HEALTH PLAN MANAGEMENT AND ONSITE EMPLOYEE HEALTH AND WELLNESS CENTERS

PLANNING FOR 2011 AND BEYOND

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Erickson Living –
“*We share our gifts to create communities that celebrate life*”

• The most trusted name in aging
• Develops & manages full service continuing care retirement communities serving middle income seniors
• 23,000 residents live in 16 communities, 9 states
• 12,000 employees currently - largely service level, including housekeeping, maintenance, dining, communications, security & nursing

www.ericksonliving.com
Today’s agenda

2. Erickson Living’s *Health Matters* Program to Promote Health, Wellness & Health Risk Reduction
3. Success with Onsite Clinics
4. Strategy for Success in Future Years
5. Questions & Discussion
“Employers medical costs expected to increase by 8.5% in 2012”

Pricewaterhouse Cooper LLC
Press release, May 18, 2012
Details of PwC report

• Survey of 1700 U.S. employers from 32 industries, & interviews with health executives & brokers
• 8.5% increase in medical costs for 2012 vs. 8% in 2011 & 7.5% in 2011
• Why? During slow economic recovery in 2010 & 2011, unemployment & reduction in disposable income, Americans sought out fewer healthcare services
Details of PwC report (cont’d)

May be mitigated by:

- Cost shifting to employees
- Some blockbuster brand-name drugs coming off patent
- Increasing employees’ contributions for out-of-network care

Still likely to become even more costly over time given:

- Consolidation of physicians & hospitals (ACOs) which will increase competition among providers & drive up payment rates
- Increased cost shifting to commercial plans with lowered Medicare & Medicaid reimbursement
How will health plan administrators respond?

• PwC survey of 1700 U.S. companies across 30 industries with a range of 500-20,000, from 200-5000 employees

• Plans:
  ✓ 84% likely to make plan design changes to offset costs associated with health reform
  ✓ 86% will re-evaluate their health plan strategy
  ✓ 50% considering changing or eliminating dependent medical coverage
  ✓ 89% likely to increase health & wellness efforts
Opportunities for Worksite Health & Wellness Programs
3 general factors contributing to more than 1/3 of mortality

1. Tobacco use
2. Poor diet/low physical activity & their influence on obesity
3. Excessive alcohol consumption

Reference: Journal of the American Medical Association
Excess Medical Costs Follow Excess Risks

- Low Risk (0-2 Risks): $2,199
- HRA Non-Participant: $3,039
- Medium Risk (3-4 Risks): $3,460
- High Risk (5+ Risks): $5,520

Excess Pharmaceutical Costs
Follow Excess Risks

Excess Disability Costs Follow Excess Risks

- Low Risk (0-2 Risks) N=685: Excess Costs $491, Base Cost $175
- HRA Non-Participant N=4,649: Excess Costs $666, Base Cost $175
- Medium Risk (3-4 Risks) N=520: Excess Costs $783, Base Cost $292
- High Risk (5+ Risks) N=366: Excess Costs $1,248, Base Cost $757

Wright, Beard, Edington. JOEM. 44(12):1126-1134, 2002
Excess On-The-Job Loss Follow Excess Risks

- Low Risk (0-2 Risk)
  - N=17,947
  - Excess Costs: 14.7%
  - Base Cost: 6.2%

- Medium Risk (3-4 Risks)
  - N=6,959
  - Excess Costs: 6.2%
  - Base Cost: 12.2%

- High Risk (5+ Risks)
  - N=3,469
  - Excess Costs: 12.2%
  - Base Cost: 14.7%

## Summary of Risk Levels with Corporate Cost Measures

<table>
<thead>
<tr>
<th>Outcome Measure</th>
<th>Low-Risk (N=671)</th>
<th>Medium-Risk (N=504)</th>
<th>High-Risk (N=396)</th>
<th>Excess Cost Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Short-term Disability</td>
<td>$120</td>
<td>$216</td>
<td>$333</td>
<td>41%</td>
</tr>
<tr>
<td>Workers’ Compensation</td>
<td>$228</td>
<td>$244</td>
<td>$496</td>
<td>24%</td>
</tr>
<tr>
<td>Absence</td>
<td>$245</td>
<td>$341</td>
<td>$527</td>
<td>29%</td>
</tr>
<tr>
<td>Medical &amp; Pharmacy</td>
<td>$1,158</td>
<td>$1,487</td>
<td>$3,696</td>
<td>38%</td>
</tr>
</tbody>
</table>

Wright, Beard, Edington. JOEM. 44(12):1126-1134, 2002
Integrated workers’ compensation management

- U.S.: 1985-1992: National health care costs increased 10% annually; workers’ comp costs increased nearly 15%
  - Patient advocacy & customer service, preferred provider network using ‘sports medicine’ model, close follow-up, continuous dialogue between parties & injured employee, & in-house legal services to settle certain cases
  - 73% decrease in lost time & medical claims; 54% decrease in all costs (incl. admin costs)
  - 77% decrease in temporary/total days paid
  - 46% decrease in lost time mainly due to modified duty
  - 10% decrease in total claims
Occupational health services/regulatory compliance

- Pre-placement medical assessment
- Periodic medical evaluation (e.g., DOT driver’s physicals)
- Job transfer medical evaluation
- Fitness for duty evaluation
- Disability evaluation
- Return to work assessment
- Infectious disease prevention & exposure management, including needle-sticks

- Work-related vaccines
- Pandemic preparedness
- Respiratory protection
- Back injury prevention
- Ergonomics assessment
- Chemical hazard training & management
Erickson Living’s Health Matters Program
Health Matters

• Erickson’s nationally recognized employee health & wellness program launched in July 2006

• Strategy
  • To provide an over-arching framework
    • that promotes the physical & emotional health, wellness, & productivity of our employees
    • through the efficient delivery of cost-effective, high quality programs & services
Health Matters 2006-2011

- Personal Health Assessments
- 100% coverage for preventative care
- Health fairs
- Disease management & online wellness programs
- Wellness Fund reimburses $240/year for wellness related activities that the employee prefers

  • Winner of an American Heart Association’s Worksite Innovation Award in 2008!

- Fresh fruit Fridays
- Onsite fitness centers & weight loss programs
- Onsite Employee Health & Wellness Centers
- Detailed communications strategy
- Healthy vending machine choices
- Vendor Care Board to ensure integration & cross referrals
- Onsite smoking cessation clinics & reduced premiums for non-smokers
Health Matters

- Change in focus in 2008: Remove barriers to achieving health & wellness -- *time, cost, education, & access*
- Open onsite Employee Health & Wellness Centers
- We define a “healthy & productive worker” as one who:
  1. Is physically fit & demonstrates positive health-related behaviors such as:
     - Not using tobacco, alcohol to excess or illicit drugs
     - Maintaining body mass index (BMI) at 25 or less
     - Regularly performing appropriate levels of physical activity
     - Complying with recommended preventive health practices;
  2. Has the psychological skills that enables success in highly demanding work environments;
  3. Works in a safe & healthy work environment; &
  4. Is productive at work & is ready to respond to changes necessary to provide the very best service to our residents.
Success with our onsite Employee Health & Wellness Centers
Our ‘Integrated Health’ approach

• Offer a spectrum of cost effective work-related & personal health care related services to keep employees healthy & productive at work

• Measure clinical & financial results with the goal to maximize the effectiveness of every health care dollar spent, while ensuring employees have the best quality of care and are engaged & productive at work
We listened to our employees

- **Majority want Acute Care** for colds/flu or other infections, sore throat or earache, back or neck pain, blood pressure screening, etc.
- **2/3 want complete physical exams** (but 100% of Spanish-speaking women at Riderwood want them; & men were more interested in these services at Monarch Landing than women)
- **Over half want diabetes screening**
- **Women:** over half want PAP smears & even more (61%) want breast exams & mammograms
- **Men:** 80% want prostate checks
- **Over 75% of employees want flu shots**
Convenient, affordable care—right where you work.

Your Employee Health and Wellness Center offers:

- Low-cost health care for all employees over age 18
- On-site services for shorter wait times and no drive
- Skilled medical professionals
- Confidentiality
- Prescriptions when appropriate
- Work-related care

Charlestown
Employee Health & Wellness Center

Employee Health & Wellness Center
719 Maiden Choice Lane
Catonsville, MD 21228
443-297-3283 | external dial
601-3283 | internal dial
EMPLOYEE HEALTH & WELLNESS CENTER
Sick Care, Health IQ, Well Visits, Work-Related Care and More

SICK CARE
Fast, convenient care for the following conditions and more:
- Sore throat/cold/flu
- Allergies
- High blood pressure
- Digestive problems
- Urinary tract infections
- Headache/earache
- Back or joint pain
- Menstrual cramps

HEALTH IQ
A 15 minute preventive health screening, including:
- Full cholesterol profile (LDL, HDL and triglycerides)
- Diabetes screening
- Blood pressure check
- Weight and body mass index (BMI)
- Vision screening

WELL VISIT
A 45 minute complete health exam tailored for men and women. Choose from any or all of the following services:
- Colon cancer screening if indicated
- Heart disease risk
- General health
- Physical exam

Women’s Well Visit includes:
- Osteoporosis screening
- Mammogram referral
- Female screening test

Men’s Well Visit includes:
- Prostate and testicular check

WORK-RELATED CARE:
Convenient care for issues relating to your job, including:
- New hire processing
- Injury or infectious exposure
- Vaccinations
- TB testing
- DOT and school physicals (18 years and over)

For emergencies such as chest pain, shortness of breath, passing out and deep cuts, call 911 immediately.

For hours or to make an appointment, call 443-297-3283 today.
Internal callers, dial 601-3283.
Why did we create our own Centers vs. outsourcing them?

<table>
<thead>
<tr>
<th>Our own</th>
<th>If outsourced</th>
</tr>
</thead>
<tbody>
<tr>
<td>✓ Lower cost: our cost is $120 PEPY vs. $265-$500 if outsourced; cost avoidance for 2008 alone for 6 Centers would be $1.9M</td>
<td>✓ At least 2-4 times more costly</td>
</tr>
<tr>
<td>✓ Trusted resource; choose our own staff to fit the ‘Erickson Way’</td>
<td>✓ Providers unknown to employees &amp; leaders</td>
</tr>
<tr>
<td>✓ Leverage existing company resources: electronic medical record, rehab services, etc.</td>
<td>✓ Additional services &amp; technology are very costly</td>
</tr>
<tr>
<td>✓ Branding under widely known Health Matters’ program</td>
<td>✓ Less control over branding &amp; aligning service with other benefits</td>
</tr>
<tr>
<td>✓ Access real time data to monitor clinical &amp; financial indicators</td>
<td>✓ Delays in receiving &amp; understanding utilization &amp; financial data</td>
</tr>
<tr>
<td>✓ Adjust to company needs, including integrating other services</td>
<td>✓ Less flexibility in the menu of services being introduced</td>
</tr>
</tbody>
</table>
Announcement postcard

• Mailed to employees’ homes
• Goal: Announce the opening of the Center
Puzzle/magnet

- Distribute to all employees
- Goal: Build awareness of the center
Take a bite out of your health care costs

Schedule your Well Visit for 2011—and we’ll waive the co-pay!

Staying healthy has never been easier—or more affordable! For 2011, your Employee Health and Wellness Center is waiving the co-pay for your annual Well Visit. Now, you can get a full checkup without the extra cost. It’s the perfect way to kick off a healthy and happy new year!

Your Well Visit lasts about 45 minutes. You can choose any or all of the following services:

- A general health history
- Physical exam
- Heart disease risk
- Health habits overview
- Colon cancer screening, if indicated
- Osteoporosis risk, female screenings
- and mammogram referral
- Prostate and testicular risk

Schedule your Well Visit today and stay healthy for yourself and the ones you love.
Call 601-3283 (internal dial) or 443-297-3283 to make your appointment.

719 Maiden Choice Lane, Catonsville, MD 21228

Present this coupon at the time of your Well Visit and pay absolutely no co-pay. This special offer is good for a limited time only. So schedule your appointment today!

*The waived copay applies only to employees who are part of the Erickson Living® health plan. Co-pay waived for Well Visits only. Call your Employee Health and Wellness Center for details. Employees not in the employee health plan pay only $20.
## Employee Health & Wellness Visits 2010

<table>
<thead>
<tr>
<th>Site</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Greenspring Virginia (opened 11/08, 781 employees)</td>
<td>4,584</td>
</tr>
<tr>
<td>Charlestown/Corporate Maryland (opened 5/09, 1208 employees)</td>
<td>2,908</td>
</tr>
<tr>
<td>Riderwood Maryland (opened 1/09, 839 employees)</td>
<td>2,605</td>
</tr>
<tr>
<td>Cedar Crest New Jersey (opened 3/09, 605 employees)</td>
<td>2,523</td>
</tr>
<tr>
<td>Seabrook New Jersey (opened 3/09, 484 employees)</td>
<td>1,387</td>
</tr>
<tr>
<td>Oak Crest Maryland (opened 9/09, 769 employees)</td>
<td>2,347</td>
</tr>
<tr>
<td>Tallgrass Creek Kansas (opened 12/08, 72 employees)</td>
<td>146</td>
</tr>
<tr>
<td>Monarch Landing Illinois (opened 11/07, 90 employees)</td>
<td>181</td>
</tr>
<tr>
<td>Windcrest Colorado (opened 02/10, 114 employees)</td>
<td>195</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>16,876</strong></td>
</tr>
</tbody>
</table>

Includes:
- Acute Care/Follow-up
- Preventive: Health IQ, Well man/Well woman
- Occupational Health: Workers’ compensation, New hire processing, Work related vaccinations, TB screening
- Other: Smoking cessation, Injections, Vaccines, Blood draws, Blood pressure only
Our top 10 diagnoses

1. General check-up
2. Cold/upper respiratory infection
3. Hypertension
4. Pharyngitis
5. Tobacco use
6. Cough
7. Urinary tract infection
8. Headache
9. Conjunctivitis
10. Sinusitis
Results: Employee satisfaction
Clinical encounters

<table>
<thead>
<tr>
<th>Category</th>
<th>Average Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scheduling</td>
<td>100.00%</td>
</tr>
<tr>
<td>Convenient Hours</td>
<td>100.00%</td>
</tr>
<tr>
<td>Minimal Waiting</td>
<td>100.00%</td>
</tr>
<tr>
<td>Paperwork</td>
<td>100.00%</td>
</tr>
<tr>
<td>Welcoming and Caring</td>
<td>100.00%</td>
</tr>
<tr>
<td>Knowledgeable Provider</td>
<td>100.00%</td>
</tr>
<tr>
<td>My needs were met</td>
<td>100.00%</td>
</tr>
<tr>
<td>Cleanliness</td>
<td>100.00%</td>
</tr>
</tbody>
</table>

National Benchmark for Private Practice
Greenspring Costs:
Before & After EHWC

*Model: 1 NP/1 MA

**Center Open Date 11/10/2008

<table>
<thead>
<tr>
<th></th>
<th>2008-Nurse</th>
<th>2010 NP/MA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salary</td>
<td>$60,000</td>
<td>$128,550</td>
</tr>
<tr>
<td>Bonus</td>
<td>$5,600</td>
<td>$6,500</td>
</tr>
<tr>
<td>Benefits</td>
<td>$17,500</td>
<td>$11,733</td>
</tr>
<tr>
<td>Supplies/Equipment</td>
<td>$10,000</td>
<td>$21,342</td>
</tr>
<tr>
<td>Marketing</td>
<td>---</td>
<td>$288</td>
</tr>
<tr>
<td><strong>TOTAL COST</strong></td>
<td>$93,100</td>
<td>$168,413</td>
</tr>
</tbody>
</table>
## Greenspring Value: Before & After EHWC

<table>
<thead>
<tr>
<th>Value*</th>
<th>2008 Nurse</th>
<th>2010 Visits</th>
<th>2010-NP/MA</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Acute care</td>
<td>---</td>
<td>459</td>
<td>$53,933</td>
</tr>
<tr>
<td>2. Preventive well visit</td>
<td>---</td>
<td>21</td>
<td>$8,400</td>
</tr>
<tr>
<td>3. Health IQ</td>
<td>---</td>
<td>113</td>
<td>$5,650</td>
</tr>
<tr>
<td>4. Smoking cessation</td>
<td>---</td>
<td>17</td>
<td>$1,598</td>
</tr>
<tr>
<td>5. Injury care-work related</td>
<td>---</td>
<td>109</td>
<td>$32,700</td>
</tr>
<tr>
<td>6. New hire/drug test</td>
<td>$48,000</td>
<td>408</td>
<td>$32,640</td>
</tr>
<tr>
<td>7. TB screen</td>
<td>$24,000</td>
<td>1430</td>
<td>$28,600</td>
</tr>
<tr>
<td>8. DOT physicals</td>
<td>---</td>
<td>10</td>
<td>$700</td>
</tr>
<tr>
<td>9. Random Drug Testing</td>
<td>---</td>
<td>5</td>
<td>$125</td>
</tr>
<tr>
<td>10. Random Alcohol Testing</td>
<td>---</td>
<td>8</td>
<td>$200</td>
</tr>
<tr>
<td>11. Other OCC Health Savings by negotiating contracts</td>
<td>---</td>
<td>---</td>
<td>$6,500</td>
</tr>
<tr>
<td>12. Workers comp record keeping</td>
<td>N/Q=not quantifiable</td>
<td>58</td>
<td>$1,450</td>
</tr>
<tr>
<td>13. OCC health other</td>
<td>---</td>
<td>137</td>
<td>$3,425</td>
</tr>
<tr>
<td>14. MA only</td>
<td>---</td>
<td>1368</td>
<td>$5,130</td>
</tr>
<tr>
<td>15. Flu/H1N1 Vaccines**</td>
<td>$5,425</td>
<td>753</td>
<td>$33,132</td>
</tr>
<tr>
<td>16. Other Vaccines</td>
<td>N/Q</td>
<td>27</td>
<td>$675</td>
</tr>
<tr>
<td><strong>Total Value</strong></td>
<td>$77,425</td>
<td>4923</td>
<td>$214,858</td>
</tr>
</tbody>
</table>

**Data January 2010-December 2010**

Note: Workers Compensation value does not include preventive measures (education, intervention (PIRMS)) and value of early case management.

*Calculated by using usual and customary fees if services were instead rendered externally.

<table>
<thead>
<tr>
<th>Hard Dollar ROI (value/cost)</th>
<th>*EHWC ROI including lost time work (national benchmark 3 hours saved) &amp; Loss Development Factor for on-site workers compensation care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-EHWC 2010</td>
<td>$0.83</td>
</tr>
</tbody>
</table>

*Total visits (for services #1-10): 2580, 3 hours saved per visit, average hourly rate (including benefits): $22.

**Means that there is a $2.29 return on investment for every $1.00 spent.

Note: Loss Development Factor: adjustment applied to workers’ compensation losses to demonstrate ultimate value in which reduced costs (that typically carry forward for four years) are realized through better workers’ compensation management. On-site medical care does not have to be reported to the carrier as an actual cost. On average: for every $1 value in care we provide on-site, the cost/payout would have instead been $1.95 for year one alone if the care had been reported as a cost. (Reference: International Risk Management Institute, Inc. 2009).

Note: Does not include dollars spent ‘in house’, i.e. physical therapy.

Note: This is still a conservative estimate. Does not include value of continued regulatory compliance readiness, stay at work/return to work, increased productivity, employee satisfaction and retention, value of preventive services, cost avoidance due to disease management, etc.
Voice of our Employees
ROI = *Priceless*

- 52 y.o. female housekeeper for BP check. NP noticed assymetric lip & favoring left side. EE cried & said face was numb. 911 call & received ‘TPA’ therapy in ED, avoiding a stroke. “God bless you, you saved my life”

- 46 y.o. male general services worker with cold. Heart exam revealed loud murmur. Cardiologist visit revealed leaky heart valve but normal heart function. Valve repair done with good outcome & back to work. “The Cardiologist told me you found it before it damaged my heart”

- 55 y.o. female housekeeper with sinus symptoms. Irregular pulse noted. EKG showed arrhythmia. Brother died at 42 from same problem. Cardiologist visit for medications to control her heart rate. “I was afraid I would die young as well”

- 48 y.o. female laundry worker for BP medication. BP dangerously high at 210/113. Clearly depressed due to loss of daughter in last year (leaving her with 2 children) & loss of mother 1 month ago. EAP referral, then counseling. 2 weeks later, BP normalizing, in therapy & wants to quit smoking in new year. “You really care about me”
## Workers’ Compensation Pilot Program

### Cedar Crest Village

<table>
<thead>
<tr>
<th></th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Employees:</td>
<td>890</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Projected/Developed Cost</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Cost</td>
<td>$213,707</td>
<td>$1,065,339</td>
<td>$522,476</td>
<td>$120,419</td>
</tr>
<tr>
<td>Cost of Indemnity Benefits</td>
<td>$ 66,338</td>
<td>$ 377,838</td>
<td>$ 210,486</td>
<td>$ 39,564</td>
</tr>
<tr>
<td>Cost of Medical Benefits</td>
<td>$ 147,369</td>
<td>$ 687,501</td>
<td>$ 311,990</td>
<td>$ 80,854</td>
</tr>
<tr>
<td>Actual Total Number of Claims/Cases</td>
<td>96</td>
<td>152</td>
<td>82</td>
<td>59</td>
</tr>
<tr>
<td>Average Cost Per Claim</td>
<td>$ 2,226</td>
<td>$ 7,009</td>
<td>$ 6,372</td>
<td>$ 2,041</td>
</tr>
<tr>
<td>Median</td>
<td></td>
<td></td>
<td></td>
<td>$ 790.72</td>
</tr>
</tbody>
</table>

### Notes:
- The table above represents the projected and developed costs for the Workers’ Compensation Pilot Program at Cedar Crest Village from 2007 to 2010.
- The data includes the number of employees, total cost, cost of indemnity benefits, cost of medical benefits, actual total number of claims/cases, average cost per claim, and median cost per claim.

**Health Matters**

**Erickson Living** Add more Living to your Life
Strategy for Success in Future Years
2010 Health Care Reform

- Sometimes referred to as ‘Obama Care’
- Most of it doesn’t take effect until 2014
- Most doesn’t have to do with health care delivery itself (or its increasing costs) but mostly expanding insurance coverage
- Premiums are likely to sky-rocket unless companies are innovative & affect employee’s lifestyle/habits & cost effective utilization of costly services
- Experts suggest consumer driven health care, more primary & preventive care & finding Centers of Value (where high quality does not necessarily mean the highest cost)
- As access to primary care services will become more problematic with expanded insurance coverage, onsite work clinics will become even more attractive
Our plan for 2012

1. Reduce premiums by $10 per pay period ($260/year total) if nonsmoker, completes paper online annual health assessment and completes biometric testing (full cholesterol profiles, diabetes screening, blood pressure check, and weight and body mass index)

2. Introduce individual health coaching (case management) for the top 5% of health plan enrollees who can most benefit from coaching to prevent worsening of their state and to achieve our largest savings opportunity. $250 cash incentive if enrollee completes defined goals

3. Expand Employee Health and Wellness Centers to all Erickson Living communities by end of 2013

4. Waive the $10 copay for health plan enrollees using their EHWC for sick care

5. In collaboration with our new Pharmacy Benefits Manager (PBM), introduce step therapy that incentivizes enrollees with certain chronic conditions (e.g., high cholesterol) to request from their treating medical provider a preferred, less costly medication equivalent and incur no copay if obtained through a preferred retailer

6. To combat the obesity epidemic and associated much higher costs of healthcare for obese enrollees, brand our own version of Weight Watchers at Work and rebate employee fees fully for successful completion of goals

7. Designate all campuses as ‘tobacco free’ for employees and visitors. Residents can use tobacco products in their apartments and designated areas in assisted living
Our ‘Top 10’ actions for sustained success

1. Keep engaging senior management including CEO & CFO
2. Develop policies & procedures
3. Survey ‘non-users’
4. Manage according to metrics
5. Educate middle management about ‘RO-YOU’
6. Monitor & control costs
7. Integrate health & safety initiatives
8. Monitor & improve vendor performance
9. Adjust the program to business goals
10. Influence health benefits
Questions & Discussion

Craig.Thorne@erickson.com
Selected references & resources

- Improving Health - an Employer Tool Kit: Adapted from an IOM Report by the National Business Group on Health, 2006
- Partnership to Fight Chronic Disease: [http://www.fightchronicdisease.org/](http://www.fightchronicdisease.org/)
- Kaiser Family Foundation *Employer Health Benefits Annual Survey & Health Management Associates’ Estimates for 2006*
- *The Baptist Heath Care Journey to Excellence: Creating a Culture that WOWs!*, 2005
- PricewaterhouseCooper, LLC Press release: *Employers medical costs expected to increase by 8.5% in 2012*, May 18, 2012