

Prevention

The new health care norm

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News stories and published studies continue to confirm the bad news: current and future spending on employee health is not only unsustainable, but also poses a significant challenge to the competitiveness of American business within the global marketplace. While the old adage “an apple a day keeps the doctor away” is one we all know, it appears many of us don’t subscribe to it. More than a third of the \$2.4 trillion the United States spends annually on health care – and the figure keeps ratcheting higher (see box) – is associated with lifestyle-related health problems.

Though the numbers are sobering, the news isn’t all doom and gloom. There has been a dramatic shift in the mindset of employers regarding employee health and health care and its impact on the business bottom line. Organizations that recognize employee wellness is a critical factor to short and long-term success are embracing health promotion strategies focused on primary prevention and risk avoidance – with good reason. If ever there were a silver bullet for fixing the ills of our national health crisis, it is prevention.

The Congressional Budget Office projects that, without any changes, total spending on health care will rise from 16.5 percent of the gross domestic product (GDP) in 2007 to 25 percent in 2025 and to 49 percent in 2082.

Source: Congressional Budget Office. The Long-Term Outlook for Health Care Spending. November 2007.

Employers are leading the way. By shifting their focus to prevention and care management – versus the current disease management and “sick care” model – they can achieve lasting solutions to the problems that plague our health system. But obstacles still remain, and employers can’t overcome them alone. In this issue of the *Get More* white paper series, we take a look at the current state of health care in America, offer a definition of prevention, outline what must change to achieve success and identify resources employers can turn to for help.

The current status of health in America

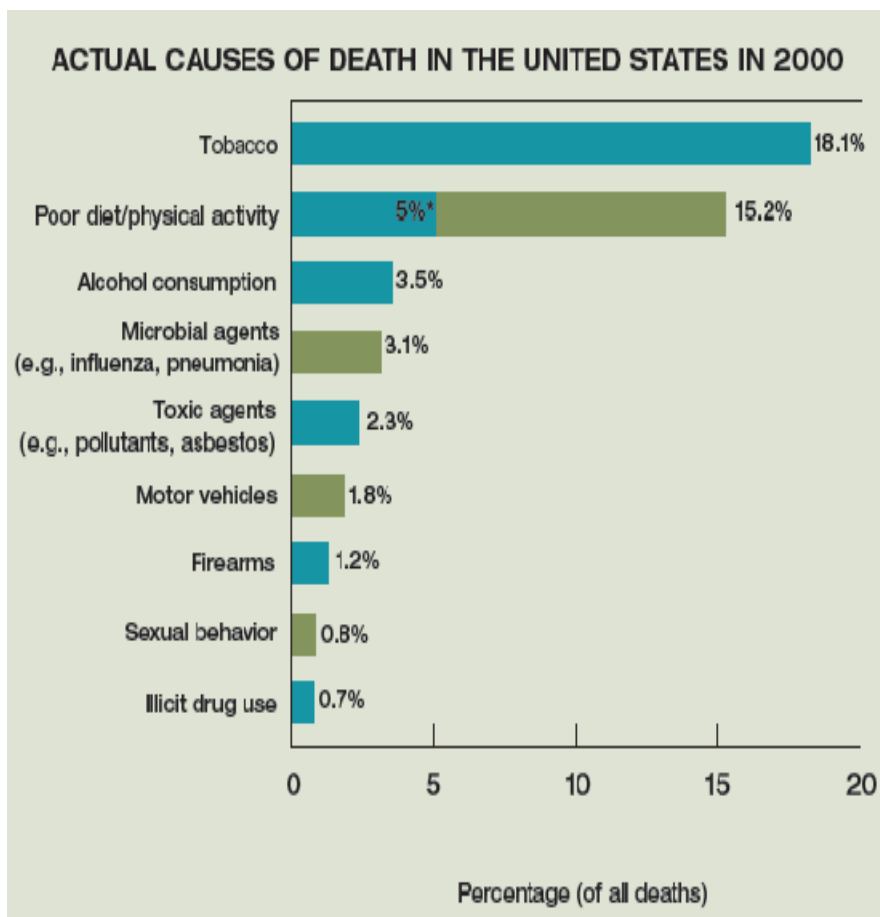
Chronic diseases, including heart disease, cancer, asthma, diabetes, and depression, just to name a few, are some of the leading causes of death and disability in the United States. These conditions are costly as well as pervasive. According to the Centers for Disease Control and Prevention (CDC), the treatment of chronic conditions accounts for 75 percent of the nation’s \$2+ trillion in medical care costs. The CDC also reports that 133 million Americans – about half of all adults – live with at least one chronic medical condition, and that chronic diseases account for 70 percent of deaths and one-third

of the years of potential life lost before age 65. Evidence also shows that individuals with multiple chronic conditions cost up to seven times as much as those with only one chronic condition.

As the graph below^{1,2} illustrates, more than one-third of total mortality in the U.S. can be attributed to three general factors: tobacco use, poor diet/low physical activity (and their contribution to obesity), and excessive alcohol consumption. The good news: these factors are under our control and, in most cases, the conditions related to them can be prevented and managed through a combination of healthy lifestyle education and the application of medical science.

Health is more than the absence of disease; health is a state of optimal well-being.

- World Health Organization



Also encouraging, a majority of employees, when asked, would choose to enjoy better health, better quality of life, and a longer and more satisfying life. According to the World Health Organization, “health is more than the absence of disease; health is a state of optimal well-being.”

Of course, understanding how to achieve this state does not come easy. It requires a shift in mindset from “fixing” health once it’s broken, to choosing habits that will reduce risks and keep us healthy.

Prevention defined

Prevention can be broadly defined as interventions that help avoid or delay the occurrence of diseases and conditions that drive health care costs, such as heart disease, cancer, stroke, chronic respiratory disease and diabetes. There are three main kinds of prevention³:

Primary prevention can be accomplished by modifying unhealthy behaviors, such as smoking and physical inactivity, which contribute to many diseases and account for 38 percent of all deaths in the United States. Primary prevention also includes administering immunizations, and reducing exposure to harmful environmental factors such as air and water pollution, the spread of infectious diseases and food contaminants.

Secondary prevention can reduce the severity of diseases, such as cancer and heart disease, through screening programs that detect the diseases or their risk factors at early stages, before they become symptomatic or disabling.

Tertiary prevention – the current focus of our nation’s health and medical care – is the effort to avoid or defer the complication of diseases after they have developed.

Simple logic says preventing a disease is wiser than facing its consequences at a more advanced stage. Current behavior suggests, however, that we choose to ignore the obvious. As a nation, we devote very little attention to true prevention, instead focusing resources on our health only after it has been compromised.

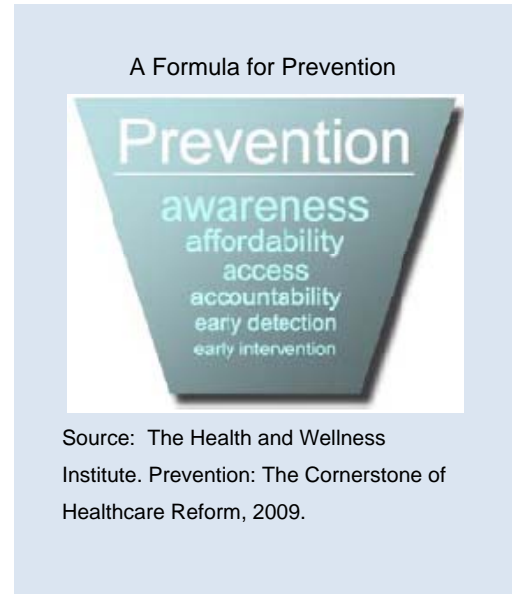
Although it is true that disease may be inevitable for some, primarily due to environment or genetics, this is not the point of discussion. The issue is preventing avoidable, early onset or premature disease associated with *chosen behaviors*. Going one step further, it is about expanding the quality of life for all individuals. For business, that translates into enhanced worker productivity.

This is not to say the extremely complex economic, political, social and ethical issues surrounding health and healthcare can be magically waved away by a simple formula. But, if ever there were a solution worthy of attention, it would definitely be prevention.

Does prevention really work?

The Preventive Services Task Force, and other reputable groups and advocates, have spent the last two decades compiling evidence for preventive services and recommendations for implementing those that have proven value.

Consider the following evidence; it shows an investment in worksite health promotion programs does provide organizations with financial incentives to address escalating health care costs.



- The University of Michigan Health Management Resource Center (HMRC) estimates that an organization saves \$350 annually when a low-risk employee remains low risk, compared to a savings of \$153 when a high-risk employee’s health risks are reduced.
- Findings from 56 studies of worksite health promotion programs shows an average:
 - 27 percent reduction in sick leave absenteeism,
 - 26 percent reduction in health care costs,
 - 32 percent reduction in workers’ compensation and disability management cost claims.

The National Commission on Prevention Priorities analyzed the relative health impact and cost-effectiveness of 25 preventive services recommended by the U.S. Preventive Services Task Force (USPSTF) and the Advisory Committee on Immunization Practices (ACIP). Based on this assessment, preventive services were ranked on a scale from 2 to 10 (with 10 indicating the highest impact, highest value, most effective cost services). This chart⁴ should go a long way in providing the evidence needed to validate the acceptance and importance of preventive screening services.

Rankings of Clinical Preventive Services for the U.S. Population	CPB	CE	Total	
Discuss daily aspirin use—men 40+, women 50+	5	5	10	INTERPRETING THE SCORES Services that produce the most health benefits received the highest CPB score of 5. Cost-saving services received the highest CE score of 5. Scores for CPB and CE were then added to give each service a possible score between 2 and 10.
Childhood immunizations	5	5		
Smoking cessation advice and help to quit—adults	5	5		
Alcohol screening and brief counseling—adults	4	4	8	
Colorectal cancer screening—adults 50+	4	4		
Hypertension screening and treatment—adults 18+	5	3		
Influenza immunization—adults 50+	4	4		
Vision screening—adults 65+	3	5		
Pneumococcal immunizations—adults 65+	3	5		
Cholesterol screening and treatment—men 35+, women 45+	5	2	7	
Cervical cancer screening—women	4	3		
Breast cancer screening—women 40+	4	2	6	
Chlamydia screening—sexually active women under 25	2	4	4	
Discuss calcium supplementation—women	3	3	3	
Vision screening—preschool children	2	4	2	
Folic acid chemoprophylaxis—women of childbearing age	2	3	5	
Obesity screening—adults	3	2		
Depression screening—adults	3	1	4	
Hearing screening—adults 65+	2	2	5	
Injury prevention counseling—parents of children 0-4	1	3	4	
Osteoporosis screening—women 65+	2	2	3	
Cholesterol screening—men <35, women <45 at high risk	1	1	2	
Diabetes screening—adults at risk	1	1	2	
Diet counseling—adults at risk	1	1	1	
Tetanus-diphtheria booster—adults	1	1	1	

Research also shows that it is far more cost-effective to invest in preventive health practices than to spend resources exclusively on the minority of employees who are responsible for the highest use of health care resources and the highest-cost health claims. Despite spending \$2.5 billion a year on disease management services, employers and government agencies are seeing negligible savings and little improvement in worker health from such programs.

Paving the way for change

What are the obstacles getting in the way of putting preventive practices into place?

An assumption is that everyone knows the importance of healthy living and the consequences of poor and unhealthy lifestyle and behavior choices. This is not the case. In the “formula for prevention,” healthy behaviors and behavior change cannot be achieved through the standard medical model in which a practitioner provides diagnosis, treatment and advice but leaves the patient to take full responsibility for initiative and compliance. When it comes to changing people’s lifestyles and behaviors, simply knowing what should be done from a medical perspective – and how to do it – is not going to guarantee success.

What’s more, data shows – particularly in light of the economic downturn – employees across all demographic groups find it challenging to come up with the money to spend on preventive medical screenings, prescription drug compliance and comprehensive health coverage. For most, even the grocery bill for healthier food choices is too much to take on regularly.

Cost-shifting has caught employees off-guard. The expectation of employer-sponsored health coverage, which many depended on for decades, disappeared overnight. While sharing responsibility for paying for health care makes sense in terms of both economics and accountability, employees haven’t been given guidance or time to respond to this new reality. While continuing to cost-shift, employers will need to educate employees on the value of prevention and wise health care resource utilization.

A critical role for employers

Employers struggling to decrease medical spending are quickly realizing that cost-shifting alone isn’t the answer. They are focusing more efforts on primary prevention and risk avoidance with the goal of keeping the majority of employees healthy and at low risk for severe health issues.

Viewing employee health as a productivity strategy rather than simply an exercise in health care cost management, employers must ask themselves, “What investments are most likely to improve the overall health of my employees?”

If employers expect employees to take more responsibility for their own health along with its cost, they also need to be prepared to offer a supportive environment to encourage the necessary behavior changes. According to Hewitt Associates, the promotion of employee accountability as a key health care strategy now ranks above offering competitive benefits and managing health risk.

The launch of any new employer strategy would not be complete without educational efforts directed at employees. Communication about life-saving preventive screenings and services and about their importance must be elevated. In addition, employers must strive to show how these efforts and strategies are a win-win solution for everyone involved.

Employers are not alone

Fortunately, employers can turn to a number of other stakeholders in helping make the transition to a preventive approach to health care.

Employees

While employers can offer many great programs to their employees, it is up to the employee to make the choice to adopt a healthier lifestyle. Employers are now proactively seeking ways to elevate and address the issue of wellness within their own organizations to empower employees to be active participants in managing their own health. When employees consider their health an asset, they are more likely to take action to change unhealthy behaviors that impact their health status, quality of life and bank account.

Health insurers and practitioners

The clinical preventive services available through insurance programs play a major role in identifying risks or health conditions in their early stages. Early detection and intervention saves lives. Employers should expect support from their health plans and providers in getting out the message.

At the vanguard of change are health insurers who are developing collaborative networks of physicians, county health professionals and case managers, community educators, school district physical and health educators who are willing to work together to promote overall health and well-being for plan members.

Producers

Employers need assistance in navigating the many prevention and health promotion programs available to them. They seek brokers and consultants who are well versed in this arena and can bring

them a full-suite of options. Benefits Selling magazine reports that employers are favoring firms who offer progressive approaches to control health care costs.

When vendors are chosen, producers also play an important role in making sure all parties come to the table as partners and collaborators who share the same goals and are working together to achieve them.

Other Providers

Wellness vendors, life, disability and dental insurers, technology providers – also have a stake in the financial and physical health of employers and employees. In conjunction with its group life insurance programs, Minnesota Life offers health and wellness services that give employees tools to help them take responsibility for their own health while addressing employers' top concerns – increasing productivity and lowering health care costs.

We also offer a suite of enhanced services at no additional cost to employers or employees, including:

- Legal services
- Travel assistance services
- Identity theft resolution services
- Beneficiary financial counseling

To learn more about any of these services, contact the group sales manager in your region or call our national sales office at **1-800-606-LIFE (5433)**.

Services provided by Ceridian LifeWorks, Europ Assistance USA and PricewaterhouseCoopers are their sole responsibility. The services are not affiliated with Minnesota Life, Securian Life or their group contracts and may be discontinued at any time.

Addendum: A futurist's perspective

During a recent presentation to the American Holistic Medical Association, Leland Kaiser, PhD, health care futurist, executive coach, community organizer, and organizational consultant, described his vision for the future of health care.

Kaiser began his presentation by saying, "it is better to design-out disease than attempt to treat it." He believes we need to move well beyond where we are currently in health care planning and health services delivery and design the world as we want it to be.

If prevention is the health care norm for our time, Kaiser contends healthy human habitats can be the norm of our future. This new health care norm could include:

- *Global healthcare marketplace*
- *Healthcare becomes an experiential industry*
- *The era of the consumer will fully arrive*
- *Computerized monitoring of all physician orders*
- *Virtual explosion of medical technology*
- *Healthcare becomes innovation driven*
- *Expansion of integrated medicine*
- *Medical specialties merge*
- *Medicine moves to the atomic level*
- *Cultural centrality of good health*
- *Life expands past 100 years*
- *Nerve and brain cell regeneration*
- *In-home diagnostic centers*

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