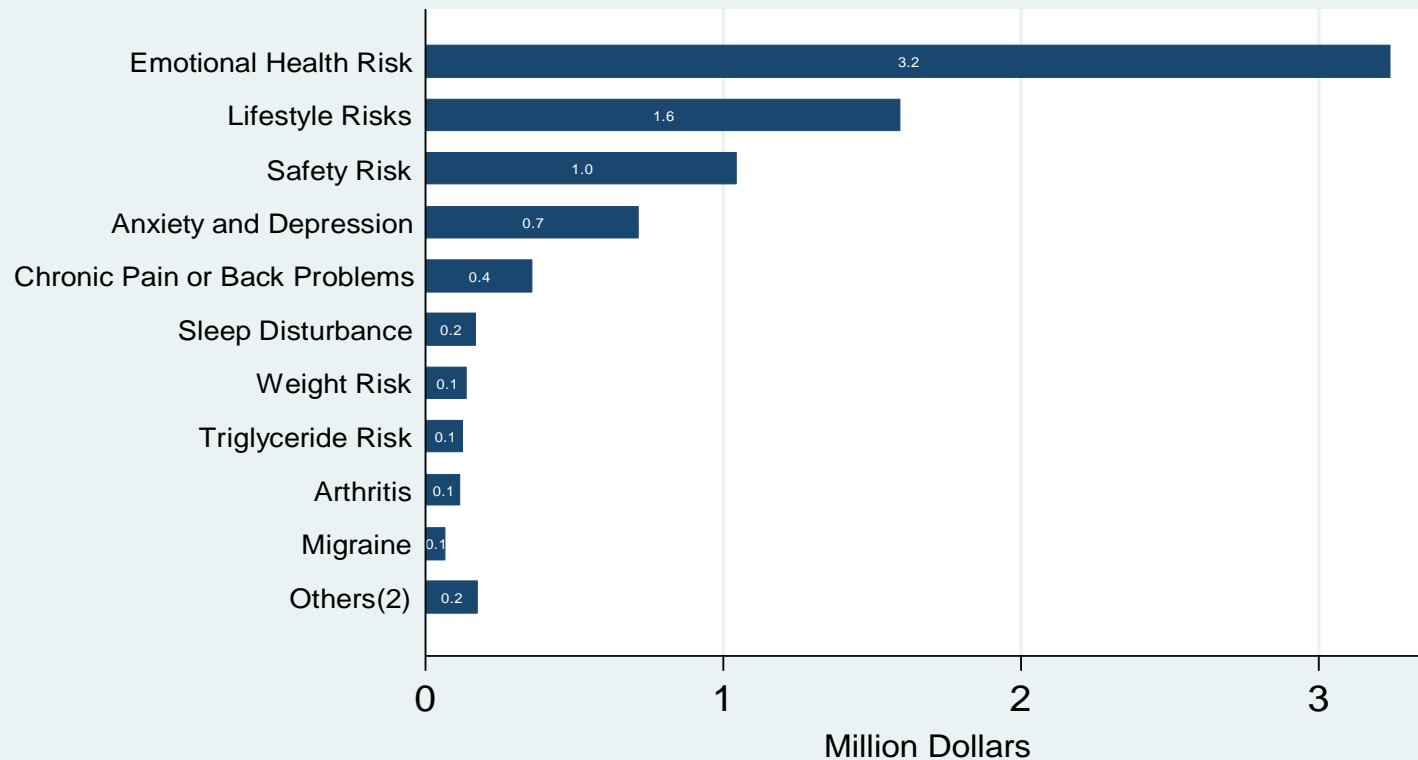


Total Cost for Presenteeism: \$7.0m

(1) Productivity costs assume 10,000 employees and \$50,000 average annual salary.

(2) There are 23 other health problems measured.

Top Ten Annual Presenteeism Cost Health Problems for HRA 2

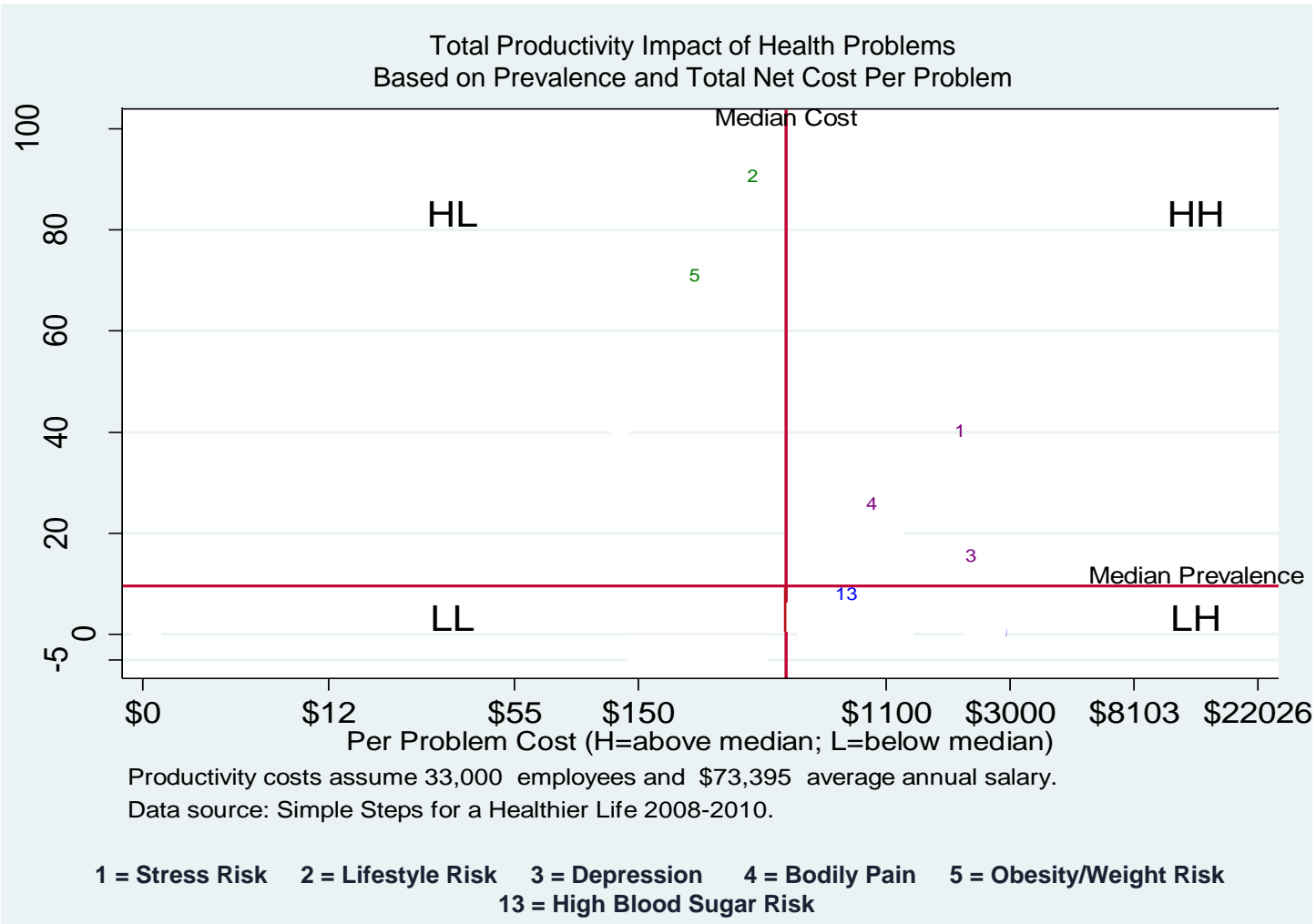


Total Cost for Presenteeism: \$7.9m

(1) Productivity costs assume 10,000 employees and \$50,000 average annual salary.

(2) There are 11 other health problems measured.

Presenteeism drivers include per employee impact and prevalence



What can be done to reduce presenteeism?

My Perspective:

- We need a science of functional improvement.

Improving functioning is an important economic and health management goal.

Functional improvement is often not a primary objective in medical care.

Patient Reported Frequency of Physician Assessment of Functional Performance and Emotional Well-Being

	Asks if Physical Health Limits			Asks About Emotional Health		
	Physical Activity	Daily Responsibilities	Social Activities	Sad, Depressed, or Anxious	Limits Daily Responsibilities	Limits Social Activities
Always/mostly	19.1	16.1	10.2	12.8	7.5	6.0
Sometimes	16.3	15.2	11.1	15.8	12.1	9.7
Rarely/never	64.7	68.7	78.7	71.4	80.5	84.4

*Total Sample, n=2474

Schor EL, Lerner DJ, Malspeis S. Physicians' assessment of functional health status and well-being. The patient's perspective. Arch Intern Med. 1995 Feb 13;155(3):309-14.

Depression's Work Impact

- Adversely effects how people think, feel and behave
- Can diminish motivation, self-confidence, energy, thought processes and social skills many of which are essential to good work performance
- Working-age adults with depression experience high rates of job loss, turnover, premature retirement, disability, absences and at-work performance deficits with productivity losses in the billions of dollars annually

The Work and Health Initiative Study

National Institute of Mental Health, Centers for Disease Control and Prevention, National Institute on Aging, Tufts Clinical and Translational Sciences Institute

The Tufts Work and Health Initiative on Depression

Fully integrates functioning and productivity considerations into intervention

E-screening

Eligibility based on levels of depression and impaired work performance

Intervention

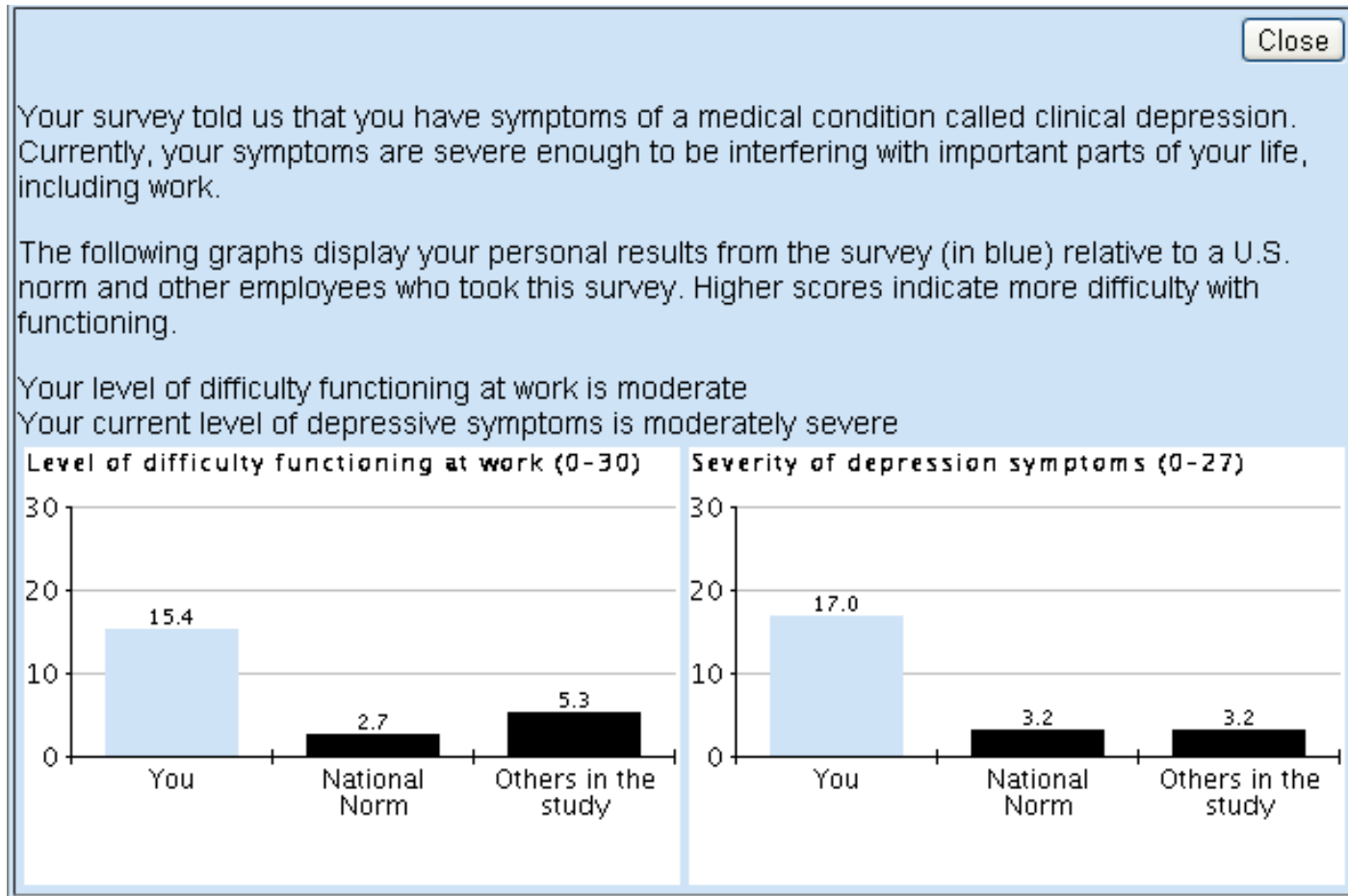
Work-focused program incorporating in-depth assessment of symptoms and functional deficits with multi-modal approach to reduce barriers to functioning and enhance skill/resources

Outcomes and Costs

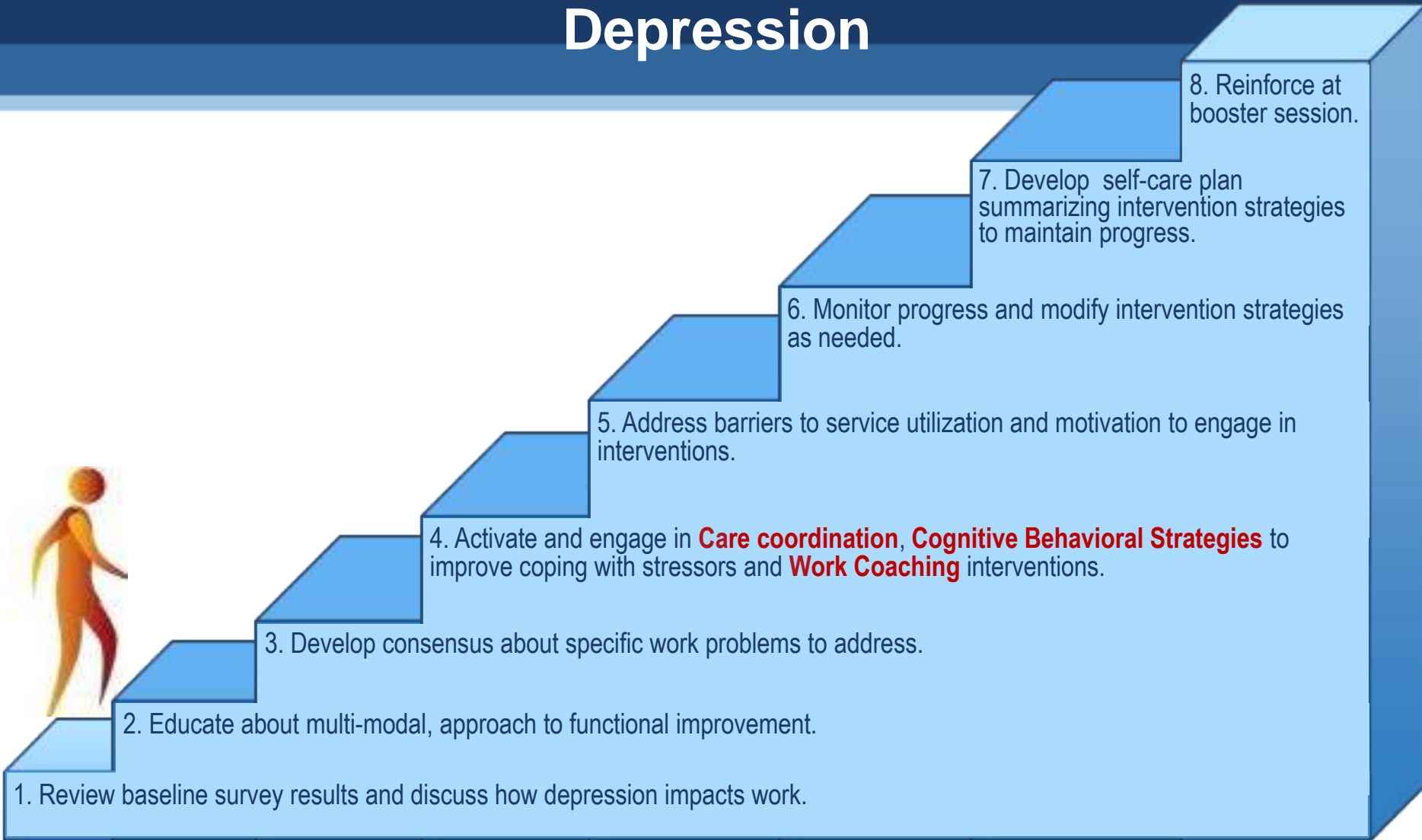
Presenteeism
Absenteeism
Symptoms
Costs

The Tufts Work and Health Initiative on Depression

First Ever Application of WLQ for Individual-Level Screening and Feedback



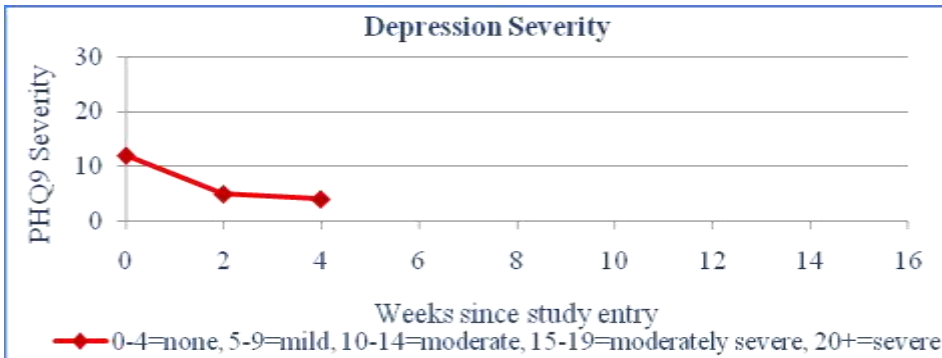
The Work and Health Initiative Program on Depression



The Tufts Work and Health Initiative on Depression

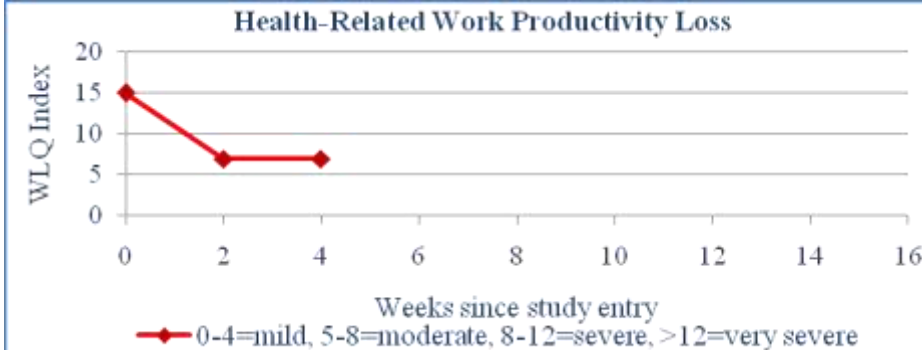
Coordinating Care with the Employee's Physician

Screening Result: Major Depression



Patient's Depression Symptoms

- Feeling tired
- Poor concentration
- Poor sleep
- Feeling down
- Loss of interest
- Losing appetite or overeating



Patient's Work Impairments

- Keeping mind on work
- Concentrating on work
- Sticking to a routine or schedule
- Working without breaks or rests
- Using hand-held tools or equipment
- Lifting and carrying objects

Antidepressant Medication History

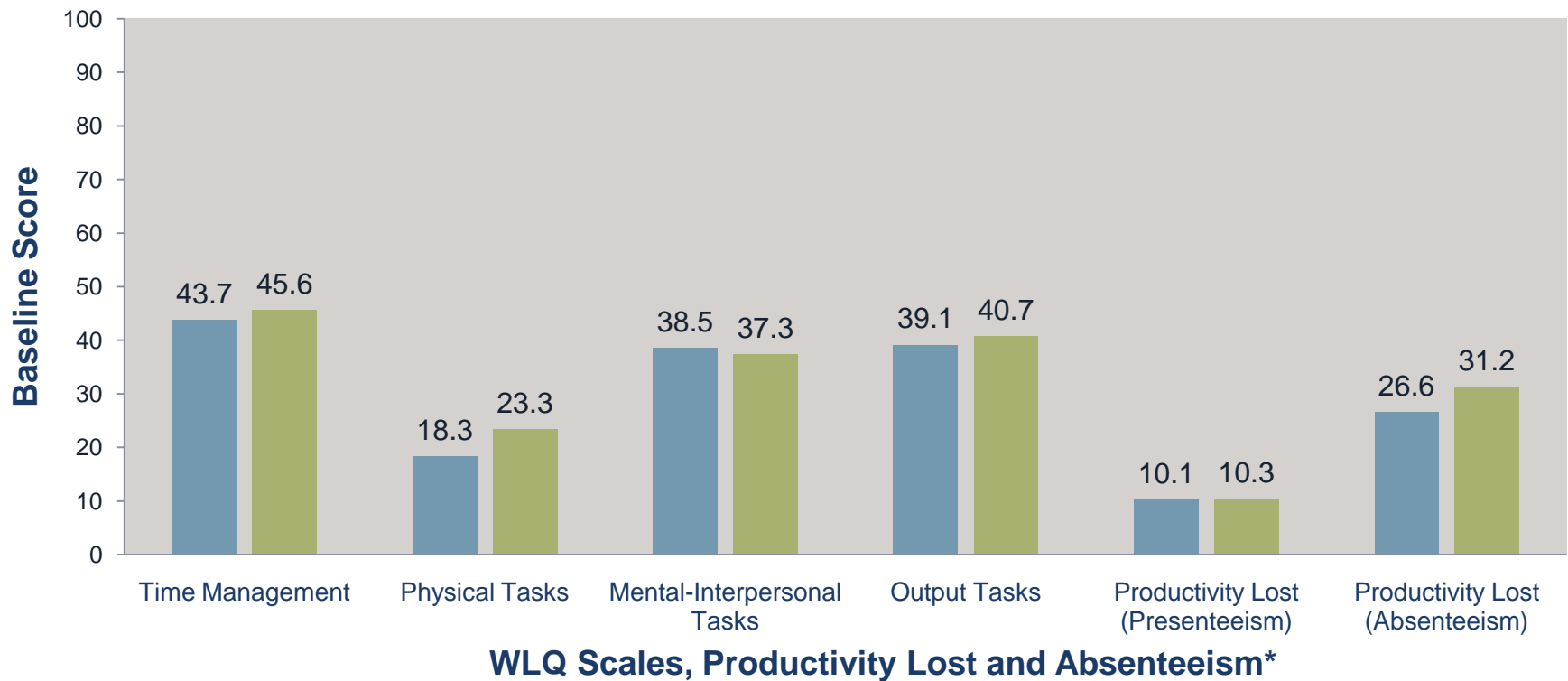
Patient is currently taking Antidepressants

Medicine	Daily Dosage Prescribed	Adherence	Side Effects
Effexor XR	150 mg	Very Good	None

Pre-Intervention WHI Treatment and Usual Care Groups

State Government RCT

■ Usual Care ■ WHI Group

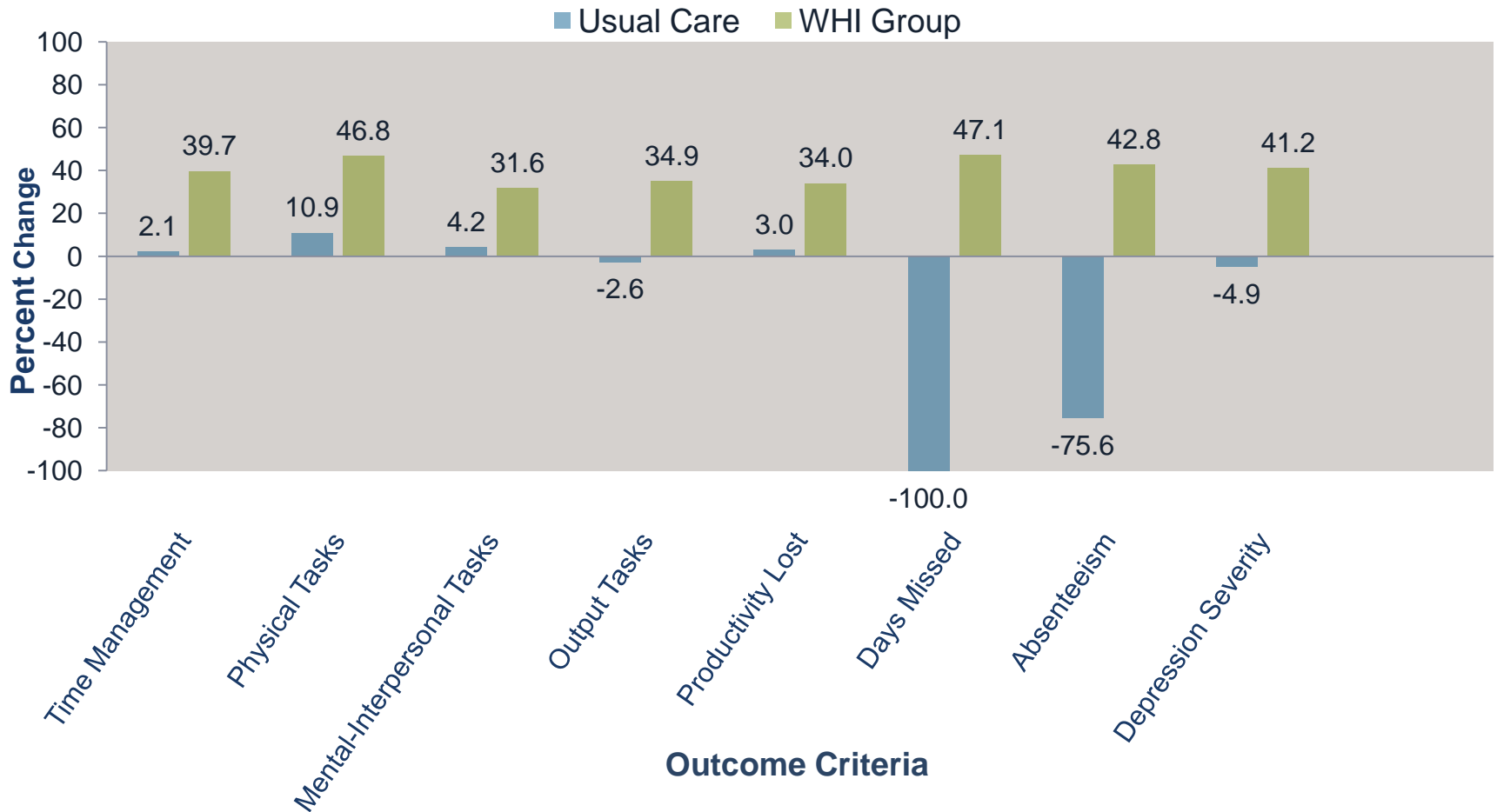


* No significant differences between groups on any baseline score

Post-Intervention

The Tufts Work and Health Initiative on Depression

State Government RCT



The Tufts Work and Health Initiative on Depression

Results

The WHI was superior to Usual Care on every metric

- The estimated annualized reduction savings in at-work productivity was \$980 per participant.
- The estimated annualized savings in productivity cost due to absences was \$5,062 per participant.
- The WHI resulted in a total estimated annualized savings in productivity of \$6,042 per participant.

In addition,

- Depression symptom severity improved only in the WHI group.

Lerner D, Adler D, Hermann RC, Chang H, Ludman EJ, Greenhill A, Perch K, McPeck WC, Rogers WH.. Impact of a Work-Focused Intervention on the Productivity and Symptoms of Employees With Depression. J Occup Environ Med. 2012 Feb;54(2):128-135

Summing Up

- The Work and Health Initiative Study suggests a multi-modal functional intervention is feasible and effective.
- In a NIA-sponsored study, we are testing the program for middle-aged and older workers with depression.
- Focusing on presenteeism is leading to new methods for helping employees to feel better and function better and paying off for employers who benefit from reducing a source of their productivity loss.

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Question & Answer Session

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