ili STAYWELL ®

GIB Presentation

Agenda

- Year 2 Key Findings
 - Key Participation Rates
 - Health Risk Prevalence
 - Risk Change
 - Executive Summary
- 2019 Goals and Objectives
- Current Program Performance
- Incentive Benchmarking
- Review Next Steps

Key Participation Rates



Incentives Drive Participation

2018: \$150 gift card for completing the health assessment (HA), screening and 1 well-being activity by Oct. 19

- Active employees, retirees and covered spouses were eligible
- 2 screening options: onsite or health care provider form
- 2 gift card redemption options: online (electronic) or hard card (mailed)
- Multiple well-being activity options:
 - Telephonic health coaching (complete 3 calls in lifestyle or disease management)
 - Million Steps Challenge (achieve 1 million steps)
 - Self-directed coaching (complete 2 online modules)
 - 21-Day Meditation (complete 21 days)
 - Daily Dash (complete 20 dashes)
 - Custom quiz on health benefits/preventive care (answer 12 of 20 questions correctly)

2018 Participation Rates

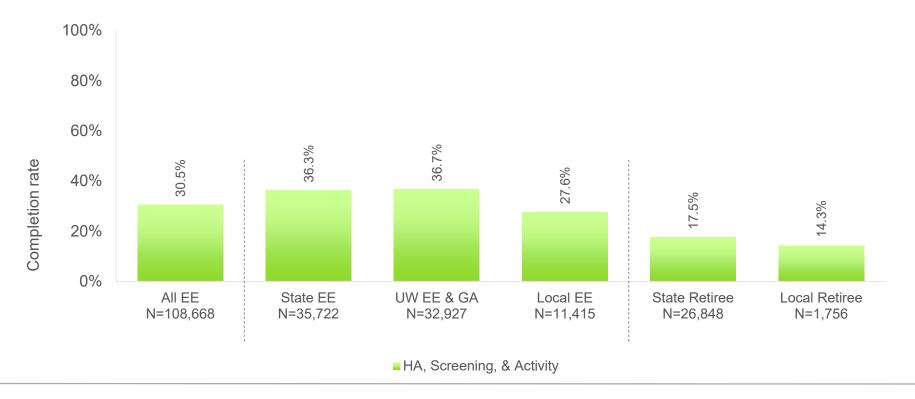
- 2018 goal was 35% participation in all three activities (health assessment, biometric screening, well-being program).
- 2018 actual was 29% participation in all three activities for the overall population (employees, spouses and retirees).
- 2018 actual was 35.2% participation for employees and spouses only (retiree participation was about 17%).
- In 2018, 29.9% of the population completed two activities (health assessment and screening); this is higher than the 2017 rate of 25.4%.

Screenings:

 Two screening options were available: 44% of the population participated in an onsite event, 56% completed a physician form; split was 50/50 for employees only.

Three Step Completion Participation

- State and UW/GA employees had the highest overall engagement in all activities in 2018 at approximately 36%.
- In looking at just the employees and spouse groups, 35.2% completed the three steps. The retiree average was about 17%.



LM Telephonic Coaching Participation*

- Eligibility for coaching, which is based on risk, was 64% for the population and similar to the book-of-business (BoB)
- Although the average registration rate is lower than the BoB (16% vs. 24% BoB), call completion rates are similar**.
- Opportunity: Increase registration rate for state and local groups. The retiree populations have much higher registration and engagement rates.



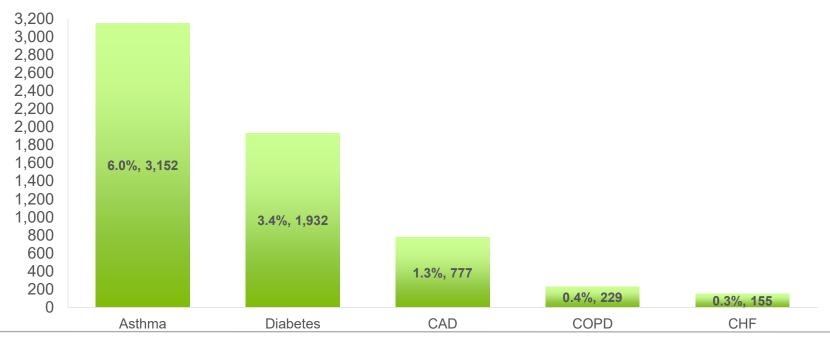
^{*}Shown as a percent of LM coaching eligible.



^{**}The 3+ call completion rate for WI should continue to increase. At the time of this report, WI employees completed an average of 2 calls vs. 3 for the BoB.

Prevalence by condition*

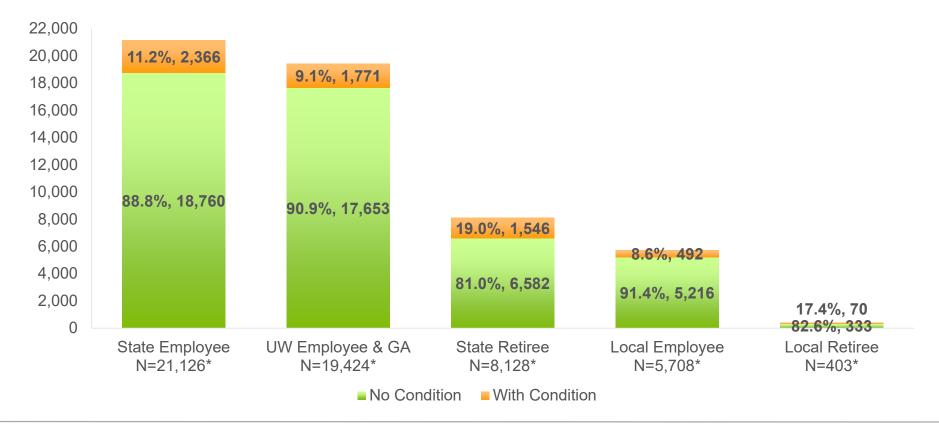
- 11.4% (N=6,245) of 2018 YTD HA completers have at least 1 of 5 conditions.
- The StayWell book of business, which identifies prevalence from claims data, is 8% to 9%, so WI is trending much higher.
- Asthma was the most prevalent condition, followed by diabetes and CAD.
- COPD and CHF prevalence was low and consistent with U.S. population rates.
- In our claims-based book of business, diabetes was the most common condition; WI is unique in that diabetes is the second-most prevalent condition.



^{*}Participants with multiple conditions are assigned one primary condition based on the following hierarchy: CHF (congestive heart failure), CAD (coronary artery disease), COPD (chronic obstructive pulmonary disease), diabetes, asthma.

Prevalence by Group

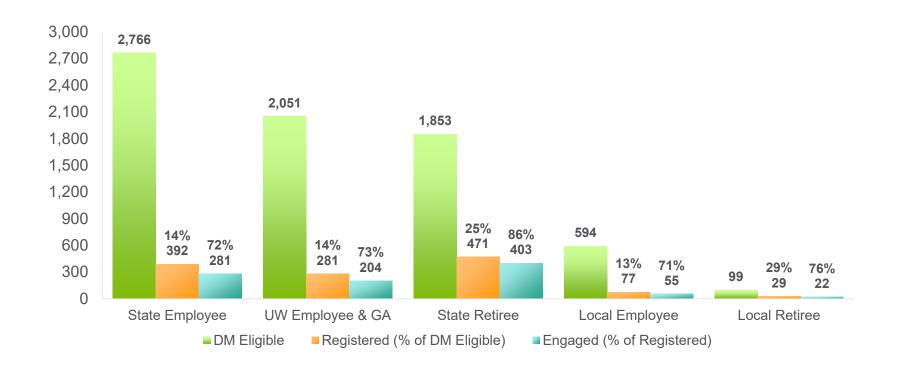
- As expected based on age, prevalence is greatest for retirees (19% state,17% local).
- Prevalence is similar among employee groups (ranges from 9% to 11%).



^{*}HA completions by active participants as of each quarter-end.

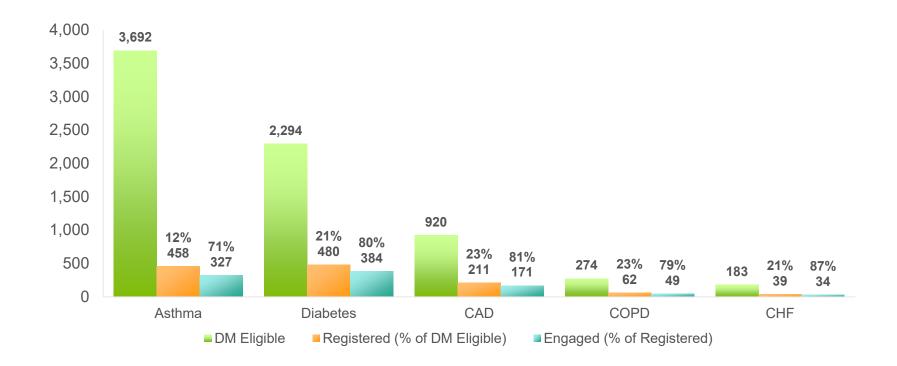
Engagement by Group

- Registration is highest for retirees (26% average); the employee average is 14%.
- Engagement is highest for state retirees (86% average); the employee average is 72%.



Engagement by Condition

- Registration is lowest for the most prevalent condition (Asthma, 12%), but averages 22% for all other conditions.
- Engagement is 71% for Asthma but 80%+ for the other conditions.



Health Risk Prevalence



Employee Group Details

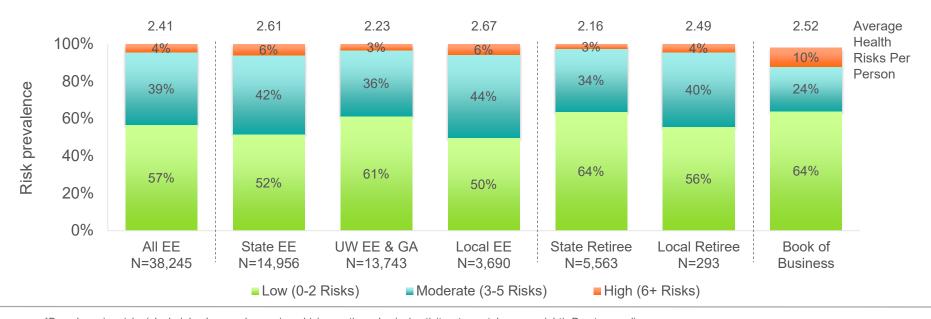
 The active employee groups were similar in age and sex distribution to the StayWell BoB for government employers

	All EE	State EE	UW EE & GA	Local EE	State Retiree	Local Retiree	Book of Business*
Eligibles	108,676	35,728	32,941	11,414	26,837	1,756	
HA participants	38,245	14,956	13,743	3,690	5,563	293	130,528
Average age	46.6 years	43.1 years	42.0 years	44.1 years	68.2 years	63.4 years	45.2 years
Sex (M / F)	42% / 58%	38% / 62%	41% / 59%	49% / 51%	48% / 52%	47% / 53%	38% / 62%

^{*11} clients in the industries of administration, education and health care; data primarily represents active employees. Due to rounding, percentages may not add to 100.

Employee Overall Risk Prevalence*

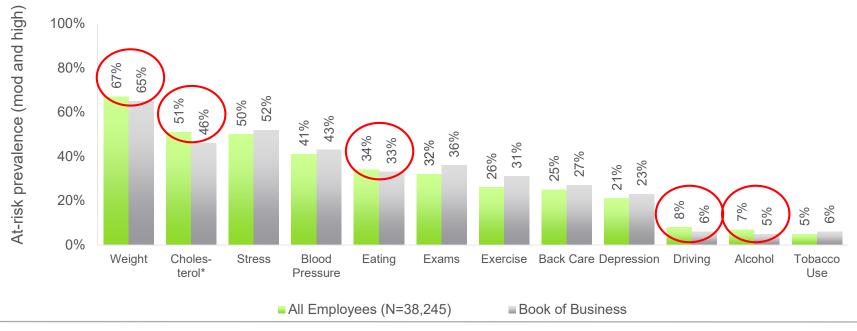
- The risk level of the average employee participant is lower than the BoB
 - There are 2.41 average health risks per participant compared to 2.52 for the BoB
- The average State Retiree participant has a significantly lower risk (2.16 per person)
- The average UW/GA Employee participant has a lower risk (2.23 per person)
- Risk prevalence for Local and State Employee participants is higher than the BoB



^{*}Based on nine risks (alcohol, back care, depression, driving, eating, physical activity, stress, tobacco, weight). Due to rounding, percents may not add to 100.

Employee Risk Prevalence by Risk

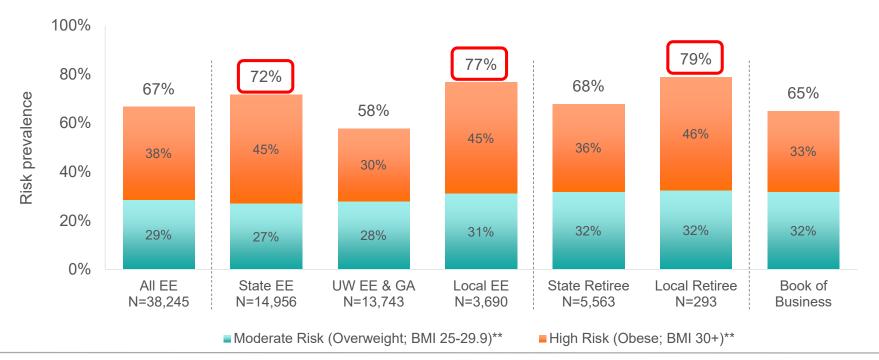
- Weight and its biological consequences (high cholesterol and blood pressure) were the most prevalent risks, along with stress
 - Weight, cholesterol, eating and driving risks were above the BoB
 - Stress, blood pressure, exams, exercise, back care, depression and tobacco use were below



^{*}Results are from the HA and include both clinically collected and self-reported data. 75% reported cholesterol

Employee Weight Risk Prevalence*

- Weight was the #1 health risk for all employees and a focus for 2018-19 programs
- Weight risk considers height and weight (BMI), and waist size when available
- Prevalence was greatest among State/Local Employees and Local Retirees



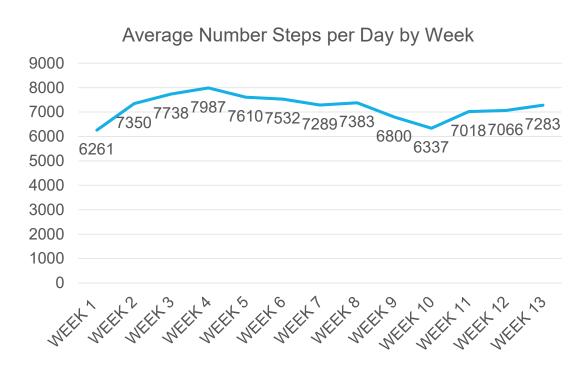
^{*}Results are from the HA and include both clinically collected and self-reported data.



^{**}Also considers waist size. BMI 25.0 to 29.9 is moderate risk with a healthy waist size (≤40"M, ≤35"F) or high risk with an unhealthy waist size (>40"M, >35"F). Refer to appendix for detailed risk definition.

2018 Ignite Pilot -- Step Activity

- Ignite is a 13-week group coaching program for weight management
- Pilot limited to 50 participants; activity and weight data collected Sept to Dec 2018
- 36 participants connected a device and regularly tracked steps.
- Average number of weeks with tracked activity = 12.3 (range 5-13 weeks).
- Steps ranged 6,261 to 7,987 per day (target is 10,000 steps per day, 5 days per week).



2018 Ignite Pilot – Attendance, Weight Loss

Attendance

- 100% of participants completed 1-5 coaching sessions
- 64% completed 6+ coaching sessions; 48% completed 9+ coaching sessions

Weight Loss

- 28 participants (56%) had 2+ recorded weights at least 1 week apart
- Of this group, 13 (46%) people lost weight
 - Total pounds lost was 164; average weight lost per person was 12.6 lbs
 - 54% of individuals lost at least 3% of their starting weight
 - 46% of individuals lost 5% of their starting weight

• 2017 Ignite Pilot

- First Ignite pilot was in 2017 and also included 50 participants
- 43% of participants lost weight; 275 total pounds lost; average 14.5 lbs per person;
 79% lost at least 3% of starting weight
- One year after the program, 64% of participants maintained at least 3% weight loss.

Annual Risk Change



Employee Group Details

	All EE	State EE	UW EE & GA	Local EE	State Retiree	Local Retiree
Repeat HA participants	26,019	10,434	9,183	2,400	3,804	198
Percent of current HA participants	68%	70%	67%	65%	68%	68%
Average time between HAs	0.9 years	years	years	years	years	years
Average age	47.5 years	44.1 years	43.2 years	45.3 years	67.8 years	63.0 years
Sex (M / F)	41% / 59%	38% / 62%	39% / 61%	47% / 53%	49% / 51%	44% / 56%

^{*11} clients in the industries of administration, education and health care; data primarily represents active employees. Due to rounding, percentages may not add to 100.

Employee Overall Risk Prevalence*

• All risk change noted is statistically significant:

- Employees: 2.42 to 2.37 (-2.1%)

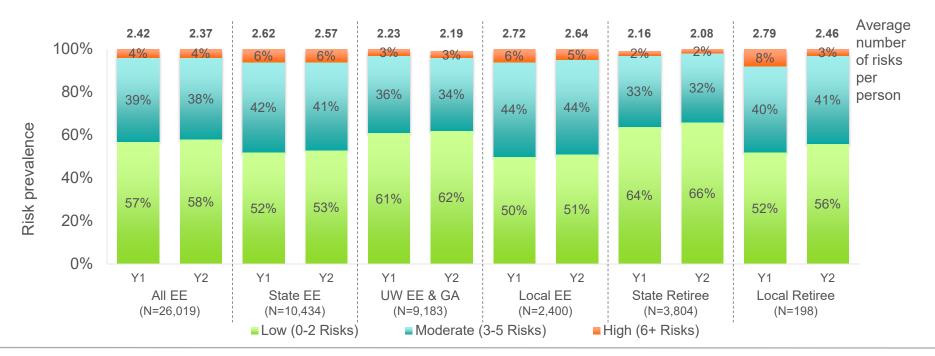
State Employees: 2.62 to 2.57 (-1.9%)

UW/GA Employees: 2.23 to 2.19 (-1.8%)

Local Employees: 2.72 to 2.64 (-2.9%)

State Retirees: 2.16 to 2.08 (-3.7%)

Local Retirees: 2.79 to 2.46 (-11.8%)

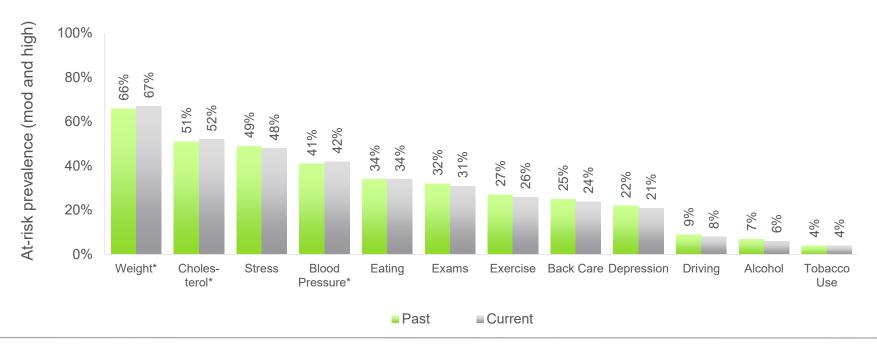


^{*}Based on nine risks (alcohol, back care, depression, driving, eating, physical activity, stress, tobacco, weight). Due to rounding, percents may not add to 100.



Employee Risk Change by Risk

 The majority of the risk areas decreased with the exception of weight, cholesterol and blood pressure which had a 1% increase which we consider remaining flat



^{*}Results are from the HA and include both clinically collected and self-reported data. Past and current data available: cholesterol (74%), blood pressure (89%).



Telephonic Lifestyle Management Risk Change

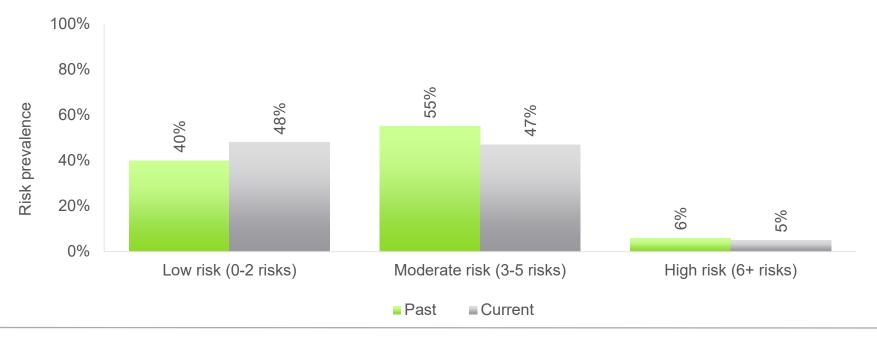


Lifestyle Management Coaching Group Details

	Telephonic Coaching Completers		
HA period			
Current	01/02/18 to 11/30/18		
Past	01/05/17 to 11/13/17		
Intervention period	01/05/17 to 12/31/17		
Repeat HA participants	1,021		
Repeat HA participants, % of current participants	2%		
Average age	55.1 years		
Sex (M / F)	42% / 58%		

Lifestyle Management Change in Health Risks

Coaching participants' average number of health risks decreased significantly from 3.05 to 2.74 (-10.2%).



^{*}Based on nine risks (alcohol, back care, depression, driving, eating, physical activity, stress, tobacco, weight). Due to rounding, percents may not add to 100.

Lifestyle Management Risk Change by Risk

- All risk areas saw a decrease with the exception of weight and exams.
- The biggest decrease in risks were seen with eating, exercise, back care and depression.



^{*}Results are from the HA and include both clinically collected and self-reported data. Past and current data available: cholesterol (74%), blood pressure (89%).

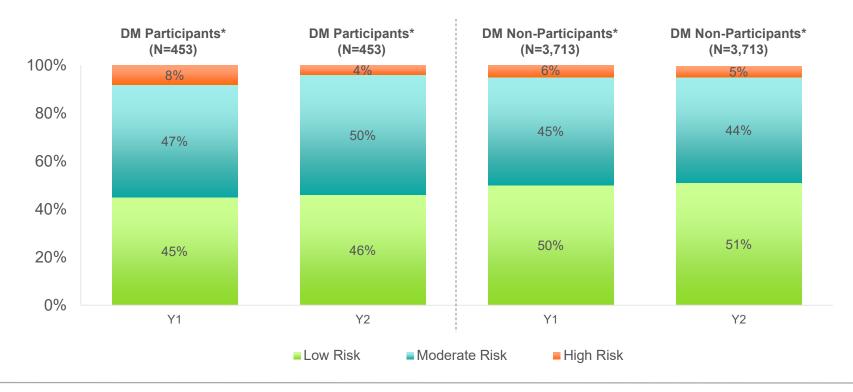


Disease Management (DM) Risk Change



DM participants vs. non-participants

- Overall risks improved substantially more for disease management participants (6.5%, or 2.91 to 2.72 average risks) than non-participants (1.5%, or 2.71 to 2.67 average risks).*
- For both groups, the greatest improvement occurred at the high-risk level.



^{*}DM participants and non-participants completed the 2017 HA (on which they identified themselves as having asthma, CAD, CHF, COPD or diabetes) and also completed the 2018 HA. DM participants completed 1+ calls with a DM health coach in 2017, while non-participants completed no DM coach calls.

Executive Summary



Executive Summary

- 2018 Participation rates
 - 2018 goal was 35% participation in all three activities (health assessment, biometric screening, well-being program).
 - 2018 actual was 29% participation in all three activities for the overall population (employees, spouses and retirees).
 - 2018 actual was 35.2% participation for employees and spouses only (retiree participation was about 17%).
 - In 2018, 29.9% of employees and spouses completed two activities (health assessment and screening); this is higher than the 2017 rate of 25.4%.
 - Two screening options were available: 44% of the population participated in an onsite event, 56% completed a physician form; split was 50/50 for employees only.
- Weight and its biological consequences (high cholesterol and blood pressure) remain the primary risk areas, along with stress.
- Of the group that participated in Ignite in 2018, 46% people lost weight
 - Average number of pounds lost among this group was 12.6 pounds
 - 54% of those who lost weight, lost at least 3% of their starting weight
 - 46% of those who lost weight, lost at least 5% of their starting weight

Executive Summary

- All groups achieved risk reduction based on the time over time health assessment comparison.
 - Those who engaged with a health coach saw a decrease of 10.2%
 - Those who engaged with a nurse coach in the disease management program saw a decrease of 6.5%
- Total prevalence for the 5 core disease management conditions is 15.4% with the highest prevalence being asthma and diabetes.

2019 Program Goals & Objectives

Participation Goals

- Minimum three step completion rate of 32% (2018 = 30.5%)
 - Health Assessment
 - Biometric Screening
 - Well-Being Activity
- **67,000** unique portal log-ins (2018 = 62,444)
- Continue to promote registration in telephonic coaching using targeted outreach via StayWell portal (2018 = 16%)
 - Promote at onsite events
 - Continue to include in part of overall incentive strategy

Program Goals

Satisfaction:

 Achieve a 90% minimum participant satisfaction with health screenings, health assessment and portal, lifestyle management, disease management, and customer support

Surveys:

 Increase response to Lifestyle Management and Disease Management satisfaction surveys

Program Goals

Risk Reduction:

- Achieve at least a 1% overall risk reduction per year for repeat participants.
- These are the baseline findings:
 - Employees: 2.42 to 2.37 (-2.1%)
 - State Employees: 2.62 to 2.57 (-1.9%)
 - UW/GA Employees: 2.23 to 2.19 (-1.8%)
 - Local Employees: 2.72 to 2.64 (-2.9%)
 - State Retirees: 2.16 to 2.08 (-3.7%)
 - Local Retirees: 2.79 to 2.46 (-11.8%)
- Achieve at least a 6% overall risk reduction per year for those who engage in a lifestyle health coach. Baseline was 10.2%.
- Achieve at least a 4% overall risk reduction for those who engage with a nurse coach in a disease management program. Baseline was 6.5%.

Future Goals

Long-Term Program Goals

- Reach 40% participation in all three steps by 2022
- StayWell to complete a claims-based analysis to determine the Return on Investment (ROI)
- See an improvement in the Culture of Health Scores

2019 Current Program Performance



Current Program Participation

	Jan - April 28, 2019	Jan – April 29, 2018
Unique portal logins	30,877	29,507
HA completions	20,665	20,479
Screening completions	12,037	11,616
Activity completions	15,687	13,407
Incentive Eligible	8,772	7,943

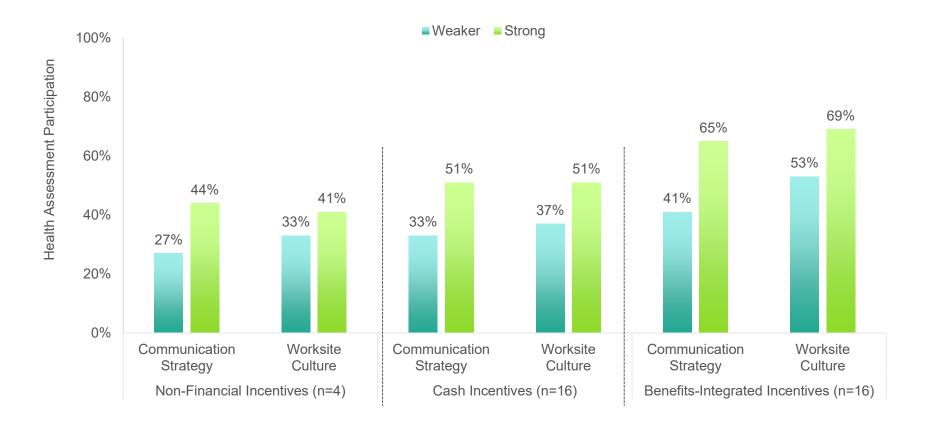
Incentive Information

Incentive Benchmarking

Incentive Detail	State of WI	SW Norm (N=6)
Incentive type	Gift Card	Health Insurance Premium Credit
Average employee count per client	109,189	10,332
Average incentive offered per employee	\$150	\$491
Average employee participation rate in health assessment (HA) and screening	27.5%	65.9%
Average incentive cost per employee per percentage point of HA/screening participation	\$5.45	\$7.41
Average incentive cost per employee who participated in HA/screening	\$0.005	\$0.09

Incentive Benchmarking

HA Participation by Incentive Type, Communication & Culture



Seaverson EL, Grossmeier J, Miller TM, Anderson DR. The role of incentive design, incentive value, communications strategy, and worksite culture on health risk assessment participation. Am J Health Promot. May-Jun 2009;23(5):343-352.

Review Next Steps

- StayWell New Portal
 - Last November, Molly presented information on StayWell purchasing a new portal for clients and explained this may be an option for WI in their new program year.
 - StayWell continues to work with their executive leadership team to evaluate whether
 WI will move to the new portal in January 2020.
 - If StayWell determines this is a go, we will continue to work closely with Molly on all details of the implementation to ensure all contract requirements are upheld.
- Currently in the process of onboarding the second onsite Program Manager



Questions?

