



14<sup>TH</sup> ANNUAL OHIO

*Employee  
Health &  
Wellness*  
CONFERENCE

# Workshop N

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*Wellness Programming*  
**Keep the Momentum Going by  
Encouraging Healthy Behavior, Access to  
Quality Healthcare & Improving Program  
Design to Improve Employee Health and  
Reduce Healthcare Costs**

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**3:00 p.m. to 4:15 p.m.**

## **Biographical Information**

**Aaron Witwer, MS**  
**Team Leader, Health Management Services**  
**Senior Health Management Consultant**  
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Aaron Witwer is the Team Lead and Senior Health Management Consultant for Health Management Services at Oswald Companies. He has over 15 years of combined healthcare and health management experience, providing population health management strategy, and administering various wellness programming to a variety of clientele; from small local firms to Fortune 500 international corporations.

Prior to joining Oswald Companies, Aaron worked as a Wellness Manager at Cleveland Clinic's Wellness Institute and Wellness Coach at US Corporate Wellness and Wellness Coaches USA.

Previous work experience also includes: orthopedic rehabilitation, sports medicine, strength & conditioning and business development.

### **EDUCATION AND PROFESSIONAL AFFILIATIONS**

Aaron is married and is a proud father of two girls. He graduated from Indiana University, earning a bachelor's degree in Kinesiology and holds a master's degree in Sports Health Care from A.T. Still University. Aaron is a licensed Life, Health & Accident Insurance agent and an Eagle Scout.

Aaron is a Board Member for The MetroHealth System Foundation and former Chair of the Executive Team of the MetroHealth N.E.T. group; a collection of emerging leaders who advance the mission and vision of The MetroHealth System. He has previously sat on associate boards for the American Heart Association and Cleveland Clinic.

# Keep the Momentum Going for Employee Health!

Encourage Healthy Behavior, Access to Quality Healthcare & Improve Program Design to Reduce Healthcare Costs 💰



## Aaron B. Witwer, MS

Team Leader, Senior Health Management Consultant  
Oswald Companies



# Keep it going...

## Agenda:

- Healthcare Cost is a Problem
- Solving the Problem
  - Better Wellness programming
  - Better Healthcare
  - Spend Less \$
- Who's Winning at Cost Containment and How?

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## Why are you here?

Better health & wellness programming to lower cost

# Problem.

Our Healthcare Costs are High

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Health Benefits

## You Run a Health-Care Business Whether You Like It or Not

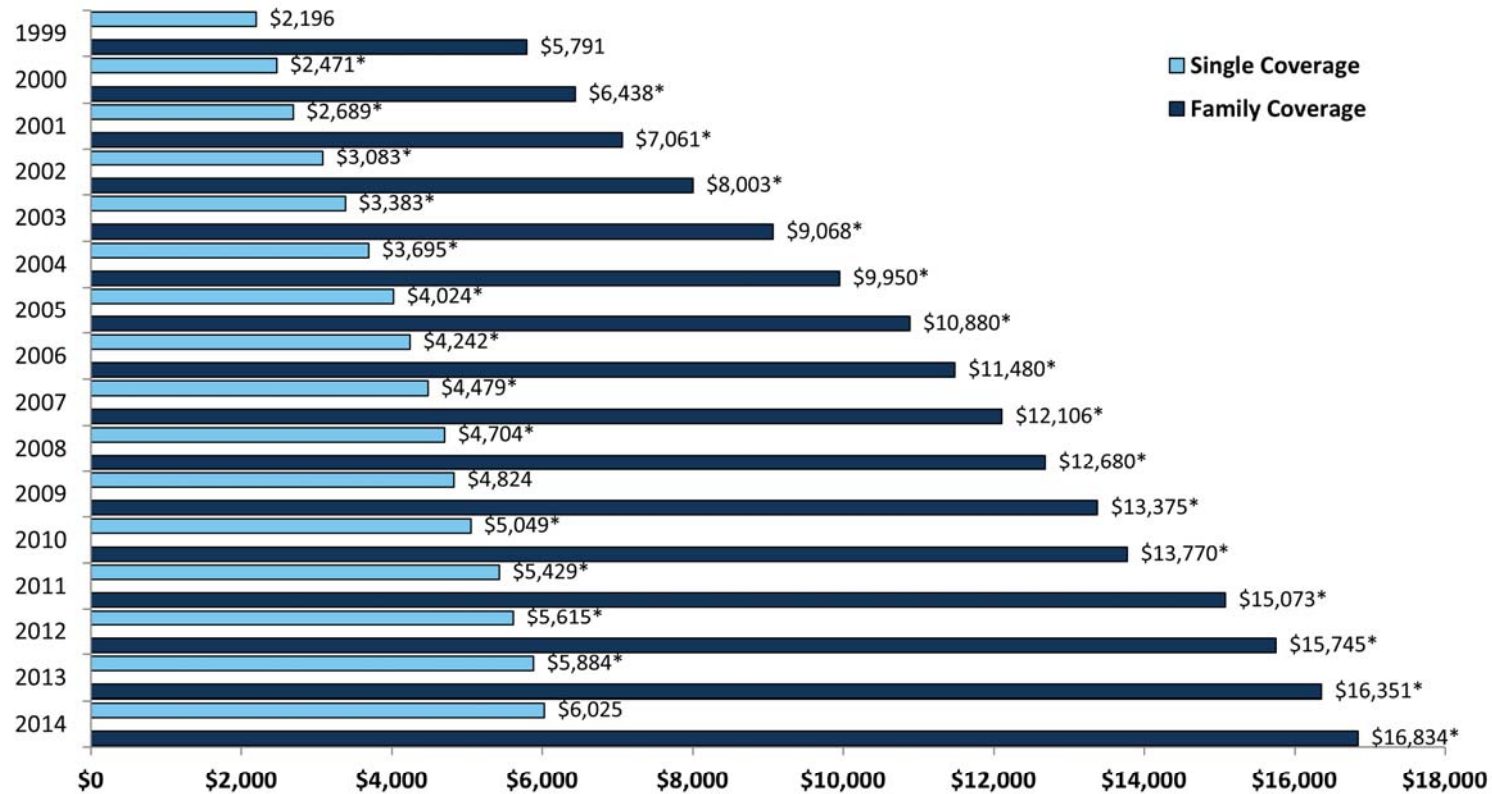
What's different about employers who are winning the battle to slay the health-care cost beast?



Warren Buffett: *"GM is a health and benefits company with an auto company attached."*<sup>2</sup> They spend more on healthcare than steel, just as Starbucks spends more on healthcare than coffee beans.<sup>1</sup>

# Cost of Healthcare

Avg Annual Premiums for Single and Family Coverage, 1999-2014



\* Estimate is statistically different from estimate for the previous year shown (p<.05).

SOURCE: Kaiser/HRET Survey of Employer-Sponsored Health Benefits, 1999-2014.



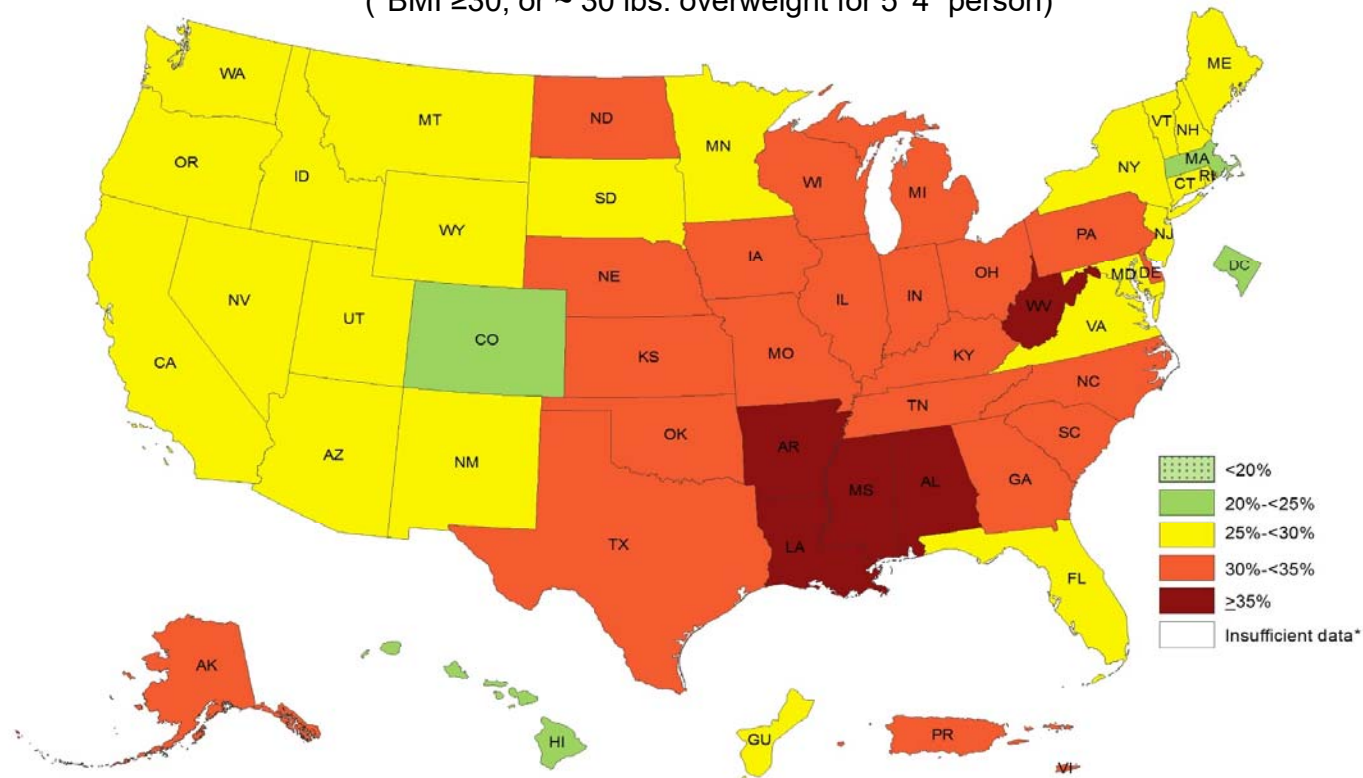
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# Problem.

Our Health is Poor

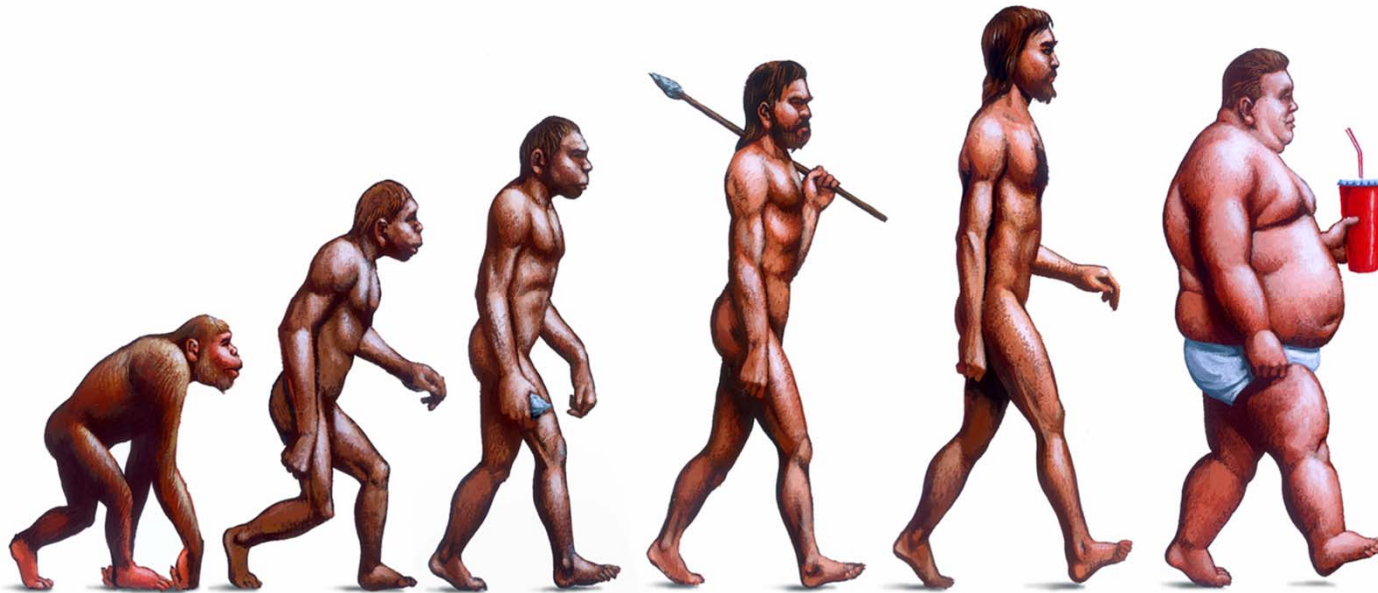
## Obesity Trends\* Among U.S. Adults

(\*BMI  $\geq 30$ , or ~ 30 lbs. overweight for 5' 4" person)





# Problem...



This Cannot End Well...

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Solutions.

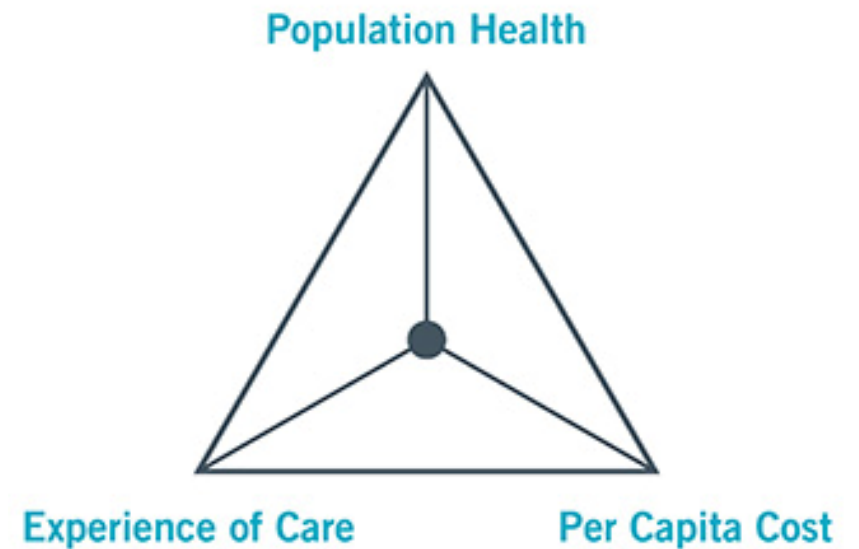
# Solution.

Triple Aim model...

Address healthcare costs by providing:

- **Better health**
- **Better healthcare experience**
- **Lower healthcare costs**

## The IHI Triple Aim



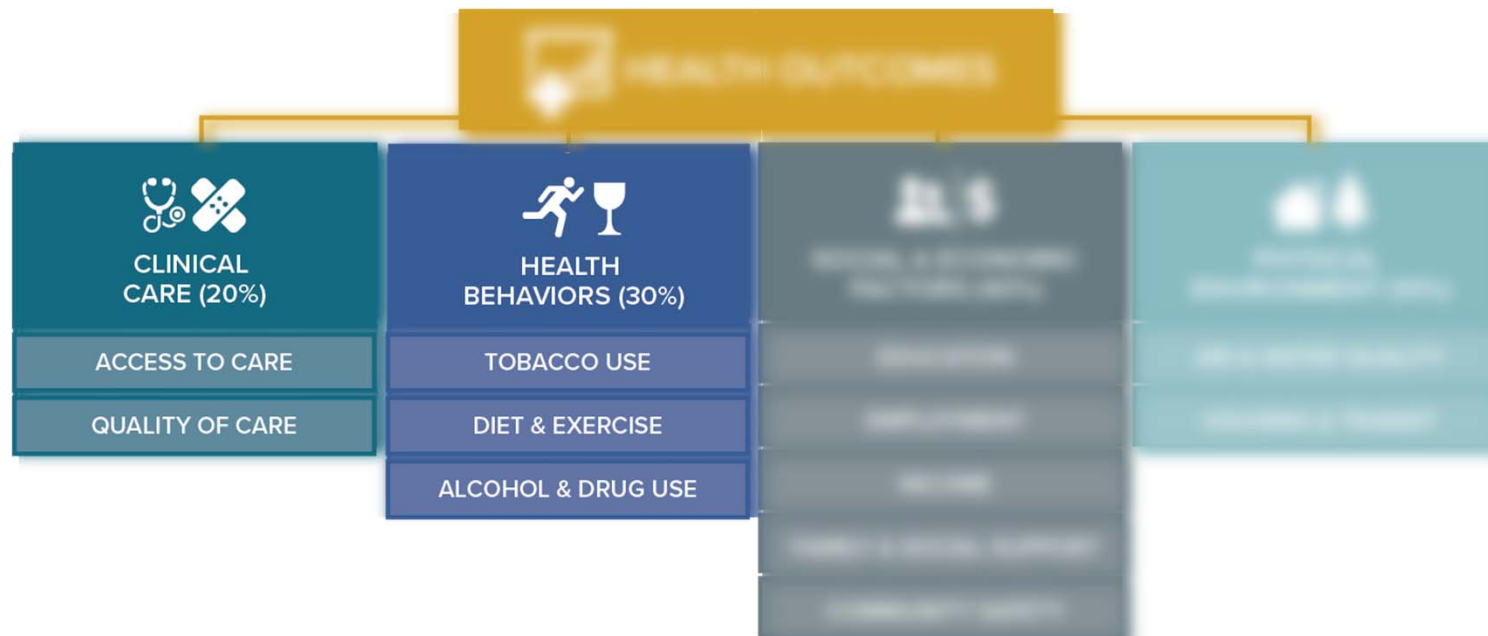
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# Better Health & Healthcare

Promoting healthy Behaviors, better health Education & better Care

# What is Health?

Employers generally impact these Health Factors.  
Which account for 50% of health outcomes.<sup>1</sup>



Ref: RWJF, U Wisconsin PHI

# Better Health & Healthcare

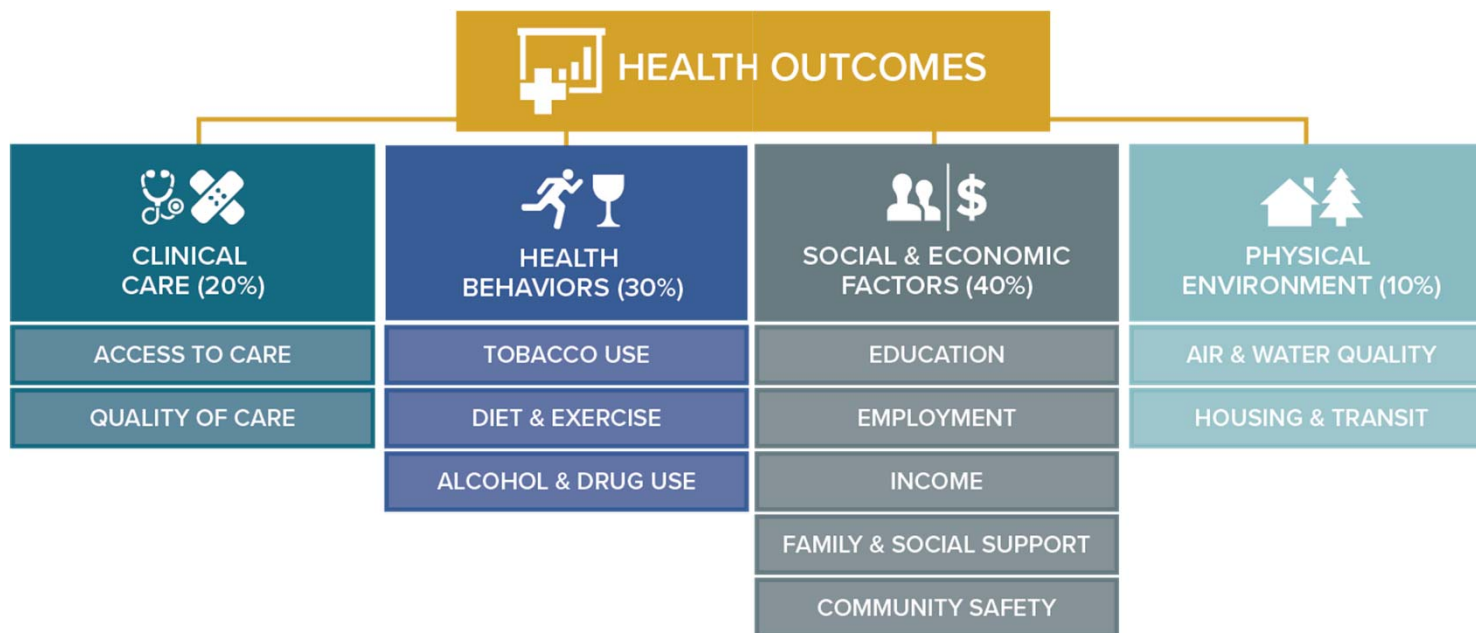
## Section Summary:

- Healthcare Costs will **continue to grow** if we do the same
- **The Triple Aim** is a model to improve Care and Cost
- Health Outcomes are based on 4 major factors. **Healthy Behavior & Clinical Care** can be improved by employers.

# Addressing the Health Factors

# What is Health?

Health outcomes are determined by 4 major Health Factors



Ref: RWJF, U Wisconsin PHI



# Health Behaviors (30%)

Tobacco use, Diet & Exercise, Alcohol & Drug use

**Let science tell us what works.  
Improve health behaviors.**



# What is Health?

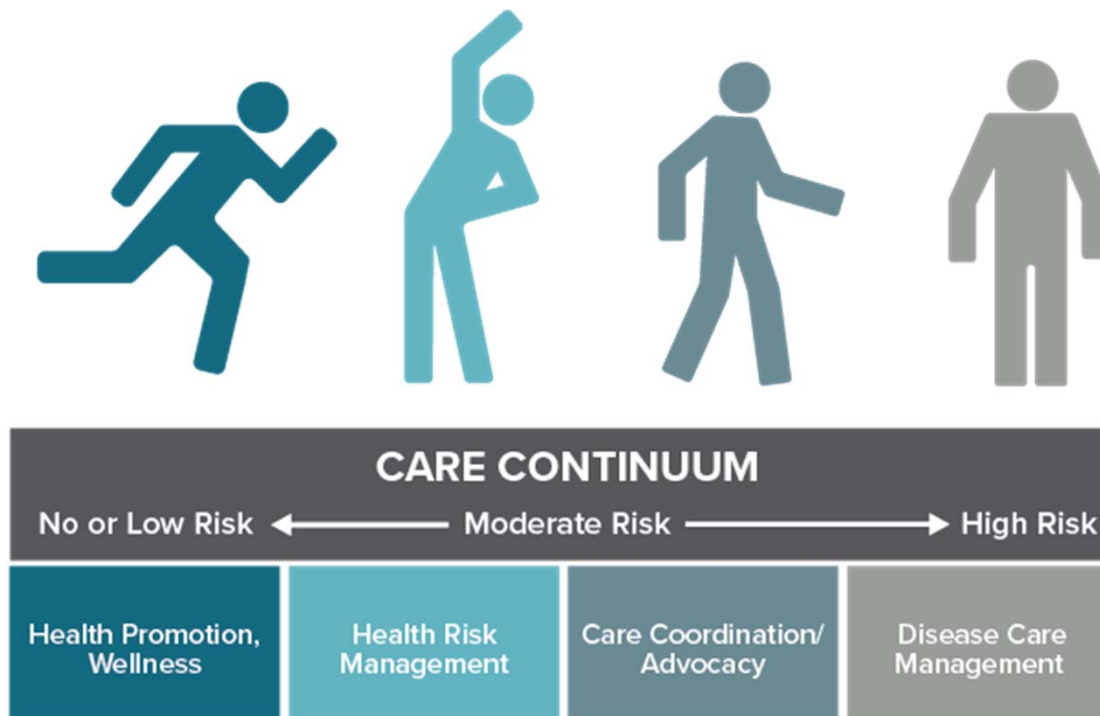
## High Risk or Low Risk for health issues?



Ref: RWJF, U Wisconsin PHI

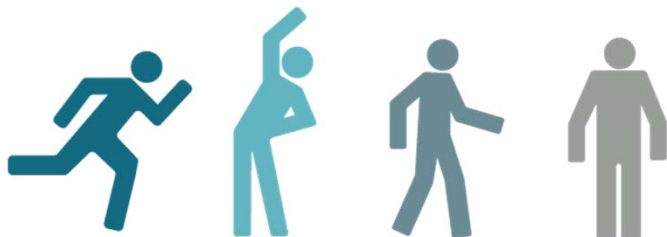
# Addressing the Health Factors

Programming aligns with Risk



# Health Behaviors (30%)

Diet & Exercise



## Goals:

- Increase physical activity
- Increase healthy food consumption

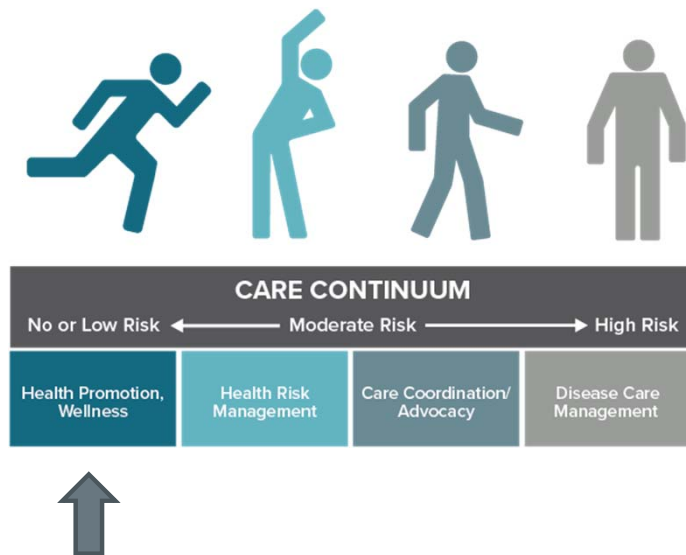
*“There is strong evidence that worksite obesity prevention programs increase physical activity, and healthy food consumption among employees.”<sup>4</sup>*

*“Multi-component interventions appear to be more successful than single component programs.”<sup>4</sup>*

# Health Behaviors (30%)

Diet & Exercise

**Set the culture, build-in prevention & make health resources known**



- Healthy food served in catering, vending, cafeterias
  - Competitive pricing for healthy foods
- Cooking courses
- Educational materials & Communication campaign to all employees
- Health fairs (education opportunity, screenings, flu shots, cooking classes)
- Free onsite group exercise classes, including stretching and walking groups
- Signage to encourage use of stairs

# Health Behaviors (30%)

Diet & Exercise



“We could prevent 80 of chronic disease by using what we know [about HEALTHY EATING.]”

**DAVID L. KATZ MD, MPH, FACPM, FACP, FACLM**, is the founding director of Yale University's Yale-Griffin *Prevention Research Center*, and current President of the *American College of Lifestyle Medicine*.



# Health Behaviors (30%)

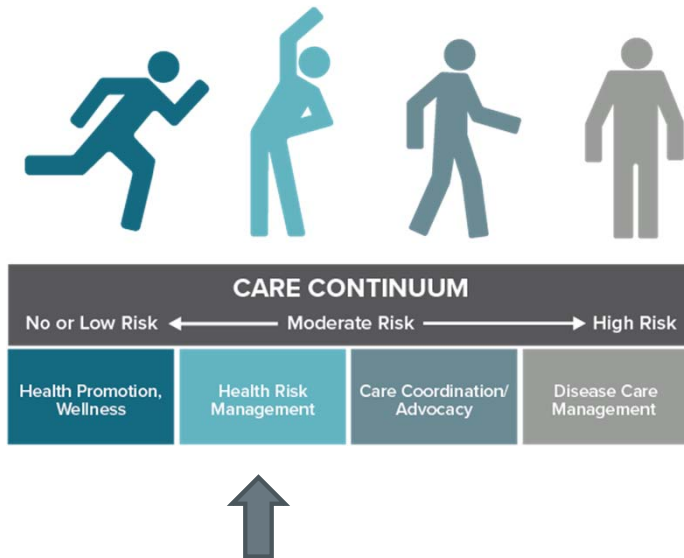
Tobacco use

## Goals:

- Increase quit rates

*“Cell phone-based tobacco cessation interventions generally include cessation advice, motivational messaging or content to distract cravings...”<sup>5</sup>*

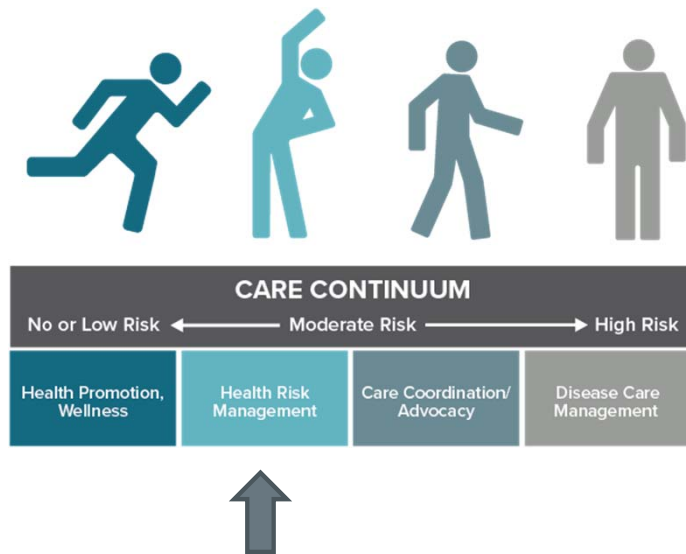
*“There is strong evidence that reducing out-of-pocket costs for tobacco cessation therapy increases access to and use of cessation treatment and increases quit rate.”<sup>5</sup>*



# Health Behaviors (30%)

Tobacco use

## Set the culture and build-in prevention



- Zero tolerance policy for tobacco and drug use
- Reduce out-of-pocket costs for Tobacco cessation therapy
- Cell-phone & internet-based tobacco cessation
- Lifestyle Management programming available
- Registered Dietitian available
- Mandatory stretching program for employees with a higher risk of injury
- Injury prevention / strength screenings





**IN THE LIGHT OF RECENT  
EVENTS, RADIOACTIVE  
MATTER WILL NO LONGER  
BE PERMITTED IN THE  
STAFF AREA**

# Health Behaviors (30%)

## Section Summary:

- Health outcomes strongly tied to **healthy behaviors**
- Diet & Exercise + Tobacco Use are the **strongest determinants**
- Follow the science and use evidence-based interventions

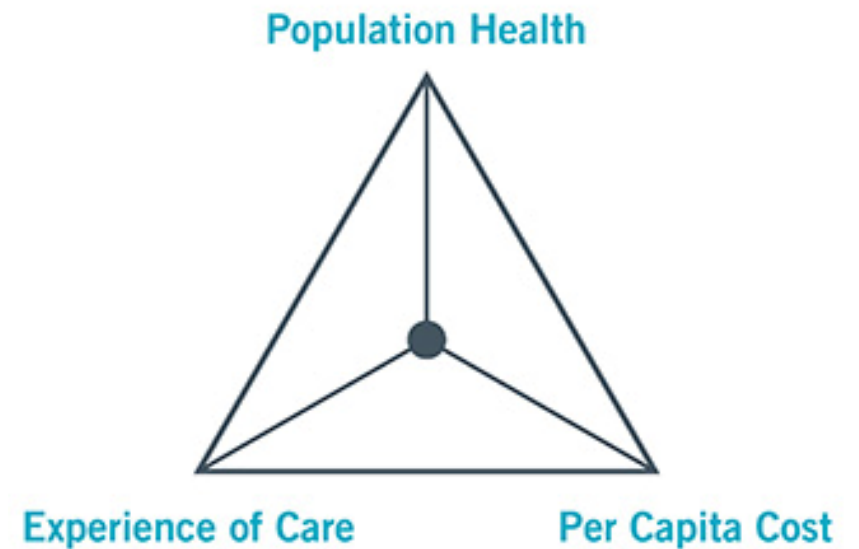
# Solution.

Triple Aim model...

Address healthcare costs by providing:

- Better health
- Better healthcare experience
- Lower healthcare costs

## The IHI Triple Aim



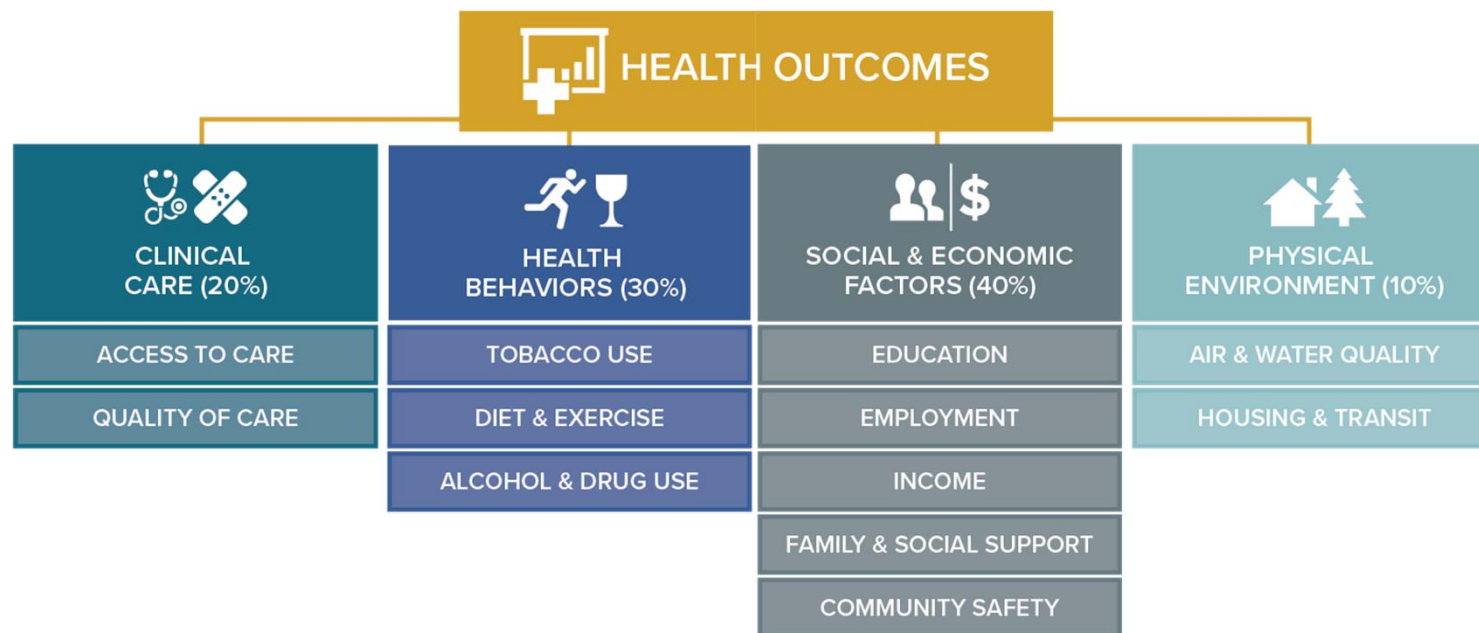
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# Better Healthcare Experience

Access & Quality of Care

# What is Health?

Health outcomes are determined by 4 major Health Factors

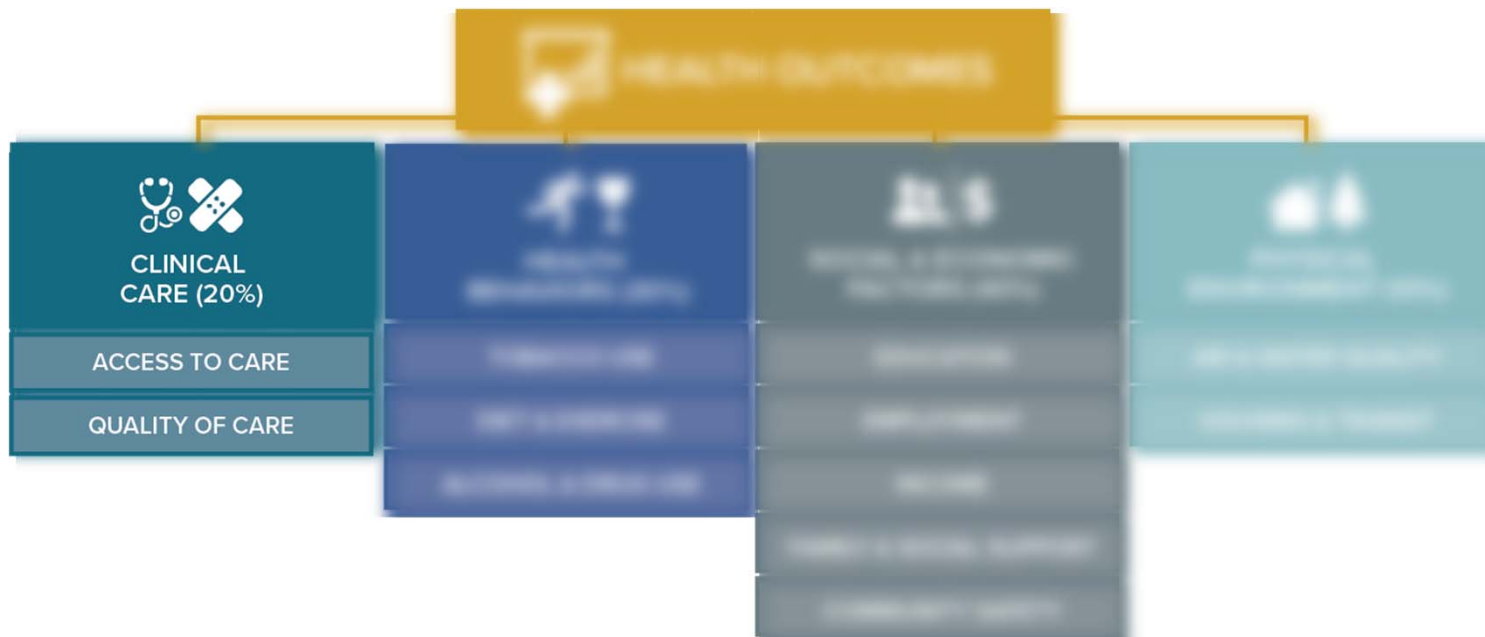


Ref: RWJF, U Wisconsin PHI

# Clinical Care (20%)

Access to Care & Quality of Care

**Better access to care + Excellent quality of care**

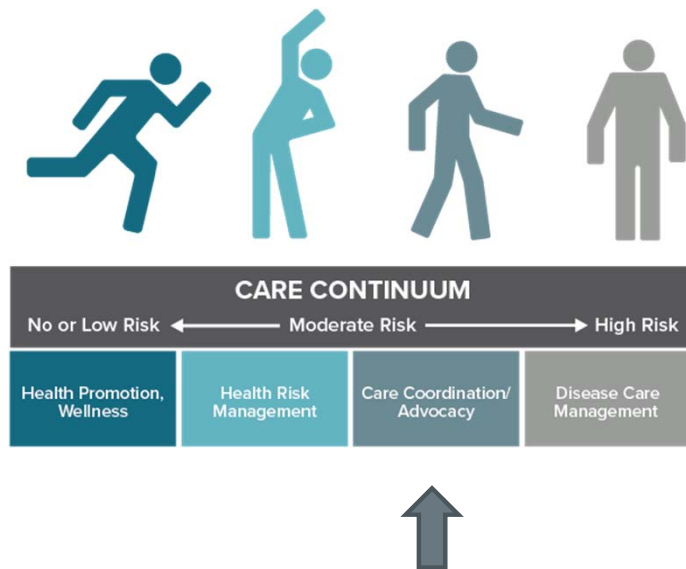


# Clinical Care (20%)

Access to Care

## Goals:

- Increased preventive care
- Reduced emergency room visits
- Reduced hospital visits

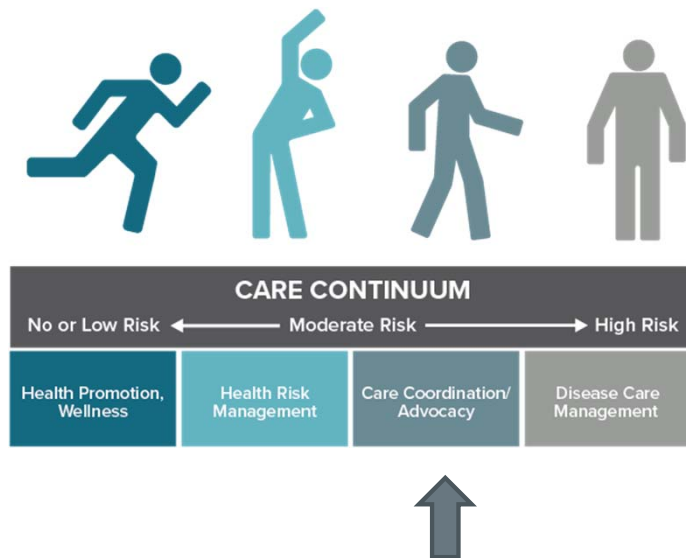


*“Medical homes [high-touch family medicine offices] improve adherence to treatment, increase general preventive screenings such as blood pressure, increase screenings for cervical and breast cancer and reduce specialist visits.”<sup>7</sup>*

# Clinical Care (20%)

Access to Care

**Set the culture, build-in prevention & make health resources known**



- Medical Homes / Direct Primary Care
- Preventive Care / Screenings (onsite and/or incentives)
- Flu shots and vaccinations
- healthcare educational materials & Communication campaign to ALL employees
- Health fairs (education opportunity, screenings, flu shots, cooking classes)
- Telemedicine
- Text message-based health interventions
- Health Literacy



# Clinical Care (20%)

How are employers containing cost?

## Direct Primary Care

- Reduces costs for the doctors office (good for physicians)
- 60% reduction in inpatient visits
- 14% reduction in ER visits <sup>1</sup>

## Telemedicine

- Time- and cost-effective for both patients and healthcare professionals
- Provides specialist medical care to those with poor access to hospitals
- Ensures continuity of care and optimal use of available health resources.
- Reduces costs and time <sup>2</sup>



# Clinical Care (20%)

Access to Care & Quality of Care – Health Literacy

**Health Literacy includes health information communication + easy access to healthcare**

People with low health literacy **use more healthcare services**, have a **greater risk for hospitalization**, and have a **higher utilization of expensive services**, such as emergency care and inpatient admissions. *IOM, 2004*

Low health literacy was once viewed as...a patient's lack of knowledge and skills regarding health issues.

We now recognize that health literacy...reflects the complexity of **both the presentation of health information and navigation of the healthcare system**. *Parker, Ratzan, 2010*



HEALTH LITERACY

Your co-pay for Emergency Room and Urgent Care are usually about the same.

A. True

B. False

False. ER co-pays are generally 2-5 times more expensive.

## HEALTH LITERACY

All X-ray, MRI, surgeries and tests are priced the same.

### One Test, Many Prices

What does an MRI cost? It depends on who's paying. Here's the range of prices for an MRI of the knee, hip or ankle, without contrast, at Oakwood Healthcare System in Dearborn, Mich., as collected by PricingHealthcare.com.\*

List or "chargemaster" price	\$2,844
Cash price	\$695
UnitedHealthcare negotiated price	\$1,990
Blue Cross negotiated price	\$617
Aetna negotiated price	\$520
Cigna negotiated price	\$341-\$362
Medicare rate	\$335

\*Neither Oakwood nor insurers would disclose negotiated rates.

### Sorting Them Out

Healthcare Bluebook gathered information on prices that insurers and patients actually paid for 37 colonoscopies in the Nashville, Tenn., market, including the cases below. From that data, the Bluebook arrived at a "fair" price for the area of \$1,588.



The Wall Street Journal

ue

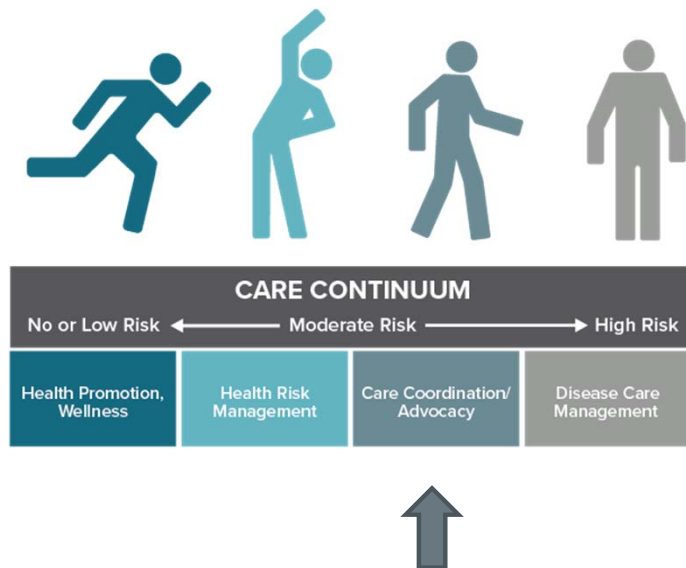
B. False

# Clinical Care (20%)

Quality of Care

## Goals:

- Improved mental health
- Increased patient satisfaction
- Increased healthy behaviors
- Reduce healthcare costs
- Improved health outcomes



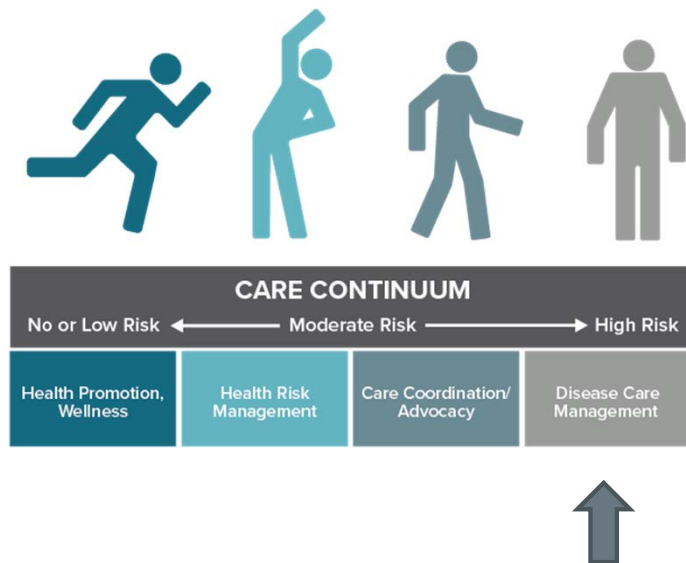
*“Integrating depression screening and treatment into primary care has been shown to improve depression symptoms for adolescent, adult, and elderly patients.”<sup>8</sup>*

*“Chronic disease self-mgmt. programs reduce HbA1c levels, blood pressure and hypertension in patients with cardiovascular disease.”<sup>9</sup>*

# Clinical Care (20%)

Quality of Care

**Set the culture, build-in prevention & make health resources known**



- Medical Homes / Direct Primary Care
- Care Coordination / Navigation via phone / mobile
- Behavioral Health primary care integration
- Chronic Disease management programs
- Self-management chronic disease programs
- Value-based insurance design
- Partner with High-quality hospitals (Centers of Excellence)
- Health Literacy

# Clinical Care (20%)

Quality of Care – Hospital grades

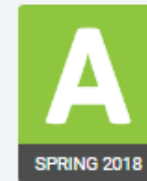
Quality is variable within regions. Where are we getting care?

## Southwest General Health Center

18697 Bagley Road  
Middleburg Heights, OH 44130-3497

[View the full Score](#)

This Hospital's Grade



## University Hospitals Elyria Medical Center

630 E. River Street  
Elyria, OH 44035-5902

[View the full Score](#)

This Hospital's Grade





# Clinical Care (20%)

Quality of Care – Hospital ratings

**Hospital Search Results**  
Viewing 1 - 20 of 20 results

Hospital Information	Overall rating	Distance	Emergency Services	Hospital Type
<b>ST JOHN MEDICAL CENTER</b> 29000 CENTER RIDGE ROAD WESTLAKE, OH 44145 (440) 835-8000 	★★★★★	2.4 Miles	Yes	Acute Care Hospitals
<b>CLEVELAND CLINIC AVON HOSPITAL</b> 33300 CLEVELAND CLINIC BLVD AVON, OH 44011 (216) 636-7727	★★★★●	4.3 Miles	Yes	Acute Care Hospitals

**Filters:**  
Within 25 Miles  
State: Select a State  
County (Optional): Select a County  
Hospital name: Full or partial name  
**Update Search Results**

**Filter by:**  
Clear all filters  
Overall rating [Learn more](#)  
 ★★★★★ (6)  
 ★★★★● (6)  
 ★★★●● (2)  
 ★★●●● (1)  
 ★●●●● (0)



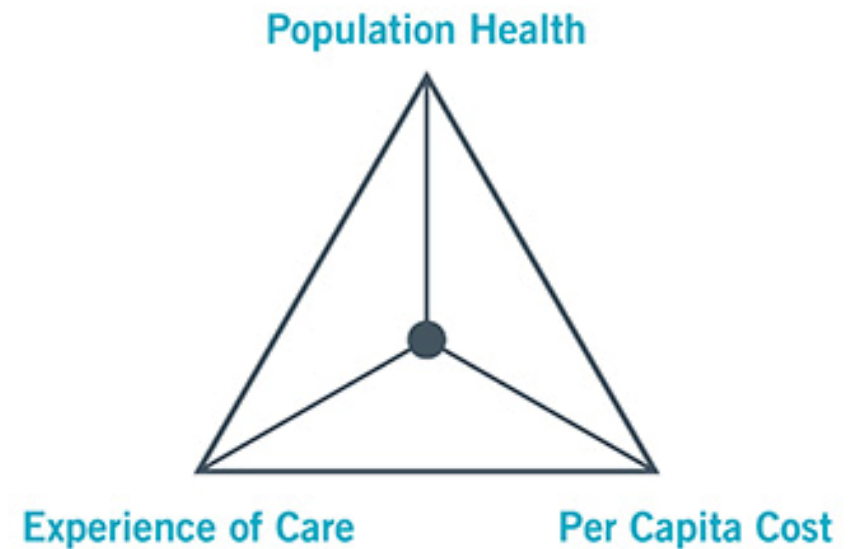
# Solution.

Triple Aim model...

Address healthcare costs by providing:

- Better health
- Better healthcare experience
- Lower healthcare costs

## The IHI Triple Aim



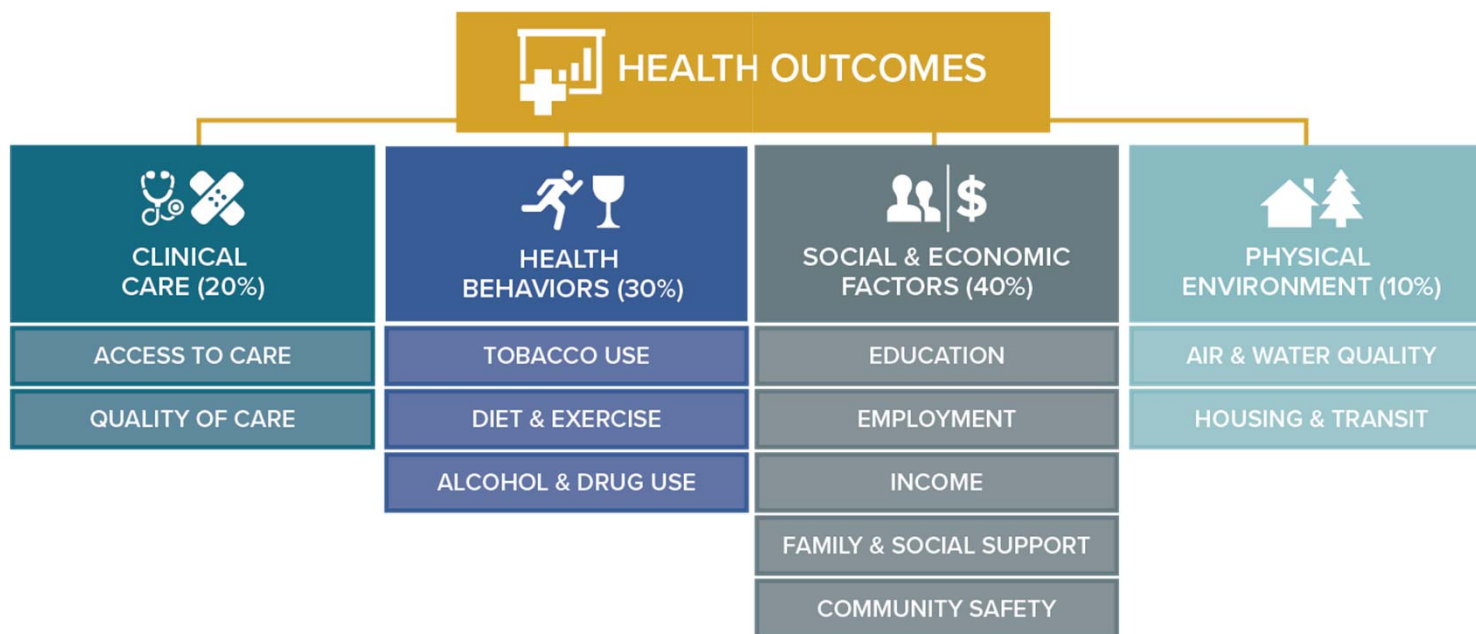
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## Lower Costs

Quality of Care & Pay Less for Care

# What is Health?

## How does Cost fit in?

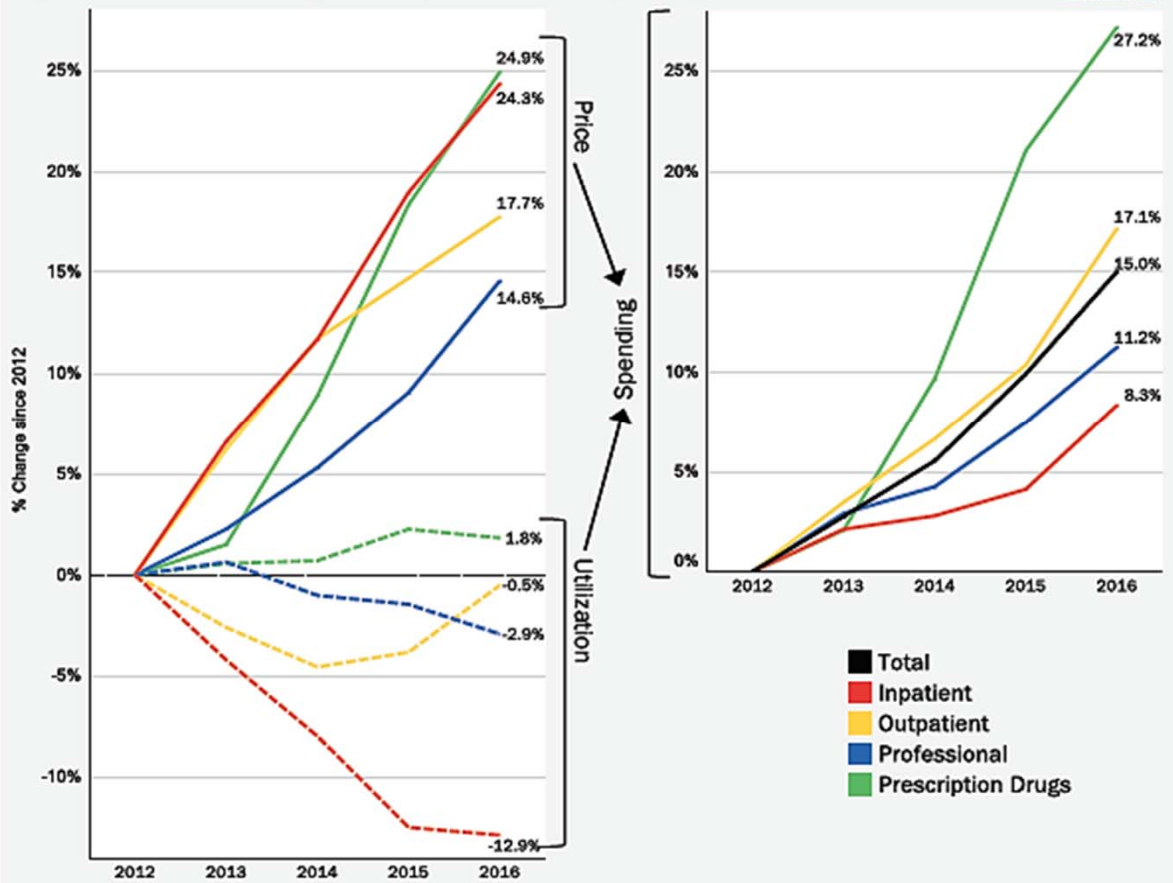


# Clinical Care (20%)

Quality of Care – Unit cost



Figure 3: Cumulative Change in Price, Utilization and Spending, 2012-2016



Source data: Years 2012-2016

4 billion claim lines from employer-sponsored populations from Aetna, Humana, Kaiser and UnitedHealthcare.

Claims data includes prices paid by both insurers and insured (allowed).

# Clinical Care (20%)

Quality of Care – Unit cost



**Spending growth in each year from 2012 to 2016 was almost entirely due to price increases.** We saw particularly large increases in spending and price for administered drugs, emergency room (ER) visits, and surgical hospital admissions.

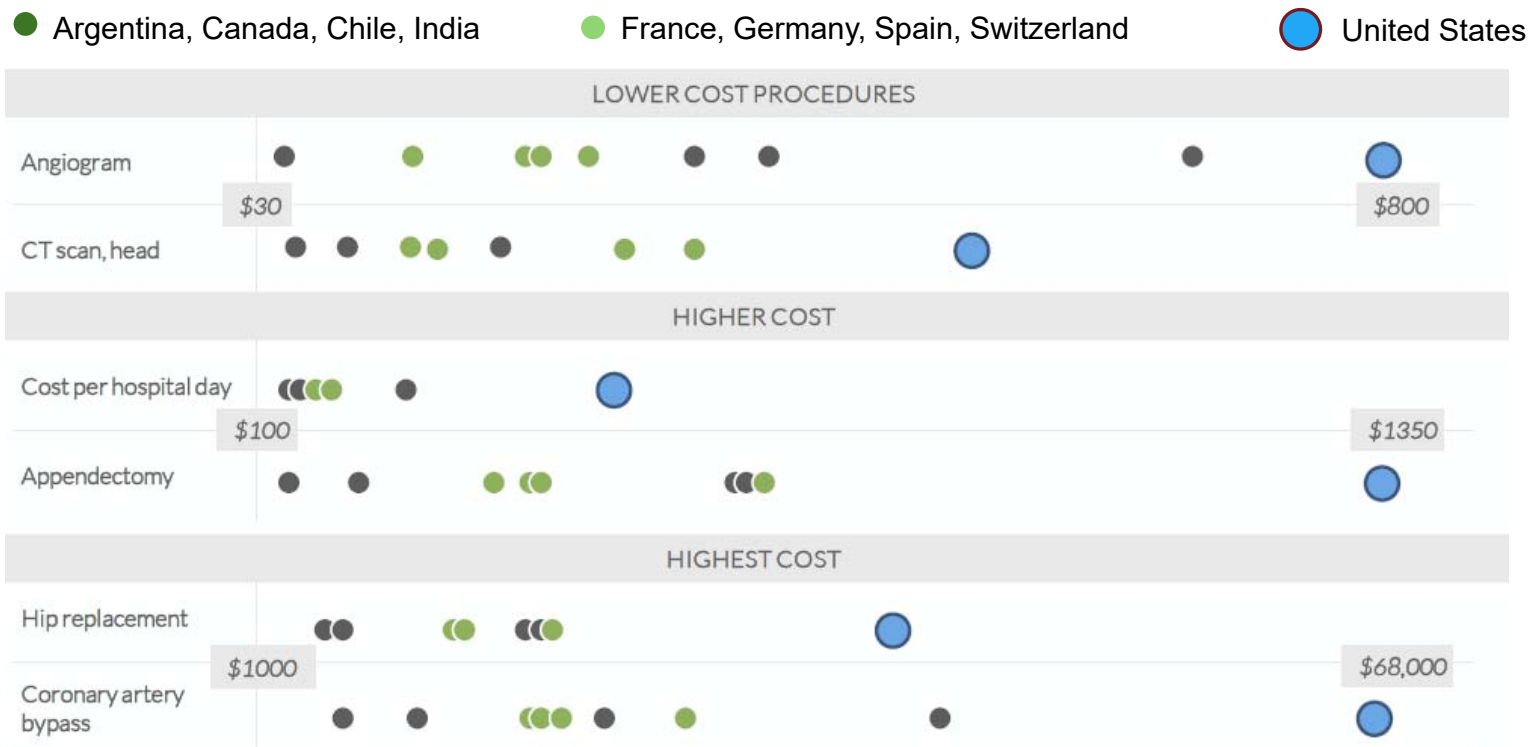
**Utilization of most health care services remained unchanged or declined,** both year-over-year and over the 2012-2016 period.

- Total
- Inpatient
- Outpatient
- Professional
- Prescription Drugs

# Clinical Care (20%)

Quality of Care – Unit cost

## Unit Cost is not aligned with other advanced countries



Ref: Cascadia Capital, *The Future Healthcare Ecosystem Today*, 2016

# Better Healthcare Experience

Access to Care, Quality of Care and Lower Costs

## Section Summary:

- Health is strongly tied to **easy access to healthcare** and **high-quality care**
- **Prices in healthcare** is a main reason for health insurance cost increases
- Follow the science and use evidence-based interventions

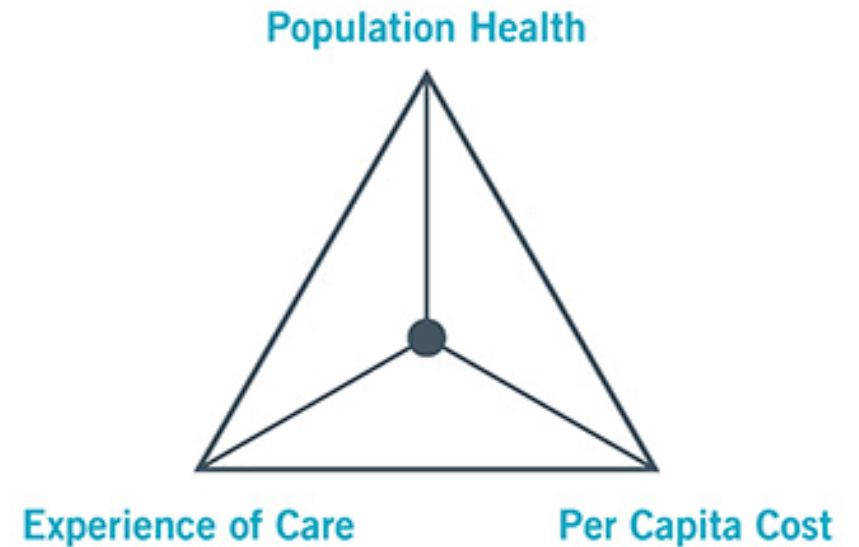
# Solution.

Triple Aim model...

Address healthcare costs by providing:

- Better health
- Better healthcare experience
- Lower healthcare costs

## The IHI Triple Aim





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Who's Winning at Health Cost Containment?  
... and How?

# Program Design



## Case Studies. Who's Winning?

- **Incentives**
  - Make good health decisions by both clinicians and patients low cost or free
  - Make poor decisions costly
- **Get Primary Care right**
  - For the sake of patient satisfaction & quality care
  - Defend against future costs
- **Focus on high cost items**
  - Drug spend
  - Major surgeries & procedures – spine surgeries, cancer
- **Make healthy behaviors easier**
  - Free or discounted exercise facilities or equipment (pedometers)
  - Variety of FREE tobacco cessation resources
  - Healthy food education

# Enovation Controls

## Case Study

### HOW THEY DID IT

- Created high-quality provider network including exact pricing
  - \$0 out-of-pocket costs in-network
  - Has access to larger, high-quality hospitals like CCF regardless of geography
- Focused on high-cost surgeries and labs (70% participation rate amongst enrolled!)
  - Communications - transparent w/ health care costs to all
  - Ease of Use - single phone number or app to find answers, in-network, etc.
- No cost for expensive surgeries to employees

### Profile

- 600 person manufacturing, Tulsa, OK
- Incentives to nudge members to use high-quality, low cost care

### Outcomes

- \$4,000 less annual premium than industry average
- 59% less on major procedures
- Only 70% participation has yielded 90% cost avoidance
- Low turnover

# City of Milwaukee

## Case Study

### HOW THEY DID IT

- Collaboration with the mayor, city council and unions
- 12% cost share for members (aka 88%/12% plan)
- Free primary care, onsite fitness and physical therapy for all members
- \$250 H.S.A. for participation in wellness program
- Low deductibles (\$750 single, \$1500 family)
- 10% coinsurance for High-Quality Physician Network, 30% coinsurance for non-High Quality network
- \$200 ER copay (curbed non-urgent ER use by 300 visits / year)

### Profile

- 6,500 person municipality; 9 unions
- Incentives to nudge members to use high-quality, low cost care

### Outcomes

- Health care costs flat for 5 consecutive years at approx. \$105M
- Decreased by \$37M in the first year
- Reduced hospital admissions
- No layoffs or crowding out of planned raises

# What can you do?

Better Health & Healthcare

## Section Summary:

- Encourage & support **healthy behaviors** (diet, exercise, tobacco use)
- Make **access to high-quality care** easy & affordable
- Evaluate your healthcare costs – **don't overpay**

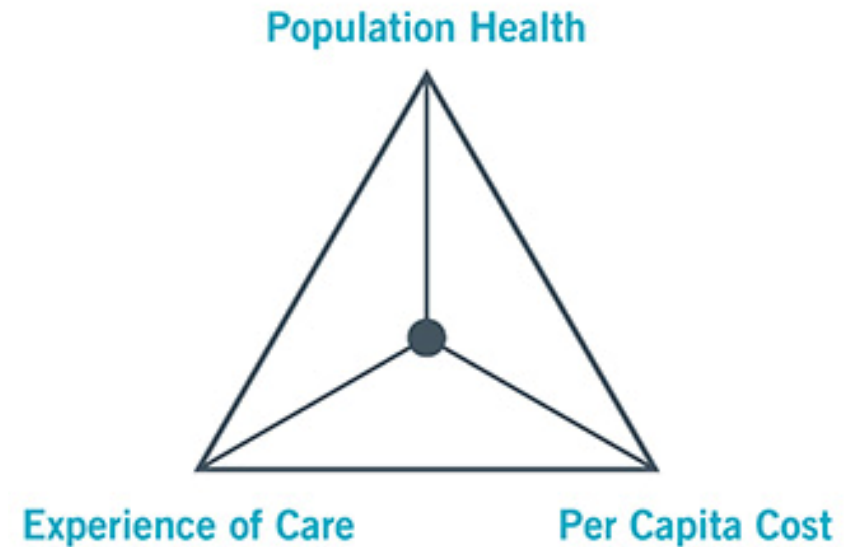
# Solution.

Triple Aim model...

**Address healthcare costs by providing:**

- **Better health & healthcare**
- **Better healthcare experience**
- **Lower healthcare costs**

## The IHI Triple Aim



# Q & A

## **Keep Your Momentum Going!**

Encourage Healthy Behavior, Access to Quality Healthcare & Improve Program Design to Reduce Healthcare Costs \$

**Aaron B. Witwer, MS**

Team Leader, Senior Health Management Consultant  
Oswald Companies



# Appendix: Program Design

## Access to Care

- Medical Homes / Direct Primary Care
- Preventive Care / Screenings (onsite and / or incentives)
- Flu shots and vaccinations
- Healthcare educational materials & communication campaign to ALL employees
- Health fairs (education opportunity, screenings, flu shots, cooking classes)
- Telemedicine
- Text message-based health interventions
- Health Literacy

## Quality of Care

- Medical Homes / Direct Primary Care
- Care Coordination / Navigation via phone / mobile
- Behavioral Health primary care integration
- Chronic Disease management programs
- Self-management chronic disease programs
- Value-based insurance design
- Partner with High-quality hospitals
- Health Literacy

## Healthy Behaviors

- Healthy food served in catering, vending, cafeterias
- Cooking courses
- Educational materials & communication campaign to all employees
- Health fairs (education opportunity, screenings, flu shots, cooking classes)
- Free onsite group exercise classes, including stretching and walking groups
- Signage to encourage use of stairs
- Zero tolerance policy for tobacco and drug use
- Reduce out-of-pocket costs for Tobacco cessation therapy
- Cell-phone & internet-based tobacco cessation
- Lifestyle Management programming available
- Registered Dietitian available
- Mandatory stretching program for employees with a higher risk of injury
- Injury prevention / strength screenings



## References

- Ref 4: <https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/policies/worksite-obesity-prevention-interventions>
- Ref 5: <https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/policies/cell-phone-based-tobacco-cessation-interventions>
- Ref 7: <https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/policies/medical-homes>
- Ref 8: <https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/policies/behavioral-health-primary-care-integration>
- Ref 9: <https://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/policies/chronic-disease-self-management-cdsm-programs>

## Keep the Momentum Going!

### Encourage Healthy Behavior, Access to Quality Healthcare & Improve Program Design to Reduce Healthcare Costs

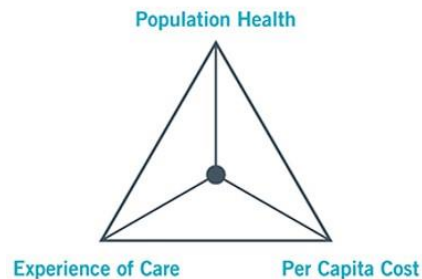
This handout is associated with the MEC Ohio Employee Health & Wellness Conference presentation by Aaron B. Witwer, Oswald Companies

Healthcare cost is a problem for most employers. But companies have already solved the problem using programming and techniques based on the Triple Aim model (see below).<sup>1</sup> By focusing on encouraging good health + a better experience with healthcare providers + demanding lower costs for the healthcare they offer, companies see 15-20% reductions in their healthcare costs in year 1 and their employees end up with a better experience and lower costs themselves.<sup>2</sup>

#### The IHI Triple Aim

##### ADDRESS HEALTHCARE COSTS BY PROVIDING:

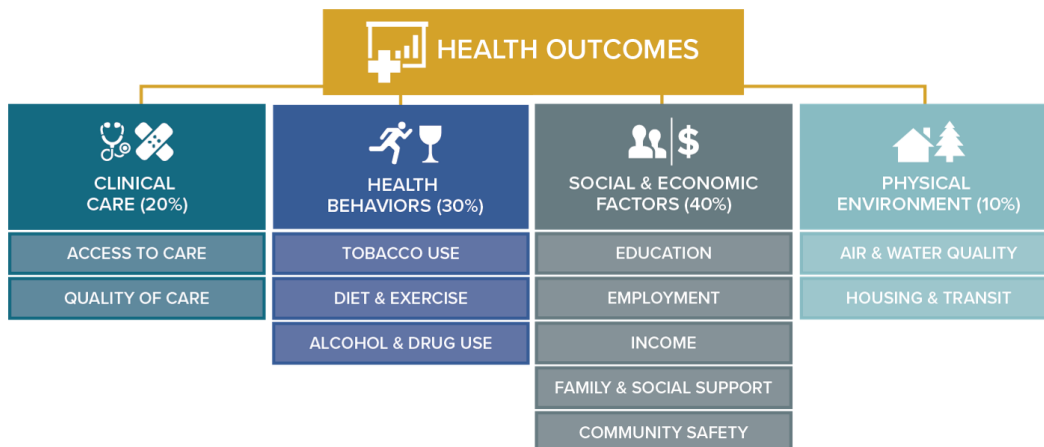
- » Better health
- » Better healthcare experience
- » Lower healthcare costs



#### EMPLOYERS CAN IMPACT THE LEFT HALF (50%) OF THIS GRAPHIC

Understand that each person has their own health challenges. The graphic below represents the main factors that impact our individual health outcomes... good or bad.<sup>3</sup>

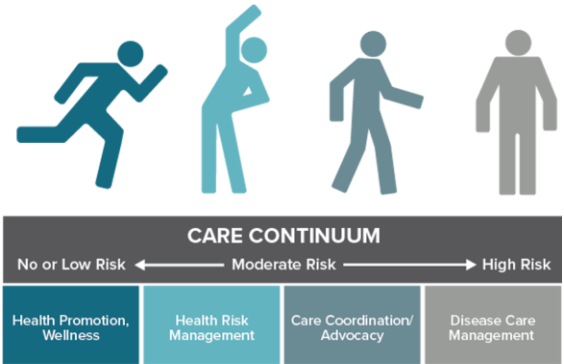
We CANNOT simply focus on health improvement programming for the employee who just needs to lose weight and reduce their alcohol intake, but who struggles finding affordable care and finding transportation to that care.



## NOT ALL PROGRAMMING FITS ALL EMPLOYEES

To address the health factors, let's not forget that people are more complicated than a simple list of health factors. This care continuum (right) aligns categories of programming like 'health promotion' with the person's risk status. The more health issues or less health factors are achieved, the higher risk.

For example, we know from research that 'health promotion' programming does not attend to the highest risk folks in your population.<sup>4</sup>



## WHO'S WINNING?

The companies 'winning' at controlling their healthcare cost take a comprehensive approach: address all three parts of the Triple Aim with a variety of initiatives.



### ACCESS TO CARE

- Medical Homes / Direct Primary Care
- Preventive Care / Screenings (onsite and / or incentives)
- Flu shots and vaccinations
- Healthcare educational materials & communication campaign to ALL employees
- Health fairs (education opportunity, screenings, flu shots, cooking classes)
- Telemedicine
- Text message-based health interventions
- Health Literacy

### QUALITY OF CARE

- Medical Homes / Direct Primary Care
- Care Coordination / Navigation via phone / mobile
- Behavioral Health primary care integration
- Chronic Disease management programs
- Self-management chronic disease programs
- Value-based insurance design
- Partner with High-quality hospitals
- Health Literacy

### HEALTHY BEHAVIORS

- Healthy food served in catering, vending, cafeterias
- Cooking courses
- Educational materials & communication campaign to all employees
- Health fairs (education opportunity, screenings, flu shots, cooking classes)
- Free onsite group exercise classes, including stretching and walking groups
- Signage to encourage use of stairs
- Zero tolerance policy for tobacco and drug use
- Reduce out-of-pocket costs for Tobacco cessation therapy
- Cell-phone & internet-based tobacco cessation
- Lifestyle Management programming available
- Registered Dietitian available
- Mandatory stretching program for employees with a higher risk of injury
- Injury prevention / strength screenings

References: see slide deck for full references

1. Institute for Healthcare Improvement
2. Healthrosetta.org
3. Robert Wood Johnson Foundation
4. Population Health Alliance