



Mini-HealthFlex Summit—April 2019



Wespath

BENEFITS | INVESTMENTS

Using Data to Drive Decisions

HealthFlex Plan

Agenda

**Program Data
Review**

Vaccinations

**Resources and
Toolkits**

Metabolic Syndrome

Cost Avoidance

Risk Reduction Drives Cost Avoidance: Isolating the Costs of Metabolic Syndrome

- 1177 participants had METs in the initial screening year.
- 302 / 1177 participants eliminated METs risk and sustained their no-risk status through 2018.
- The 302 participants accounted for 703 participant years without METs risk after starting with METs.
- **703 participant years at an average cost reduction of \$2151 per year, is a projected savings of \$1,512,153.**

Initial Screening Year With Annual Screenings through 2018	# With METs	# Changed to No METs Cohort Year 1 & Sustained Through 2018	# Changed to No METs Cohort Year 2 & Sustained Through 2018	# Changed to No METs Cohort Year 3 & Sustained Through 2018	# Changed to No METs Cohort Year 4 & Sustained Through 2018	Cumulative Participant Years No METs After Initial Year With METs	Average Difference in Annual Spend*	Projected Cost Avoided
2014	850	79	31	24	51	508	\$2,151	\$1,092,708
2015	114	21	9	11		92	\$2,151	\$197,892
2016	92	27	9			63	\$2,151	\$135,513
2017	121	40				40	\$2,151	\$86,040
2018								
TOTAL	1177	167	49	35	51	703	\$2,151	\$1,512,153

1177

302 Participants Eliminated METs Risk

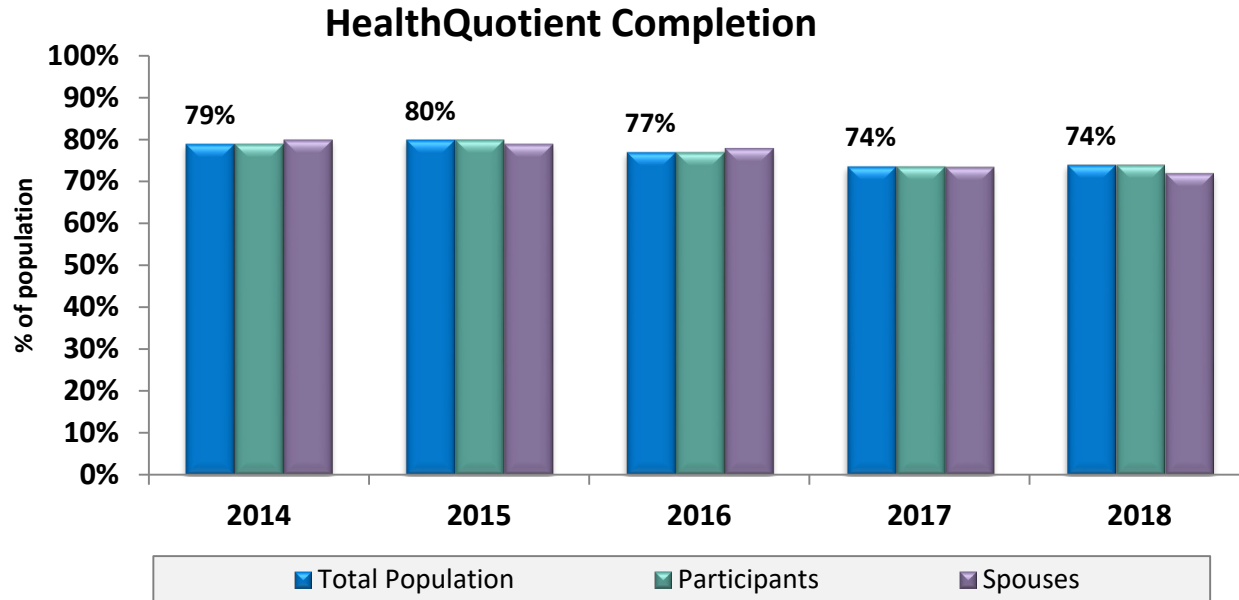
703



52 • CONFIDENTIAL

HealthQuotient

2019: 1535 HQ completions through March 31



WebMD Coaching

Cohort Analysis: Lifestyle Risks³

WebMD | health services

Risk	HQ Cohort			Coaching Cohort		
	2017	2018	Change	2017	2018	Change
Cigarette Smoker	1.2%	1.0%	-0.2%	1.7%	1.1%	-0.6%
Alcohol Use	1.1%	1.3%	0.1%	1.0%	0.8%	-0.1%
Poor Emotional Health	20.3%	20.6%	0.3%	36.7%	33.6%	-3.1%
High Stress	30.1%	30.4%	0.2%	47.1%	42.7%	-4.4%
High Weight	73.3%	74.4%	1.1%	89.7%	88.7%	-1.0%
Poor Physical Activity	28.7%	28.5%	-0.2%	37.9%	35.1%	-2.7%
Poor Diet	52.8%	51.5%	-1.3%	60.0%	56.6%	-3.4%
Poor Prevention	26.7%	24.9%	-1.9%	24.3%	20.8%	-3.4%
Poor Sleep	27.0%	27.3%	0.3%	36.0%	35.0%	-1.0%

Decreased Risk Prevalence

Increased Risk Prevalence

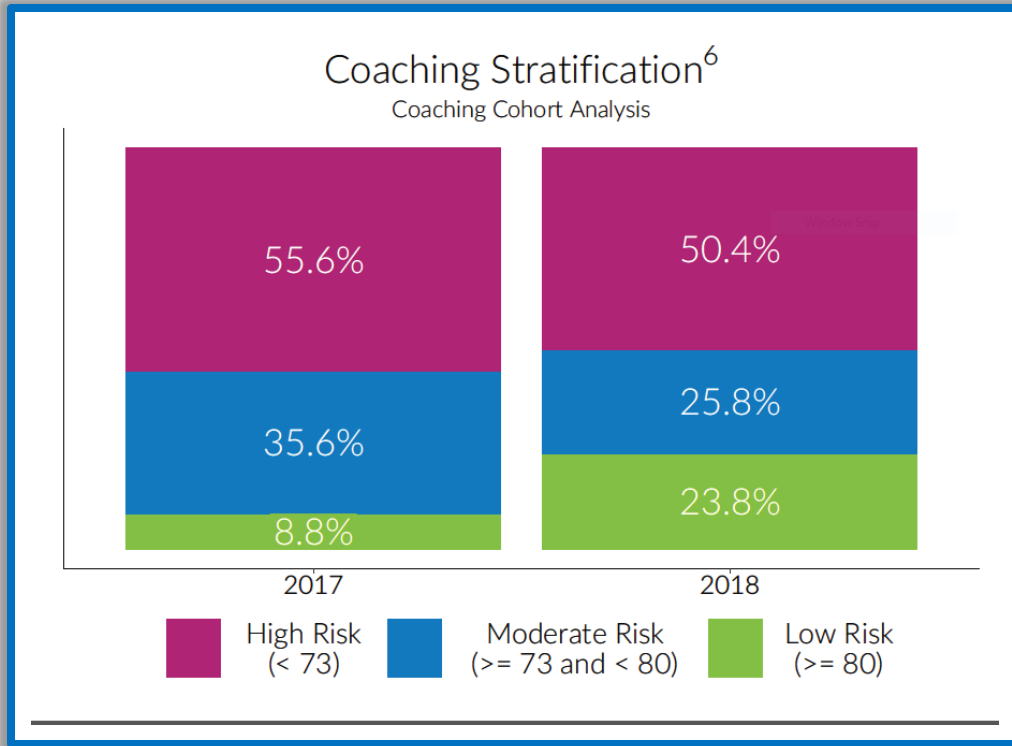
Coaching Cohort Went 9 for 9

- Decreases in all 9 Lifestyle Risks

4.4%

Reduction in Stress!

WebMD Coaching



Decrease in High and Moderate Risk

Wespath Health Coaching Testimonials

Good for Accountability

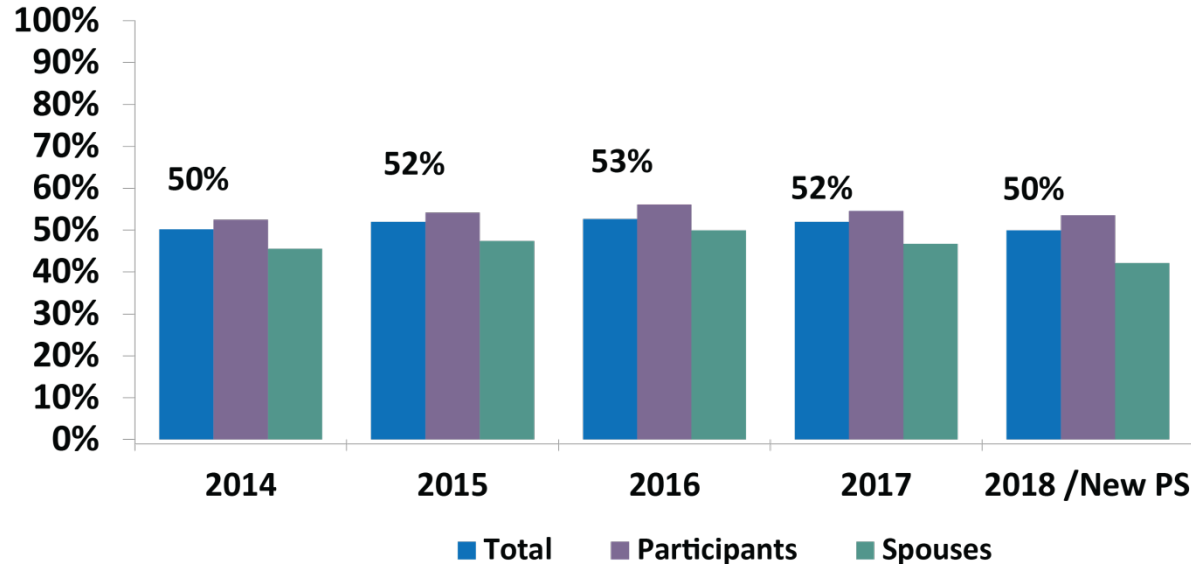
“ This was a great experience today. I really appreciate the opportunity to talk to someone who understands my situation and has given me some things to think about and work on.

I appreciate Amanda's encouragement and positivity and good suggestions for keeping me on track. ”



Blueprint for Wellness

BFW % Completers

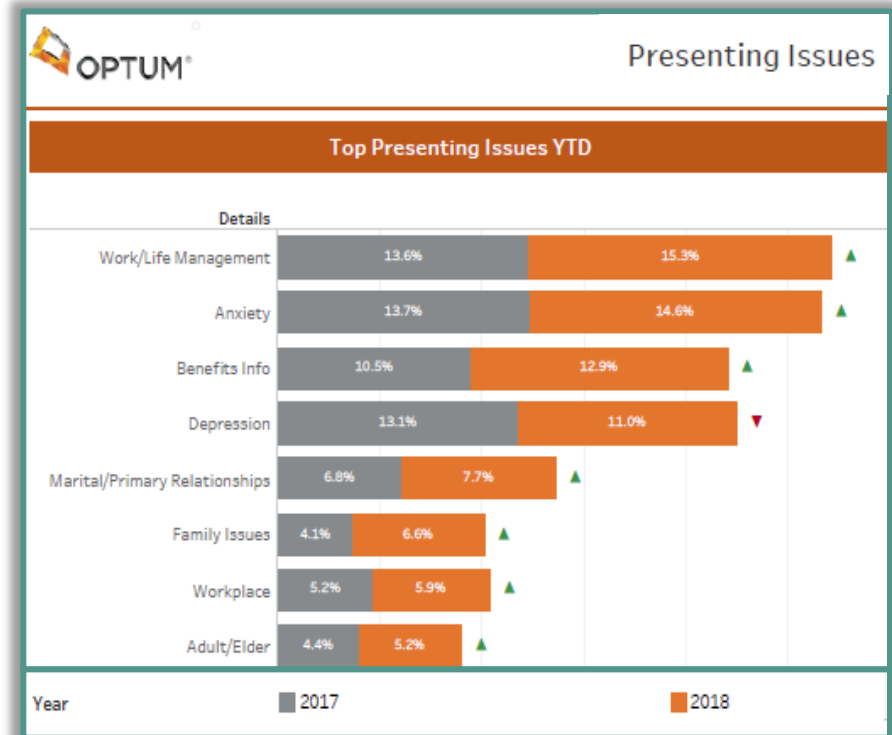


375 screenings
completed through
March 31

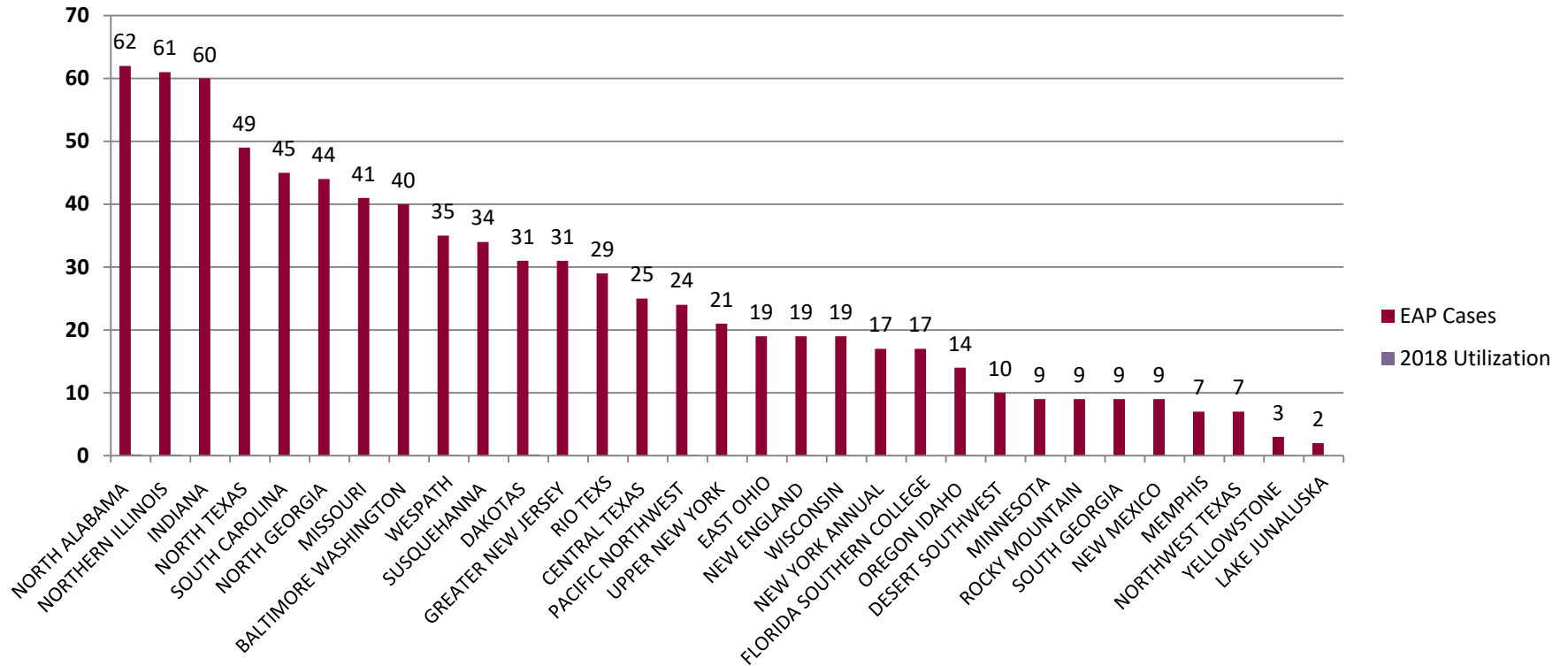
Employee Assistance Program

EAP Counseling Visits

- Unique users by plan sponsor
- By reason

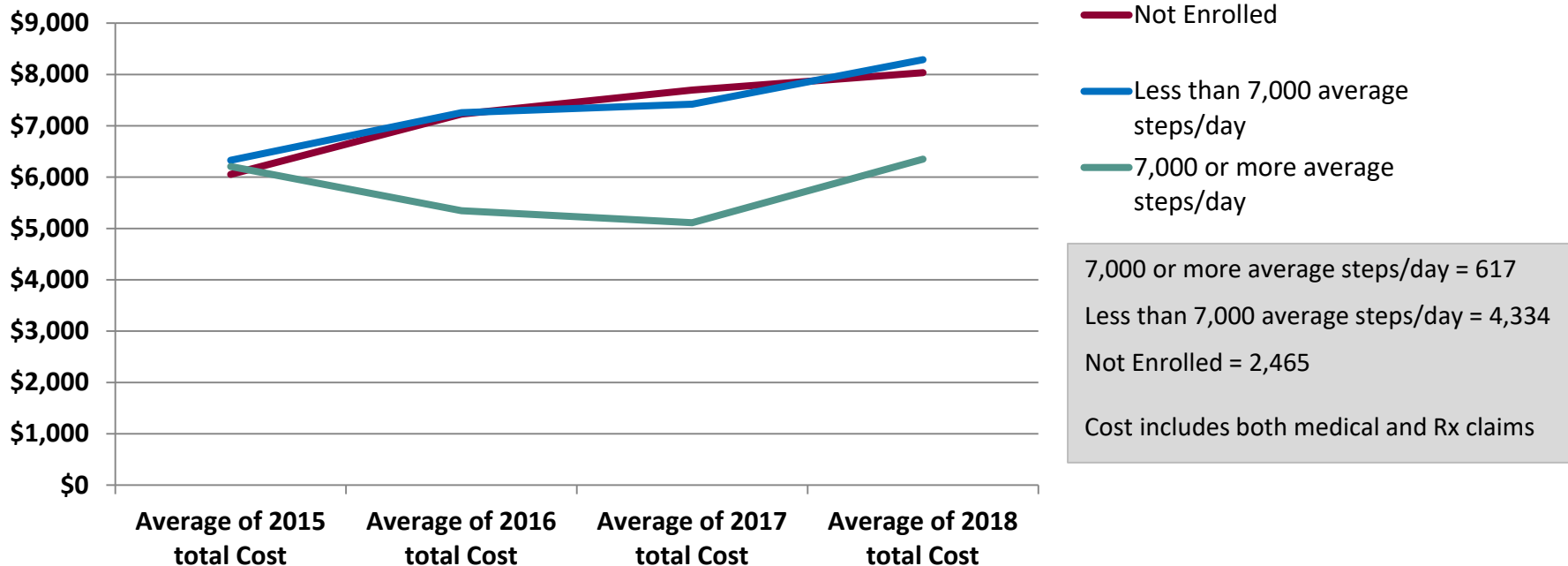


Employee Assistance Program



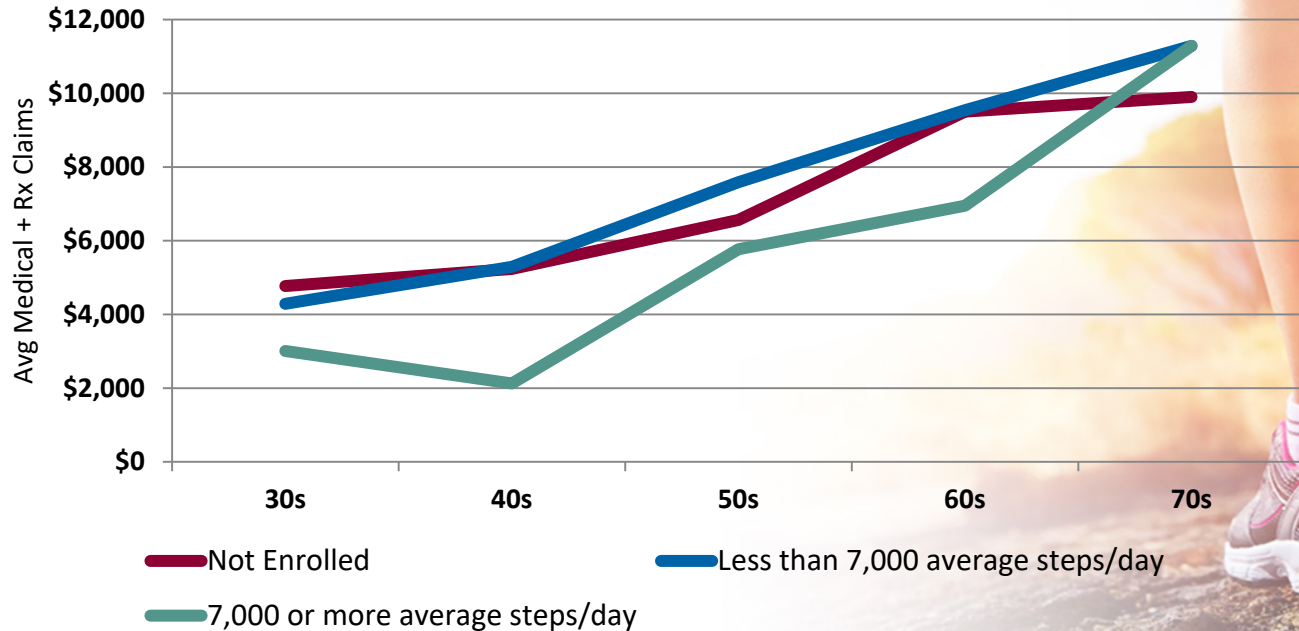
Virgin Pulse

Virgin Pulse Steps vs Claims



Virgin Pulse

Virgin Pulse Steps vs Claims by Age Group



Virgin Pulse

- Challenges results
- Recruiting for 2019
- Destinations



Activity increase due to challenge



Virgin Pulse

CORPORATE CHALLENGE 2: WALK THE WESLEY WAY

17% OF MEMBERS PARTICIPATED IN THIS CORPORATE CHALLENGE



717.7 M

TOTAL CORPORATE CHALLENGE STEPS

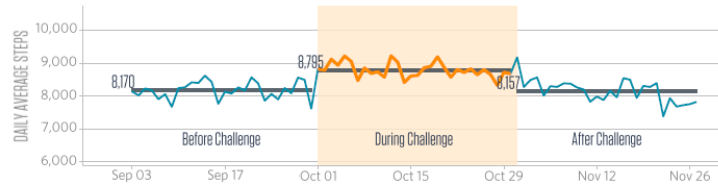
2,798

NUMBER OF PLAYERS THAT PARTICIPATED IN THIS CORPORATE CHALLENGE

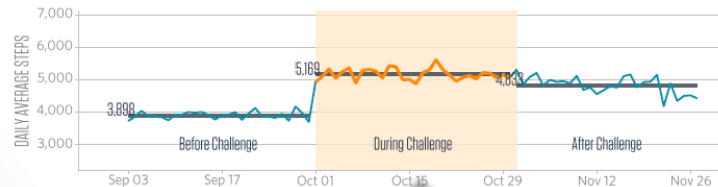
8,796

AVERAGE STEPS PER DAY

ACTIVITY TRENDS FOR ALL MEMBERS



ACTIVITY TRENDS FOR MEMBERS AVERAGING <5,000 DAILY STEPS



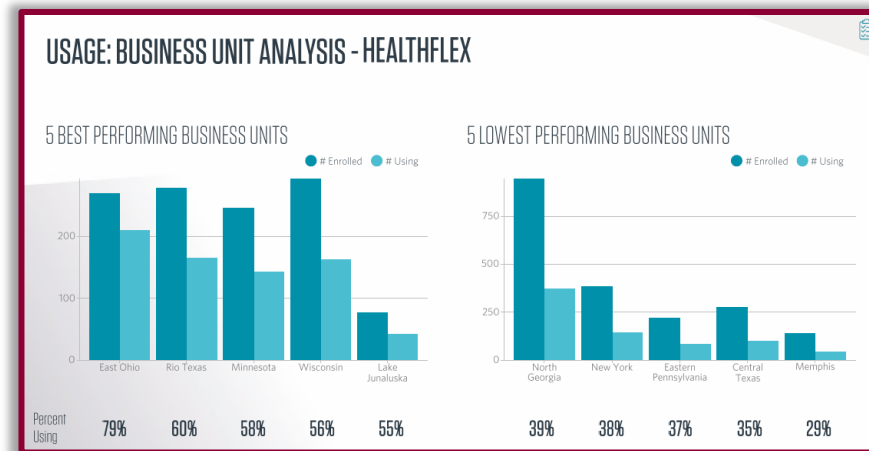
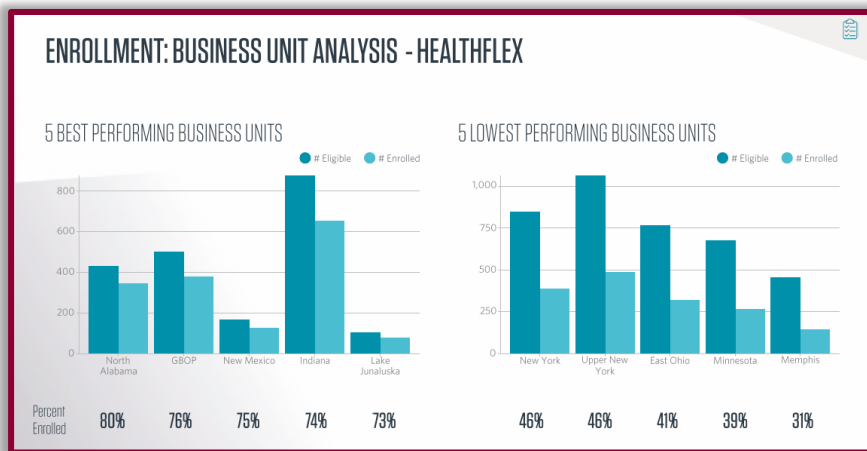
Activity increase due to challenge



TEAMWORK MAKES
ANYTHING
POSSIBLE

Virgin Pulse

Reveal High and Low Flyers



1. North Alabama
2. Wespath
3. New Mexico

4. Indiana
5. Lake Junaluska

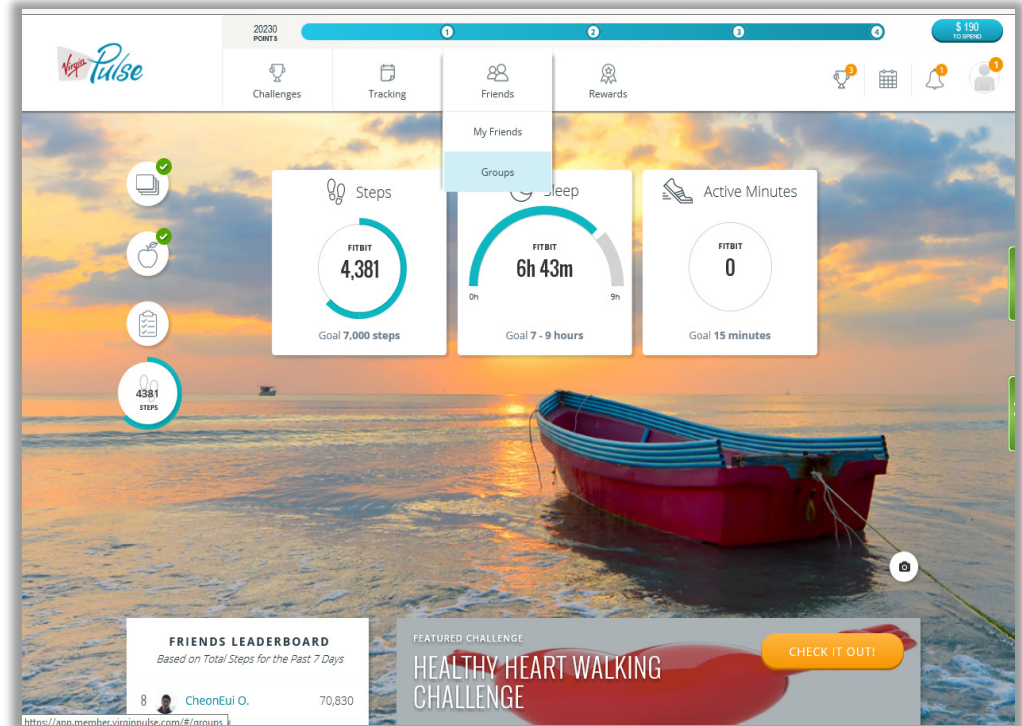
1. East Ohio
2. Rio Texas
3. Minnesota

4. Wisconsin
5. Lake Junaluska

Virgin Pulse Social

New Groups Functionality

- Invite specific people to group
- Make group private



Virgin Pulse Social

- Champions lead the way
- Two successful quarterly champions conference calls
 - 30 champions attended the meetings
 - Included conference staff, clergy, spouses



Virgin Pulse Charitable Contributions

Working to add UMCOR as a charitable contribution

- Directly from participants' Virgin Pulse accounts
- For all HealthFlex population
- For Virgin Pulse's book of business
- Available towards end of Q2



DONATE IT

Vaccinations

Lots of talk about vaccinations—can be polarizing

- **Children**—talk to pediatrician for schedule and discuss options
- **Adults**—doesn't stop once we are adults
 - More than flu, consider pneumonia, shingles, and it's better to get a tetanus booster from primary than in emergency room

Talk to your PCP about what is best for you!

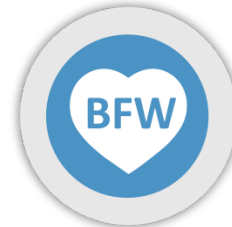
Resources and Toolkits

List materials available to them

- The key to access all of the information
 - Will be sent in advance of Annual Conference so that you can decide what materials you would like to offer your participants

Mini videos explaining how to

- Access well-being programs
- Take the HealthQuotient
- Register for Blueprint for Wellness, Virgin Pulse, NutriSavings
- See where to access HealthFlex benefits



Videos and Stretch Breaks

Follow us on our **SOCIAL MEDIA** pages for the following upcoming campaigns!



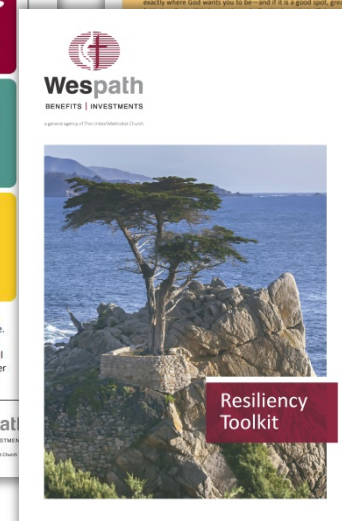
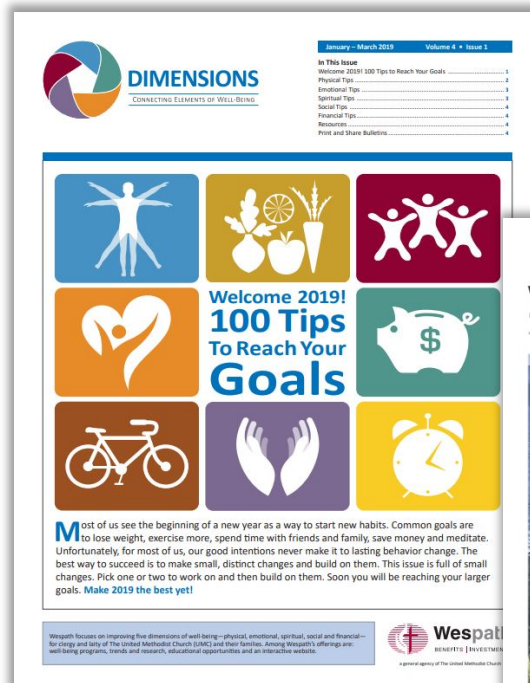
#StretchBreakSelfieUMC



#Wespathisms

Other Resources

- Dimensions newsletter and bulletins
- New Well-Being Toolkits
 - Resiliency
 - Healthy Annual Conference





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Mini-HealthFlex Summit—April 2019



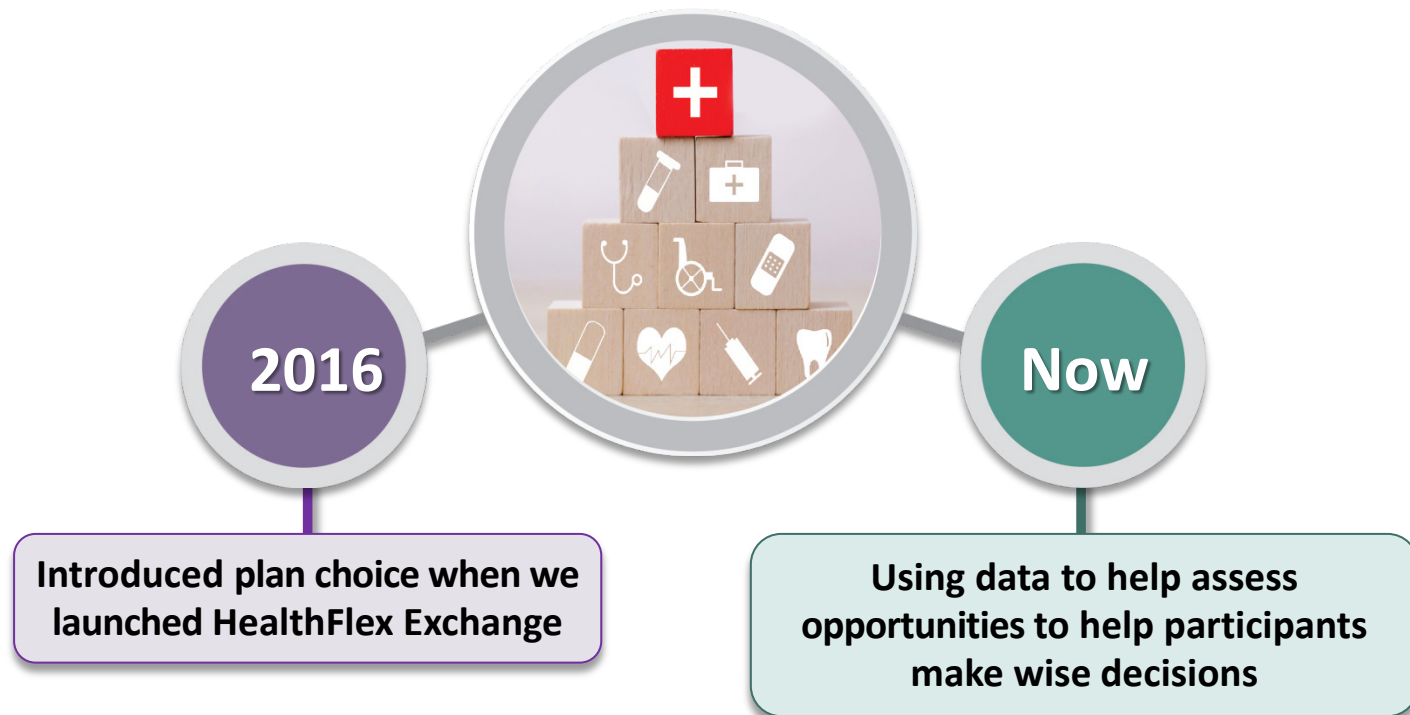
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BENEFITS | INVESTMENTS

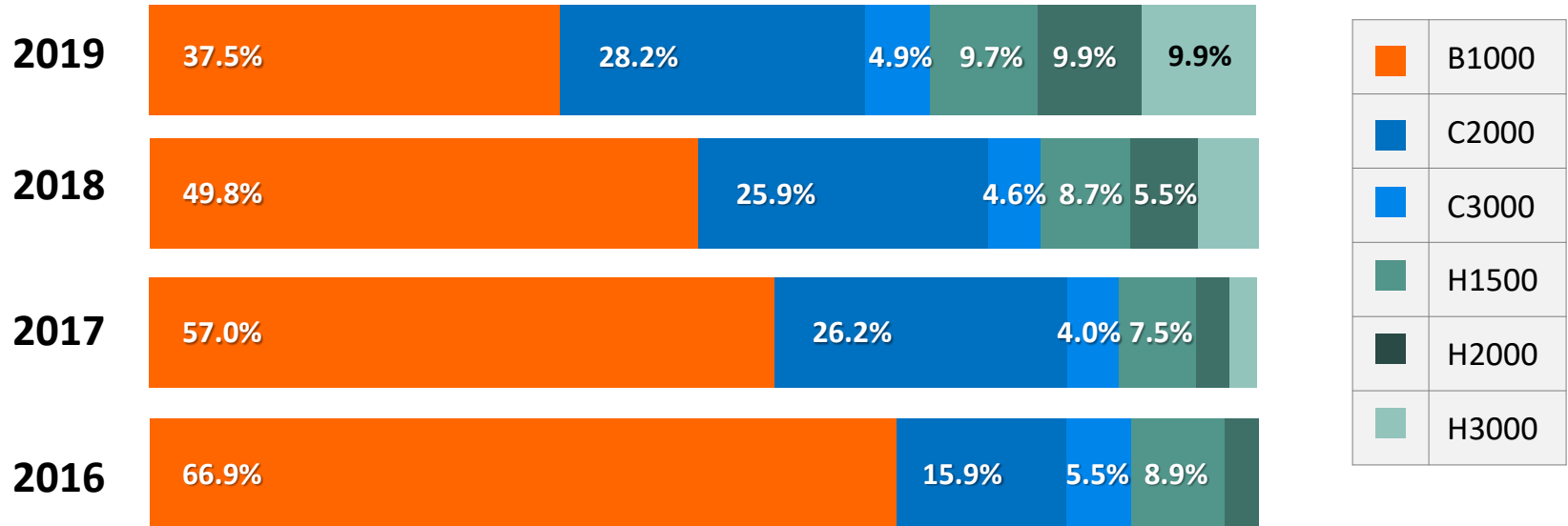
Using Data to Drive Decisions

HealthFlex Plan

HealthFlex Exchange—More Choice, More Support



Plan Migration in HealthFlex Exchange



Traditional plan sponsors have 83% enrollment in B1000 in 2019

What Is the Most Economical Plan Fit?



H3000 was highlighted by ALEX as the **most cost-effective plan** almost half the time!

Due to significantly **lower premium** and **only a slightly higher out-of-pocket maximum**, **H3000** can be most cost-effective for individuals with very low or very high costs



Other Factors When Choosing a Plan

**Financial Risk
Tolerance**

**Financial
Preparedness**

- **Do they have savings to offset large expenses?**
- **Are they contributing to health accounts?**
- **Are they planning ahead or just choosing lower monthly expenses?**

H2000/H3000 Buy-Down Scenarios

Example: Participant has \$1500 in out-of-pocket expenses in B1000 →
Now considering buying-down into a silver or bronze HSA plan

\$260/monthly premium difference
between B1000 and H2000 for
family coverage (**\$3,120/year**)

Logical contribution could be:



$$\begin{aligned} & \$3,120 + \$1,500 = \\ & \mathbf{\$4,620} \end{aligned}$$

\$440/monthly premium difference
between B1000 and H2000 for
family coverage (**\$5,280/year**)

Logical contribution could be:

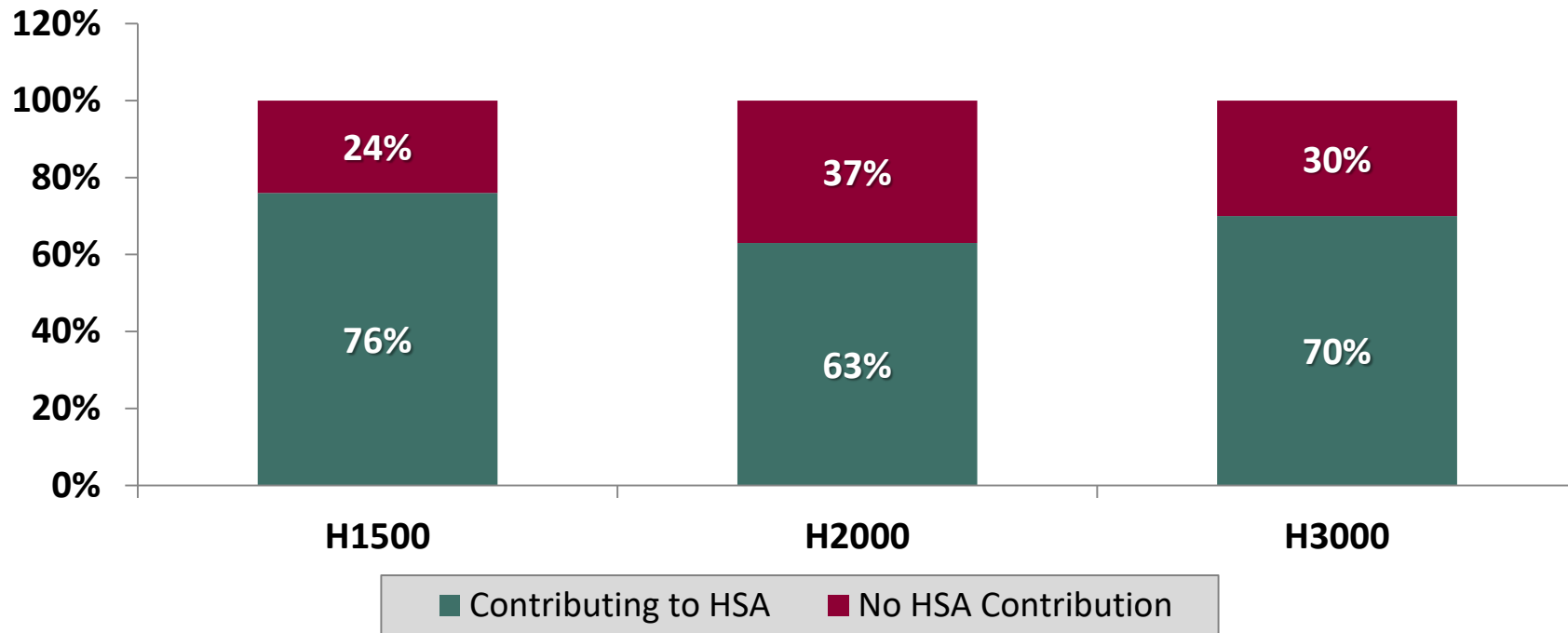


$$\begin{aligned} & \$5,280 + \$1,500 = \\ & \mathbf{\$6,780} \end{aligned}$$



Are HSA Plan Participants Planning Ahead?

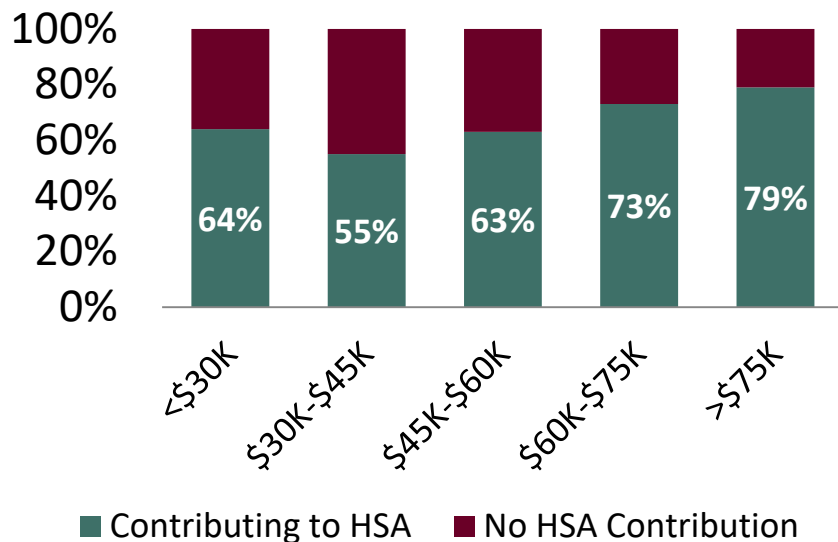
Personal HSA Contribution Status by Plan



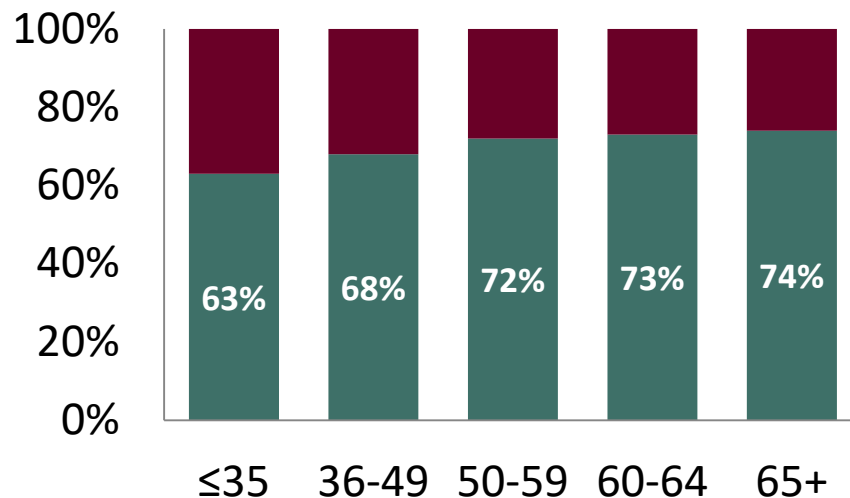
Population (n= 1,066) includes individuals eligible to contribute to HSA in 2018

Personal HSA Contribution—Age and Salary

Contributions by Salary

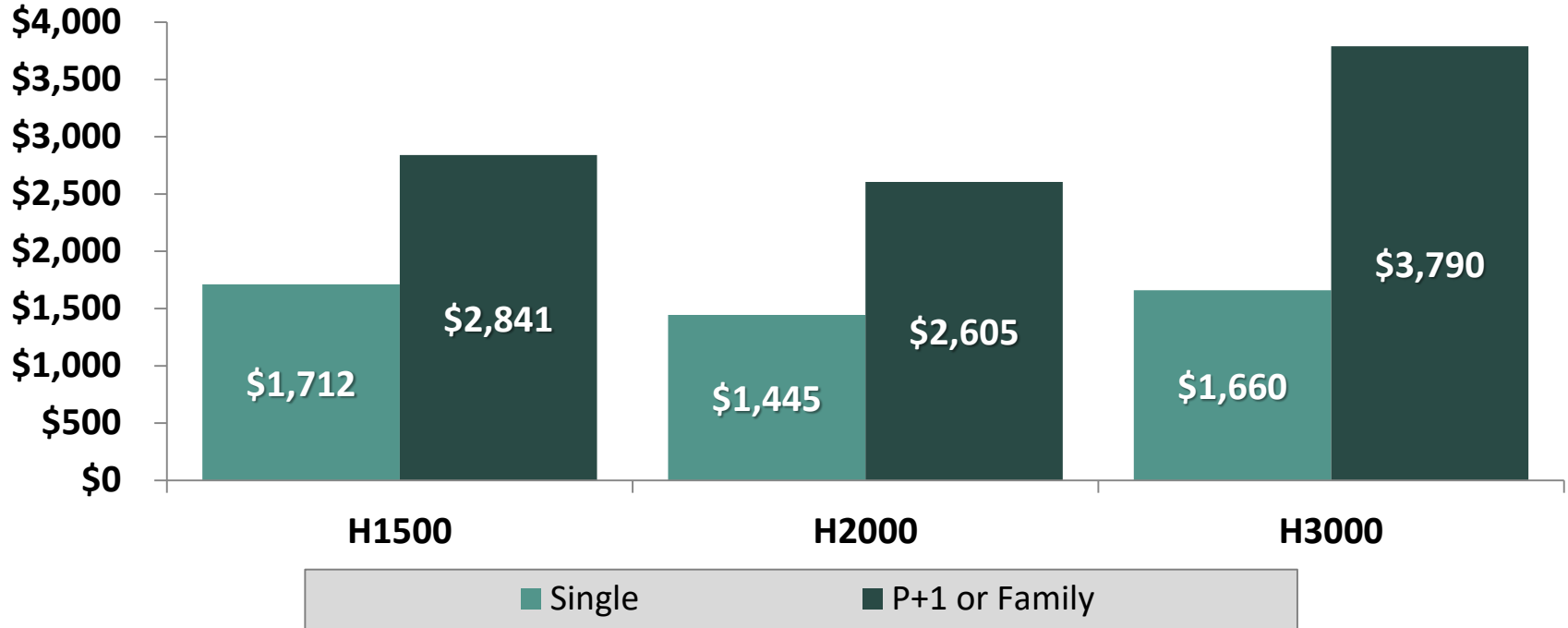


Contributions by Age



Population (n= 1,066) includes individuals eligible to contribute to HSA in 2018

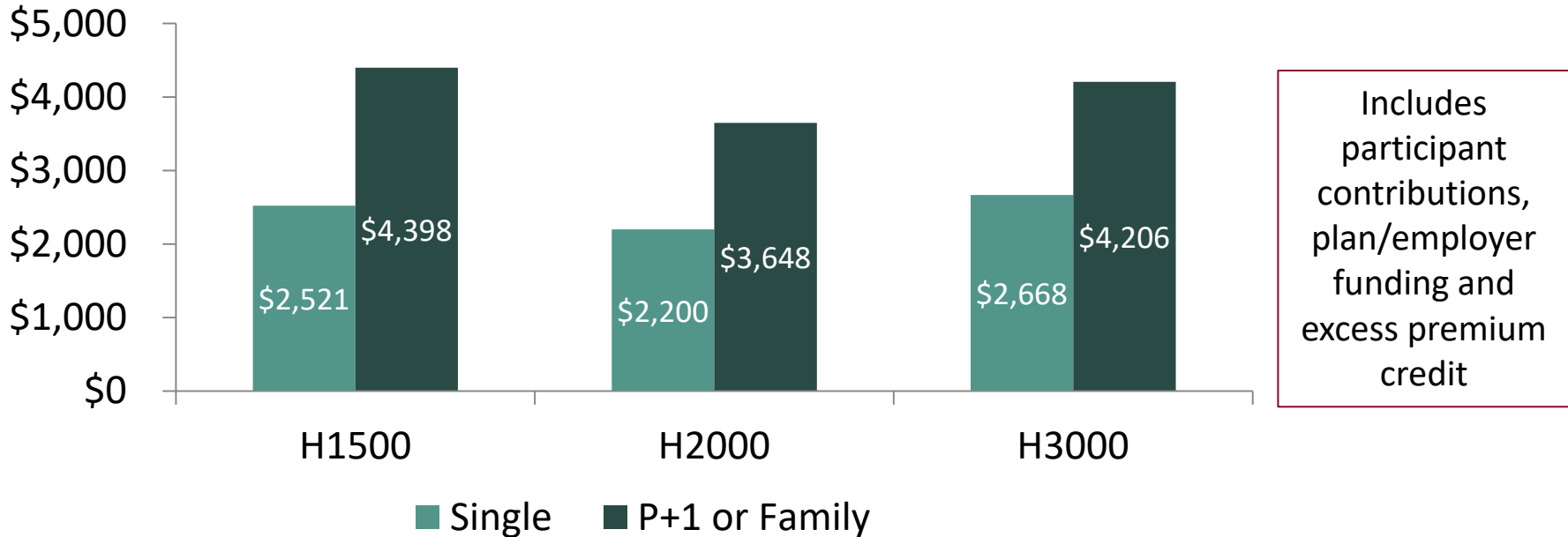
Average Participant HSA Contribution



Population (n= 737) includes individuals eligible to contribute to HSA in 2018 and excludes individuals with \$0 personal contributions

Total HSA Contributions By Plan

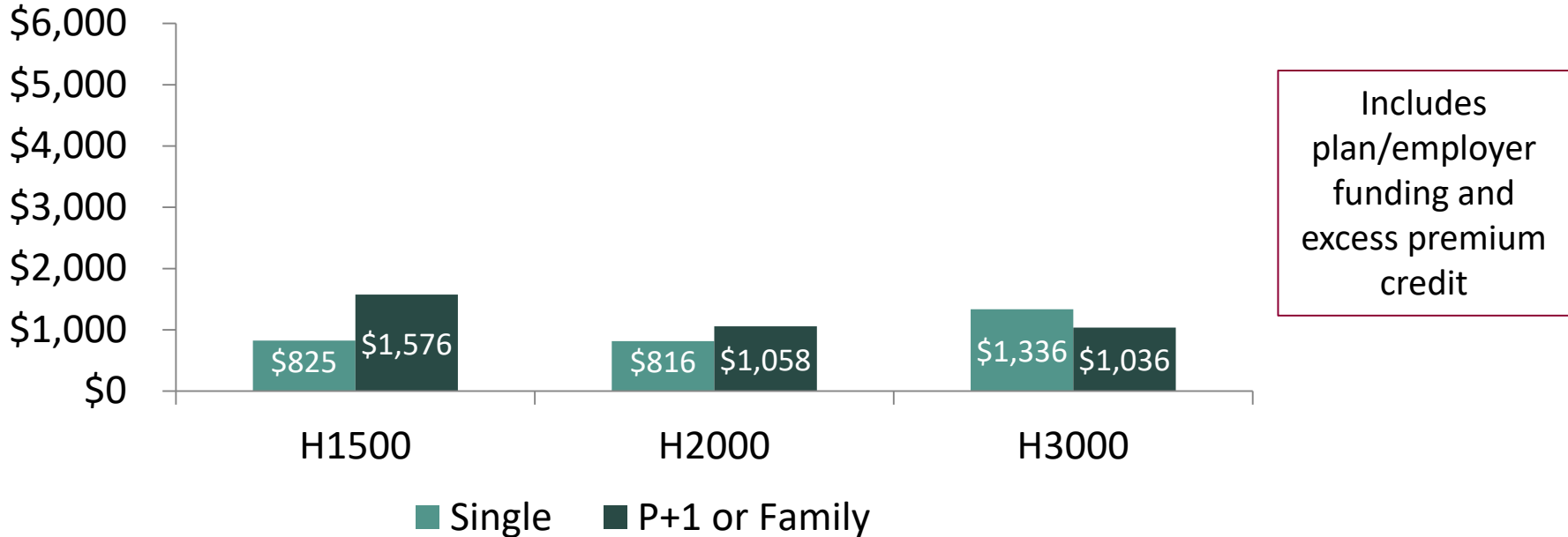
Individuals with >\$0 Participant Contribution



Population (n= 737) includes individuals eligible to contribute to HSA in 2018 with >\$0 personal contribution; averages include \$0 employer funding
Similar trends by age/salary as with contribution percentages

Total HSA Contributions By Plan

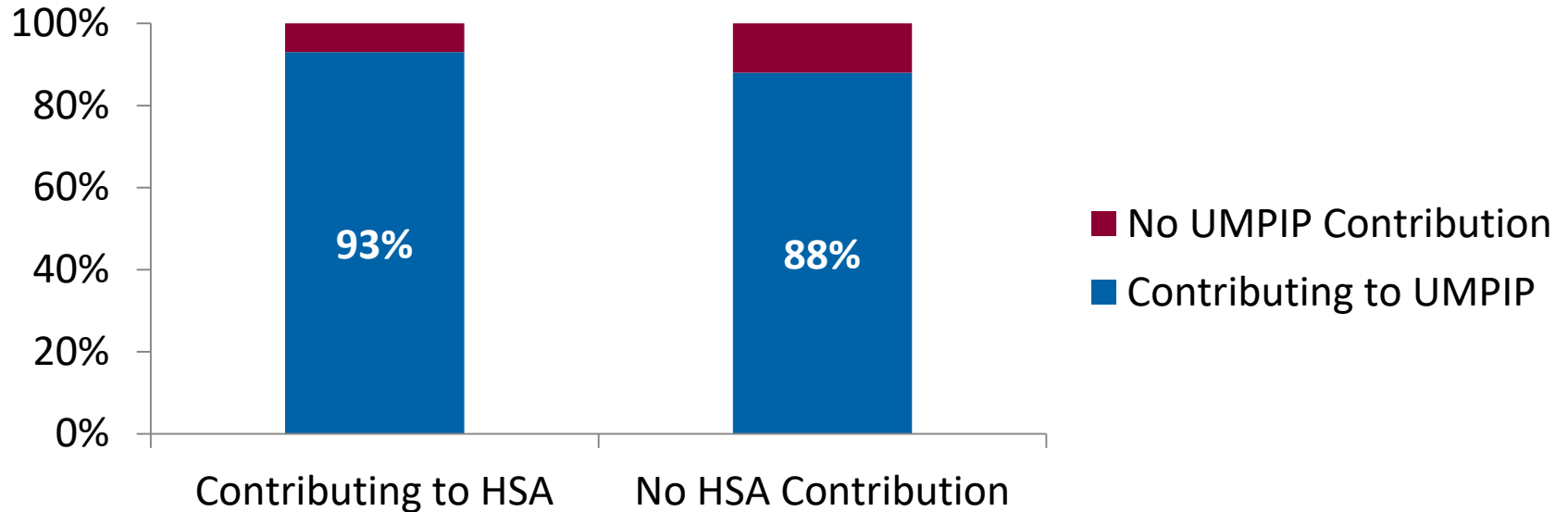
Individuals with No Participant Contribution



Population (n= 329) includes individuals eligible to contribute to HSA in 2018 with \$0 personal contribution; averages include \$0 employer funding
Similar trends by age/salary as with contribution percentages

Relationship Between HSA and UMPIP Contributions

Those who contribute to HSAs contribute more, and more frequently to UMPIP

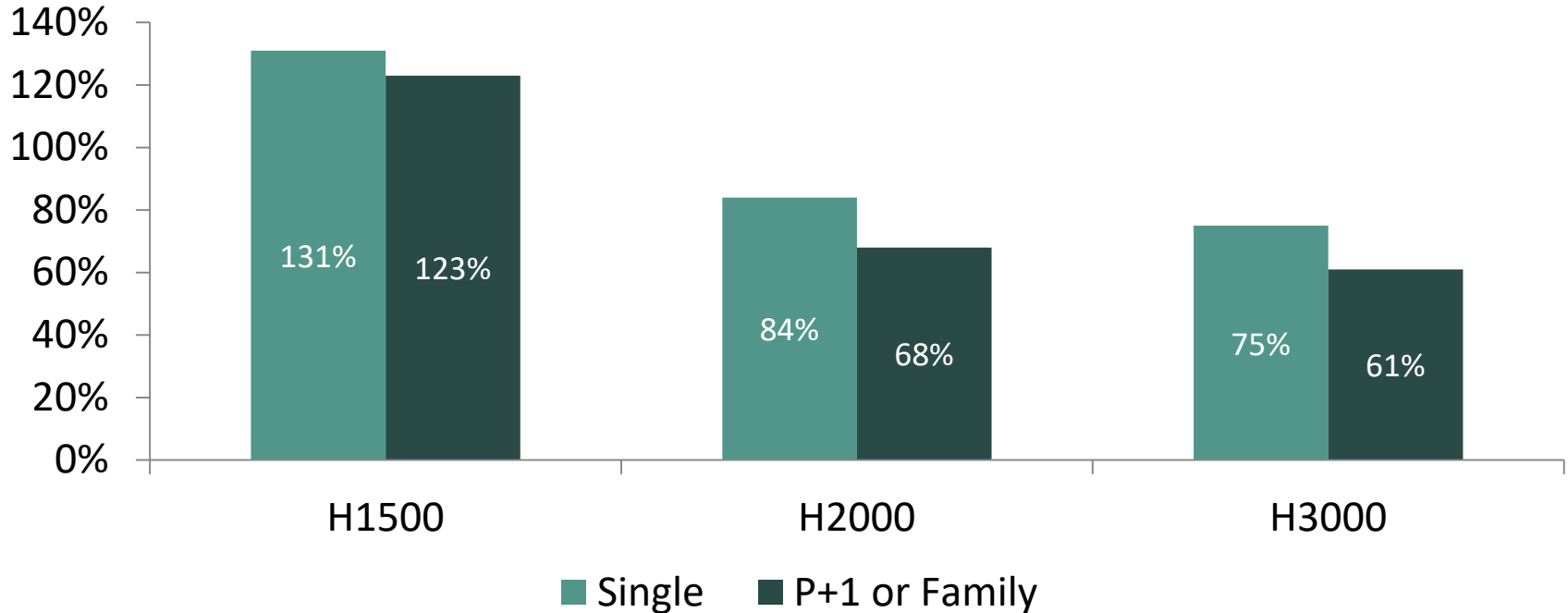


Average % UMPIP Contribution for HSA contributors = 6.42% vs. 5.05% for non-contributors

Is It
ENOUGH?

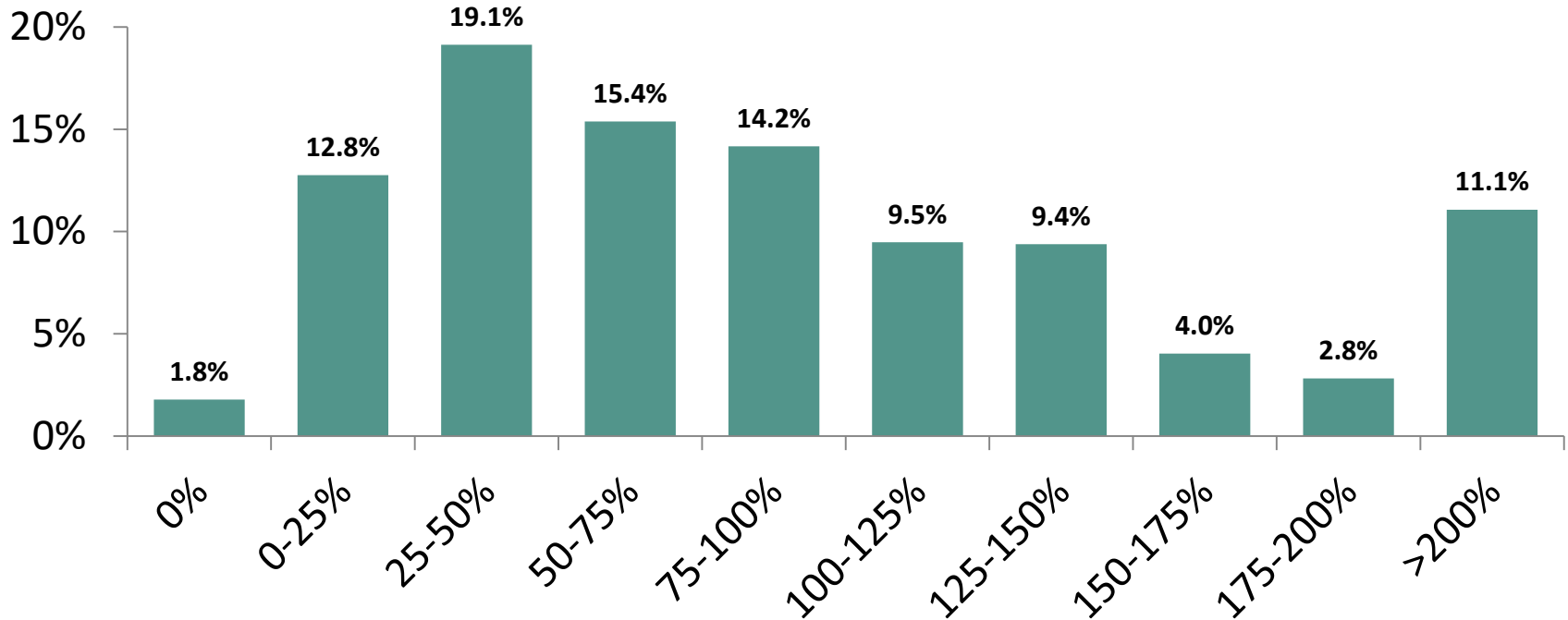


What Percent of the Deductible Is Funded?



Population (n= 1,066) includes individuals eligible to contribute to HSA in 2018;
Calculates the average of each individual's available HSA funding as a % of their plan deductible

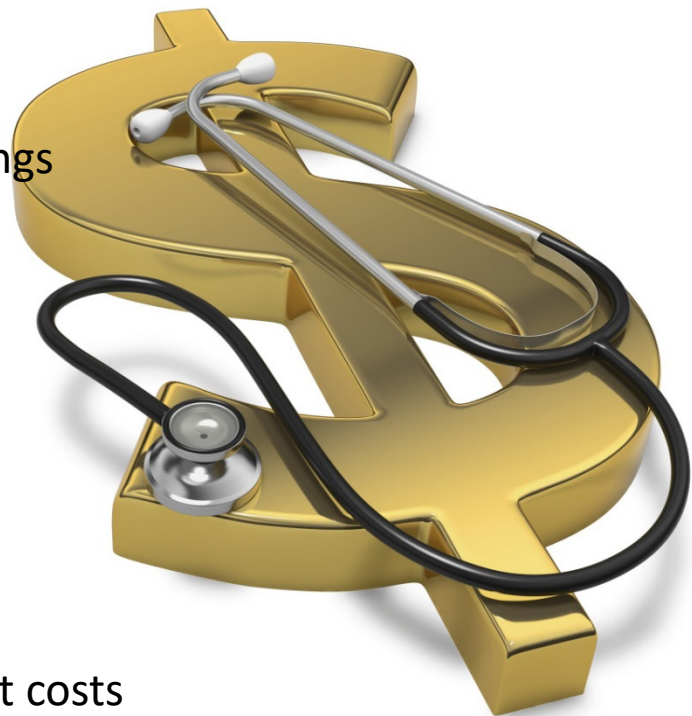
What Percent of the Deductible Is Funded?



Population (n= 1,066) includes individuals eligible to contribute to HSA in 2018;
Calculates the average of each individual's available HSA funding as a % of their plan deductible

What Actions are Needed?

- Education—early and often
 - Buying down doesn't mean pocketing all the savings
 - Engagement requires planning ahead
- Personalized outreach
 - Younger individuals and those with lower salaries
 - Individuals in the H2000 and H3000
 - Individuals contributing <50% of the deductible
- Further analysis
 - How does HSA funding match actual out of pocket costs





Are Account-Based Plan Participants Avoiding Care?

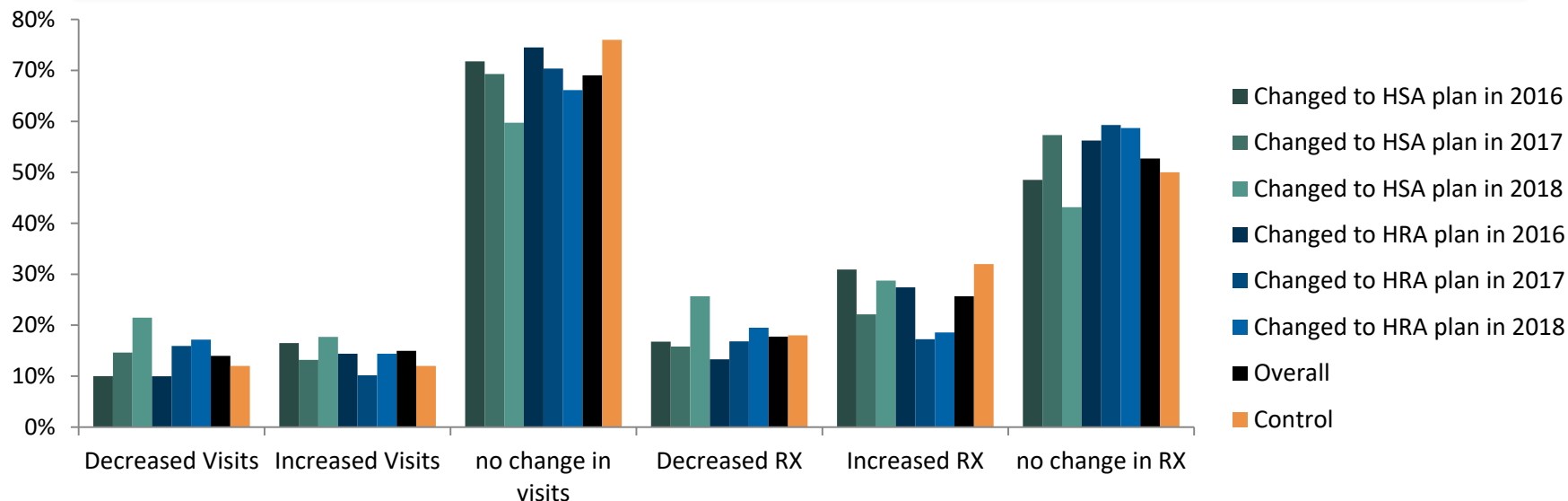
Cohort Analysis—B1000 to HRA/HSA Plans

Groups analyzed:

- 1089 individuals who moved from B1000 to an HRA plan in 2016
- 765 individuals who moved from B1000 to an HRA plan in 2017
- 457 individuals who moved from B1000 to an HRA plan in 2018
- 364 individuals who moved from B1000 to an HSA plan in 2016
- 227 individuals who moved from B1000 to an HSA plan in 2017
- 438 individuals who moved from B1000 to an HSA plan in 2018

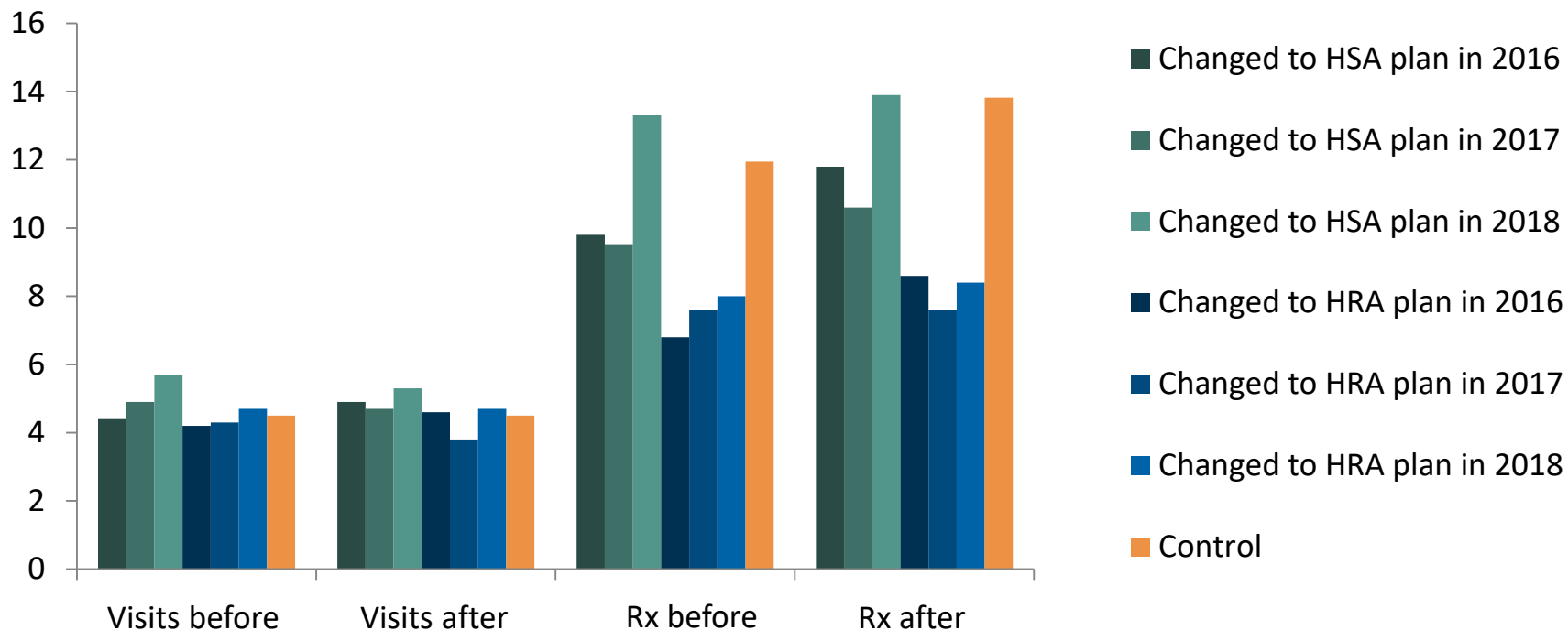
Did Benefit Use Decrease in HRA/HSA Plans?

On average, those moving to HRA/HSA plans did not decrease their utilization



No change includes +/- 2 visits or 2 prescriptions; For most cohorts, less than 20% of members decreased visits and Rx fills.

Did Benefit Use Decrease in HRA/HSA Plans?



Cohort Analysis—Gold to Silver or Bronze plans

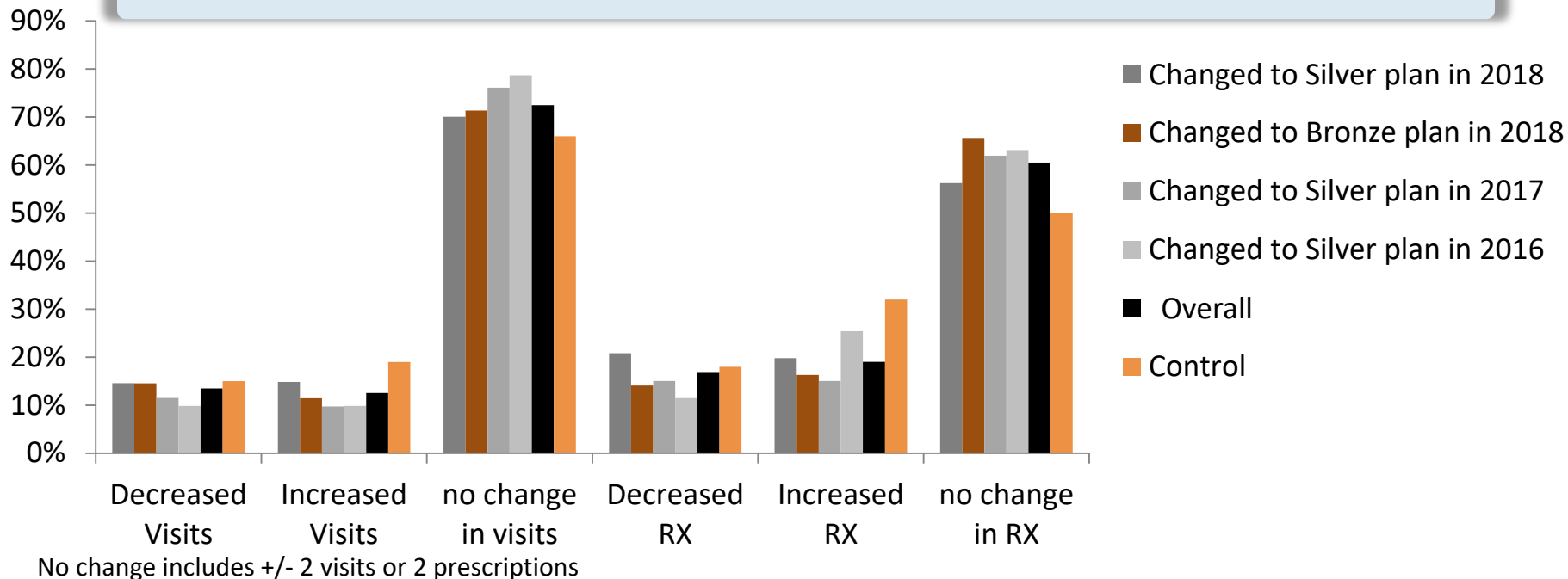
Groups Analyzed:

- 122 individuals who moved from gold to silver plans in 2016
- 113 individuals who moved from gold to silver plans in 2017
- 386 individuals who moved from gold to silver plans in 2018
- 228 individuals who moved from gold to bronze plans in 2018

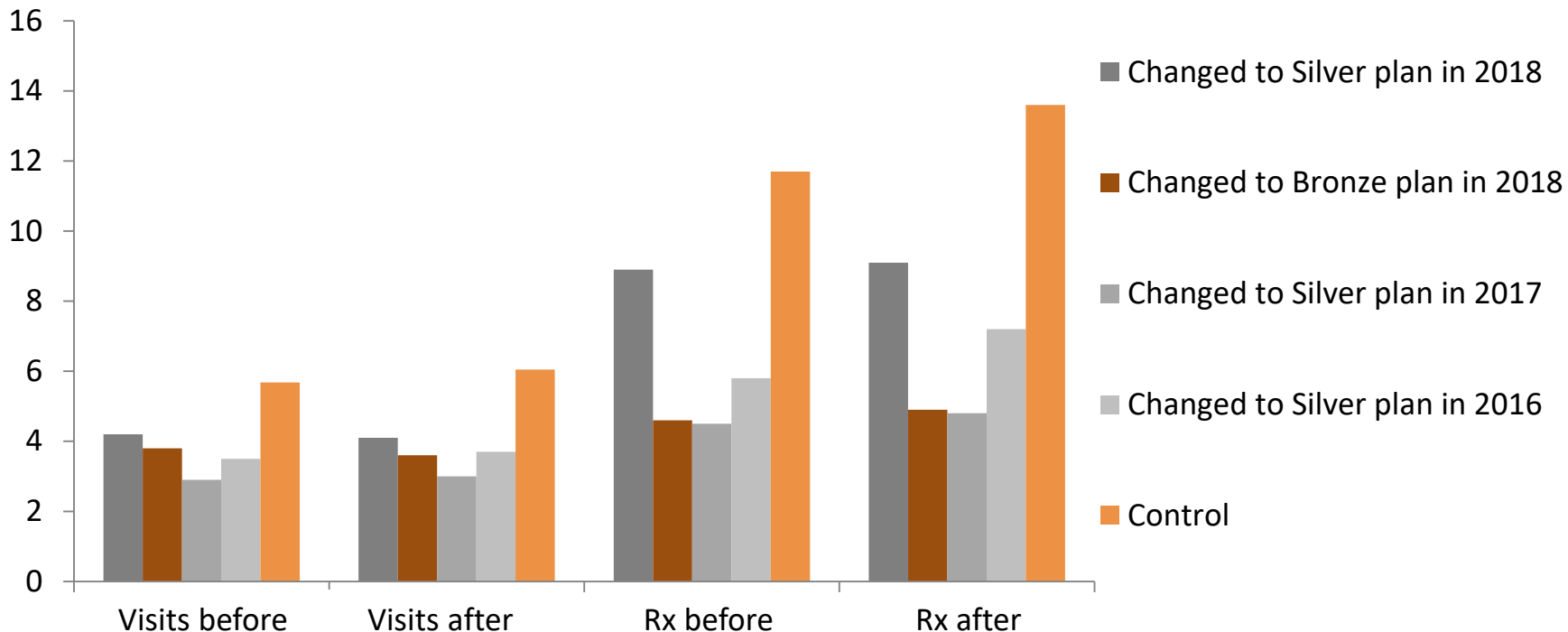
Other cohorts had fewer than 100 individuals and were not included

Did Benefit Use Decrease in Silver/Bronze Plans?

On average, those moving to Silver/Bronze plans did not decrease their utilization



Did Benefit Use Decrease in Silver/Bronze Plans?



Further Analyses

- Assess preventive screening and wellness compliance between plans
- Deeper analyses of individuals with chronic conditions (e.g. diabetes, heart disease)
- Opportunities for personalized outreach and education





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