

HealthFlex Wellness Update: On the Path to Better Health

HealthFlex Summit

March 22, 2012



GENERAL BOARD OF PENSION AND HEALTH BENEFITS
OF THE UNITED METHODIST CHURCH

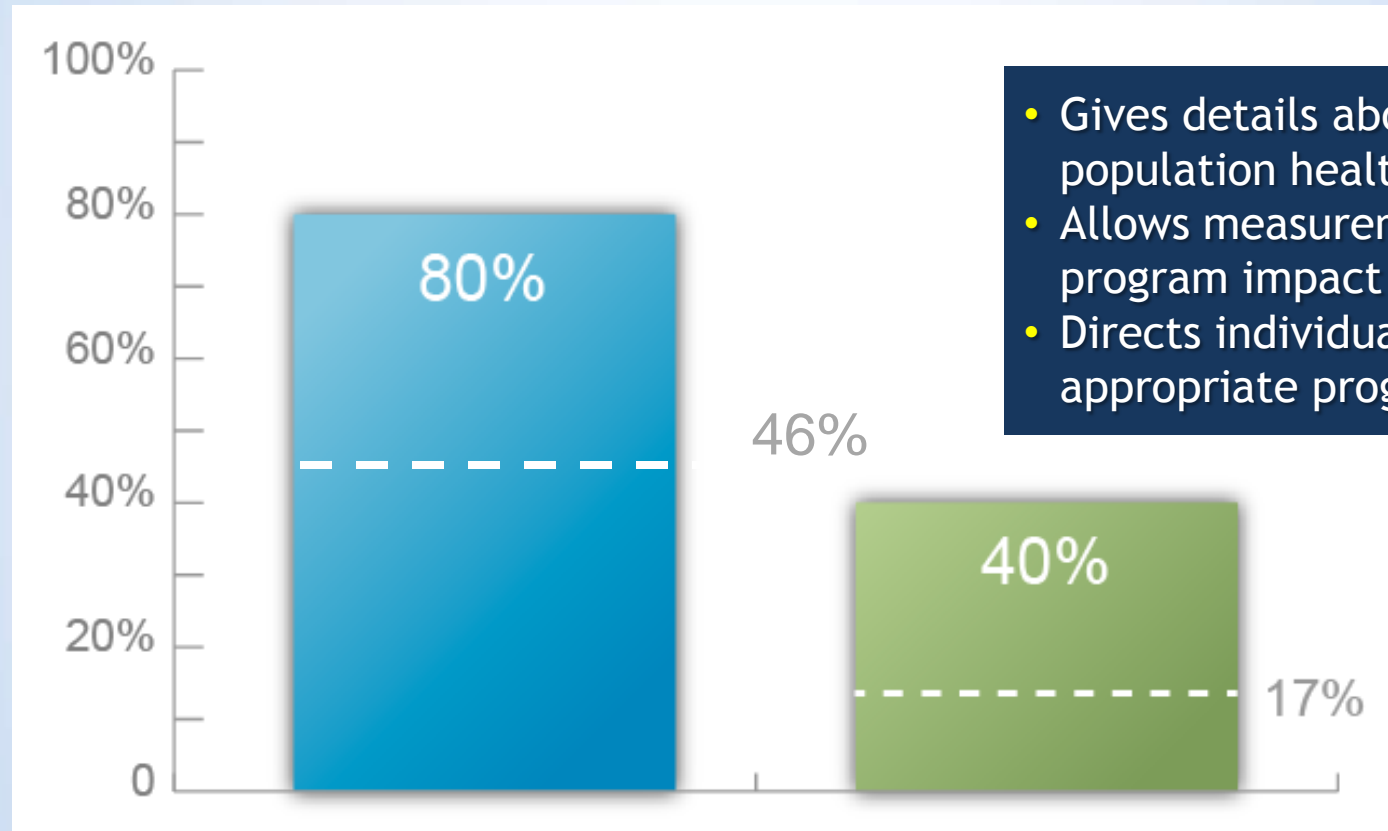
Caring For Those Who Serve

Thank You for Your Partnership

- Strong participation in key risk assessments: Blueprint for Wellness and HQ
- Programs support “taking action” for behavior change



Assessment Participation



- Gives details about population health
- Allows measurement of program impact
- Directs individuals to appropriate programming

High HQ completion sustained 2010-2011, compared to 2009

Biometric screening participation more than doubled 2010-2011

Health Improvement Program Participation



- Engagement in coaching up from 25% in 2010 and 40% in 2009 (with former coaching vendor). More sessions completed than WebMD average

High /Moderate Risk Coaching Utilization: 2010-2011 Program Year		
	High Risk	Mod Risk
Engaged in year 1 program	49%	47%
Average # of coaching sessions completed	4.84	2.79

Individuals who engage in coaching and VHM show improvement

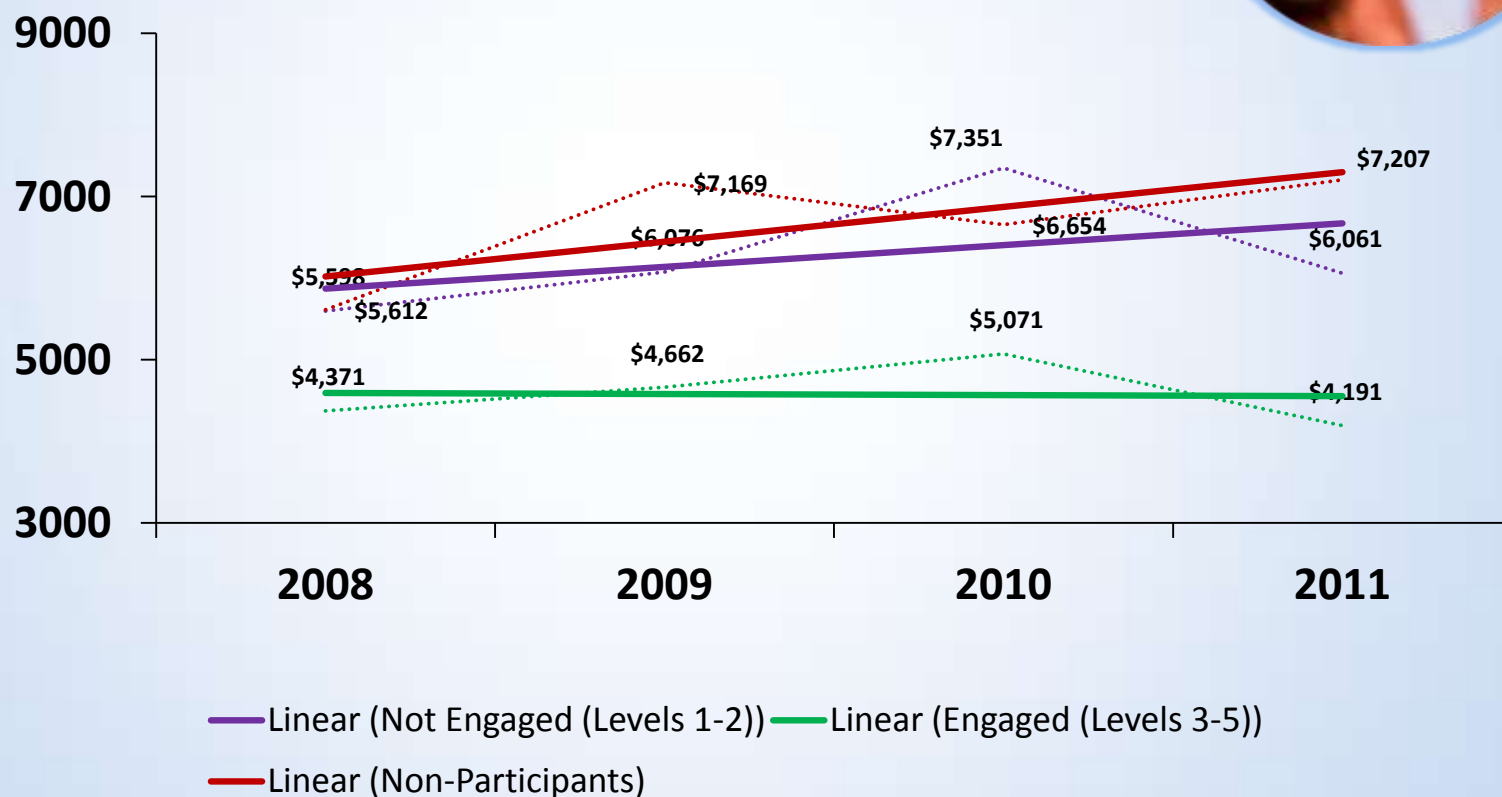
- Participation in the walking program continues to be high, with a growing percentage regularly uploading

Walking Program Participation: Year-End 2011	
Enrolled in walking program (all plans)	49%
Enrolled in walking program (active plans only)	65%
Uploading regularly	57%

Virgin HealthMiles: Impacting Cost Trends



Claims Costs by VHM Engagement Level

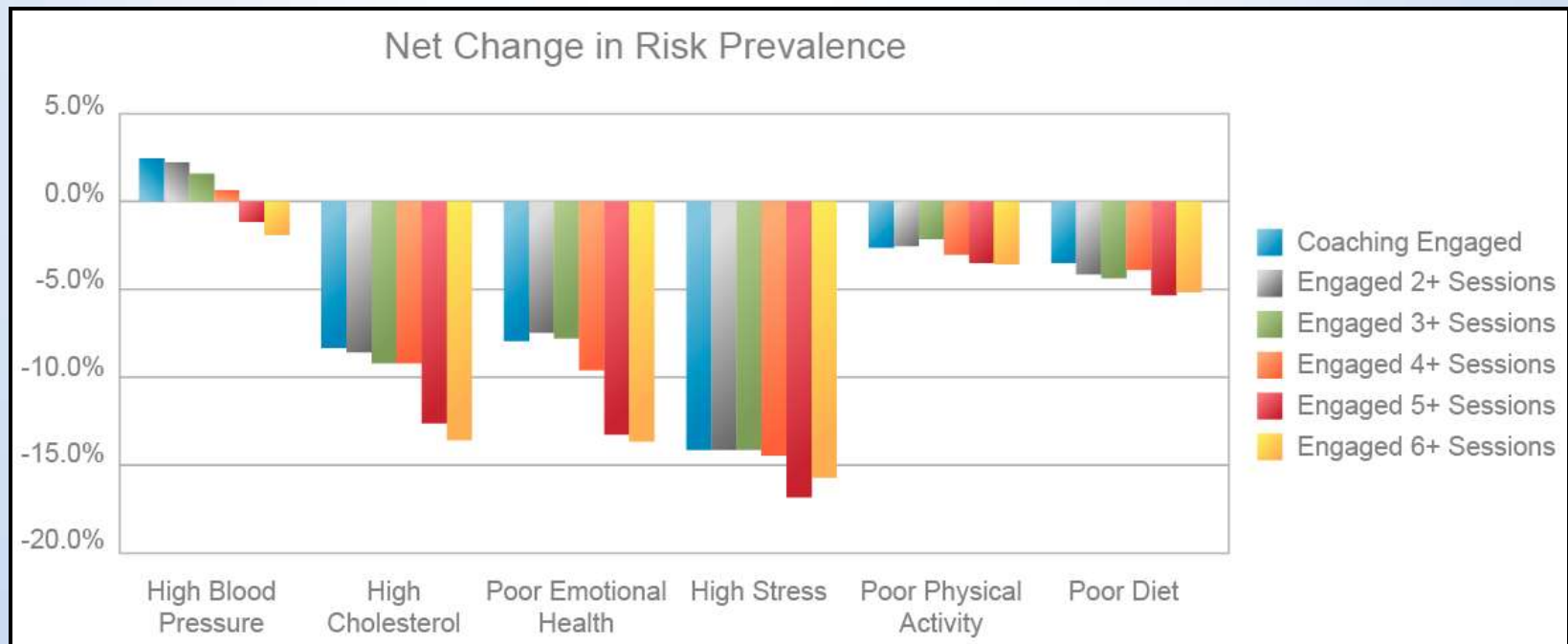


Allowed medical costs for cohort of individuals enrolled in VHM since 2009; $n_{NP} = 3,788$; $n_{NE} = 3,642$; $n_E = 2,759$

Health Coaching: Impacting Health Risks



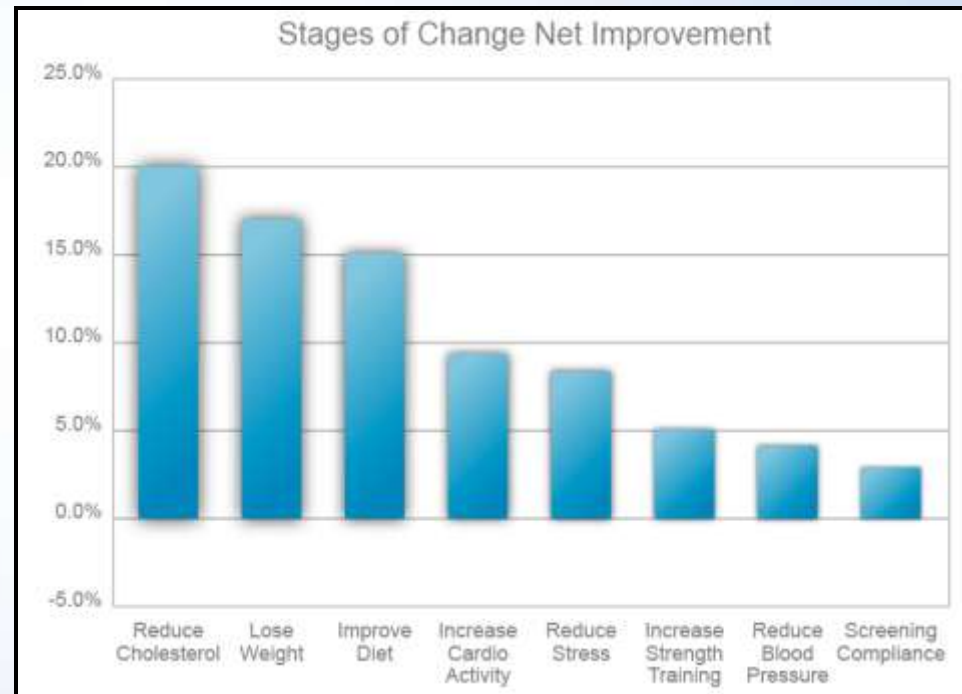
- WebMD health coaching participants reduced more risks on average than those who did not participate in coaching
- Individuals engaged in *more* coaching sessions seeing greater improvement in their modifiable health risk profile.



Health Coaching: Impacting Change Readiness



- Coaching participants who did not reduce key risk factors between 2010 and 2011 showed progression in readiness to change behavior.
- Readiness to change is an important precursor to actual behavior change.



Stage of change migration is assessed by comparing time-over-time HQ responses for those coaching-engaged individuals who reported the same risk in both program years to determine whether their stage improved, was maintained, or regressed.

Testimonials and Successes

“Since I began the program last summer and with the help of the HealthFlex program, I have lost 40 pounds. I have a ways to go, but I believe the HealthFlex program offers me the tools to meet my goals.”

—South Carolina

“I feel blessed that we have HealthFlex partnering with us in keeping ourselves healthy. Our goal is to stay active and healthy so we can enjoy many years watching our grandchildren grow.”

—Upper New York

“Without the HealthFlex Wellness Program, I know I would feel more stressed and drained, which quickly leads to that ‘un-well feeling.’ Exercising daily helps me to manage and reduce stress.”

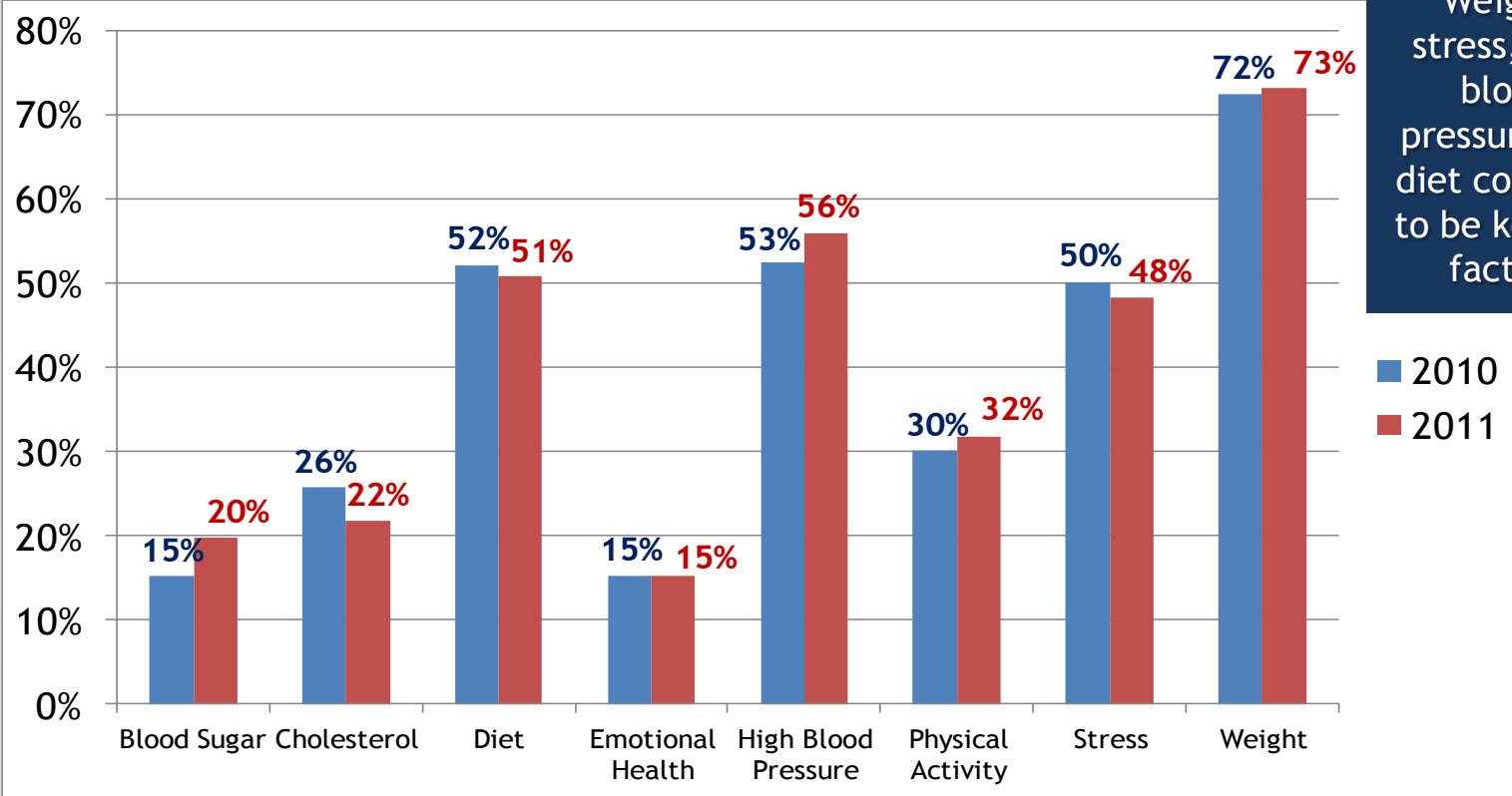
—Greater New Jersey



That's not to say that everything is
perfect...

Population Health Risks

Risks Identified by HealthQuotient 2010-2011



Weight, stress, high blood pressure and diet continue to be key risk factors

■ 2010
■ 2011

Note: 2011 was first year of importing Blueprint for Wellness data, which may explain increase in blood sugar, blood pressure and weight risks.

Population Health Risks

- Waist circumference and glucose most prevalent risk factors for metabolic syndrome
- Nearly one-quarter of those taking the BFW screening had 3+ risk factors, which indicates higher risk for metabolic syndrome

General Board of Pension & Health - Analysis of Lab and Biometric Data												
with Identification of Risk for Metabolic Syndrome (Three or More Risks)												
Number (n)	% At Risk METs	Systolic BP >=130; Diastolic BP >=85	Glucose >99	HDL <40 M; <50 F	Triglycerides >=150	Waist Circumference >40 M; > 35 F	Zero Risk Factors	One Risk Factor	Two Risk Factors	Three Risk Factors	Four Risk Factors	Five Risk Factors
6589	23.8%	27.9%	29.5%	24.7%	26.8%	43.5%	25.3%	23.9%	21.0%	13.7%	7.5%	2.6%

2012-2013 and Beyond: Continued Emphasis on Wellness

- Continue high engagement in assessment programs
 - Direct individuals to appropriate programs (information and automatic referral)
 - Provide aggregate data assessment for HealthFlex and plan sponsors
- Emphasize taking action
 - New incentive model for Virgin HealthMiles pushes action in those previously not engaged
 - Primary activity for HealthFlex wellness points is participation in WebMD health coaching

2012 Wellness Incentives

Blueprint for Wellness Screening = \$100 HealthCash

- April 1-July 31

HQ = Avoid \$250/\$500 higher deductible (2013)

- August 1-September 30

VHM quarterly activity targets = \$150 HealthCash

- Deadlines March 29, June 26, September 25, December 27

Wellness points accumulation = \$150 HealthCash

- January 1-December 31
- \$50 HealthCash if only 100-149 points by December 31
- Strong emphasis on WebMD health coaching

Partnering Toward Continued Success and Greater Outcomes





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