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Top player employers share secrets to wellness ROI, execution

By Lisa Gillespie

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“Stand up.” The audience stands. “Sit down.” The audience sits. “Now stand up again.” An audience member mutters under his breath, “No way,” while Fikry Isaac, chief medical officer for Wellness and Prevention, Inc., a Johnson & Johnson company, makes his commands to make a point. Wherever your employees are — a meeting, a desk or at a conference, simple movement can go a long way to create a corporate culture where health is truly valued and lived.

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On the second day of the 7th Annual Employer Health and Human Capital Congress in Washington, D.C., Isaac and three colleagues addressed a room of benefits managers and company executives on how to bend the employer health care cost curve through plan design.

They presented seven steps to achieve this goal, with Chief Medical Officer Roger C. Merrill of Perdue Farms, Inc. taking special interest in the last three: Set health goals; create value-based plan design; and integrate patient-centered medical home and chronic care management.

“We have in-your-face health coaches that go into our chicken plants, they take blood pressure, we gather data based on our big risk factors,” he said. “We’re not chasing pancreatic cancer, that’s a tiny piece of what causes our aggregate health misery.” Instead, he referred to the “seven deadly interventions,” which include heart disease and diabetes that can be easily intervened upon if timed right. Eight-five percent of their employees participate in their wellness programming, which includes onsite patient clinics (where 90% of primary care is delivered) in every factory and higher copays for deemed unnecessary medical treatments. They’ve seen health score improvements seven years in a row.

Johnson & Johnson also had lessons to teach, with their “spectrum of care,” ranging from employees with little to no health risk, to those at high-risk. With each section of their population, Isaac said they use different strategies and incentives.

“You cannot put a dollar and cent value to prevention, which is what we’ve been working under currently,” Isaac said of current wellness trends. “If you want to sustain an effort, it’s not just putting it in and you leave, it has to be woven into the process, you have to focus on prevention.”

About three-quarters of all U.S. health care spending is focused on patients with one or more chronic conditions, which the panel agreed is a mistake. Ron Z. Goetzel of Emory University said that after looking at Johnson and Johnson data over the years showed that when obese employees went to non-obese, their health care costs went down 2.3%. When a non-obese person remained healthy over time, his health care costs reduced exponentially to -9.9%.

The panel was made of large employers, so when asked how these programs could be applied for small to medium employers Goetzel said “small employers are looking for ways to figure this out for their population, they don’t have the HR staff to do the things we’ve done,” but he recommended using tools created by the Centers for Disease Control and Prevention to deal with obesity in the workplace, or to pool together.

The question of a business case for getting employees into healthy shape was also questioned by an audience member, especially for full-insured companies who don't get premium decreases with better outcomes.

Isaac said, "At the end of the day, we do not measure effort, we measure outcomes."

Raymond Fabius, chief medical officer for Thomson Reuters agreed with this, citing a study that showed companies who focus on health have better stock prices.

"When you look at the clients who have implemented full service on-site, they out performed Dow Jones over period of five years; this competitive advantage translates into better stock performance, which may help in getting the attention of your CEO or CFO."

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