

Integrated Employee Health Enhancement and Disease Management Program at DIRECTV (USA-Private)

Section I: Summary

DIRECTV, a satellite-based television service in the United States, implemented a corporate-wide integrated employee health and enhancement program in 2003 with the goals of reducing medical costs, reducing absenteeism, and improving employee health. Components of the program included a health risk assessment (HRA), lifestyle management, demand management, diseases management, and financial incentives for certain employees and physicians. A three year study evaluated the impact of the program on employee health risks, health conditions, and productivity and found that exposure to the program resulted in a significant reduction in health risks. A majority of employees who improved their risk levels also maintained their gains and improved absenteeism.

Section II: Statement of Purpose

Many companies in the United States offer a health promotion and/or disease management program to their employees to address the ever-rising costs of healthcare through improvement in employee health/lifestyle behaviors and overall health. However, comprehensive integrated health promotion programs are more rare. A comprehensive health promotion program may include multiple strategies such as health education, supportive environments, integration into organizational structure, access to support services, and health screenings.

In April 2003, DIRECTV implemented a company-wide integrated employee health and enhancement program, with an initial focus on lifestyle management. All employees in a self-insured health plan were given a health risk assessment (HRA) and awarded a \$15 gift certificate for completing it. The HRA was used to identify health risks faced by workers based on their current health status and lifestyle. As an incentive, employees were awarded up to \$300 credit toward their following year's health insurance premium if they were identified as low risk or were willing to participate in the recommended health improvement program if they were identified as moderate or high risk. Sixty percent of eligible DIRECTV employees (2,098) completed the HRA in 2003. A total of 543 employees completed an additional HRA in 2005 and formed the basis of the study to evaluate program impacts.

Based on the initial HRA, 721 high risk employees were deemed eligible for the lifestyle management program and 503 enrolled. Six different lifestyle management programs were available, including pre-diabetes, cholesterol, stress management, blood pressure, smoking, and weight management. The

cholesterol program had the most participants (197) and the pre-diabetes program had the smallest enrollment (7). The lifestyle management program strategies included in person or online coaching from a personal coach (RN, dietician, and/or exercise physiologist); an individual action plan with 6- and 12-month risk reduction goals; and at least 6 educational mailings and 6 phone sessions with the personal coach.

In addition to the regular programs, DIRECTV also added a prevention and wellness incentive program for employees and their physicians at its call center in Boise, Idaho. The incentive program awarded "quality" points to employees and their physicians for following certain evidence-based clinical and prevention guidelines. A percentage of program savings (based on medical cost savings and health-related productivity savings) were then allocated to employees and their physicians based on the quality points they had earned. The quality point incentive program ran from April 2003 to December 2004.

In April 2004, DIRECTV implemented a second phase of the health enhancement initiative by offering employees another opportunity to complete an HRA. The company again offered financial incentives to both complete the HRA and participate in an eligible program. The program also added two significant new components in addition to the lifestyle management program – demand management and disease management (DM). The demand management program provided a 24-hour nurse help line for employee health questions and advice. All employees who completed the HRA were automatically enrolled in the demand management program. The DM program was a telephone, nurse-based program available to employees with more complex, costly medical conditions. The DM program included assignment to a primary nurse, coaching, care management, health education, lifestyle management and care coordination with the employee's physician. From 2004 to 2006 all eligible employees were offered the integrated health enhancement program of HRAs, lifestyle management, demand management, and disease management.

Section III: Outcomes

An "internal" analysis and an "external" analysis were conducted to identify the impact of the DIRECTV health enhancement program. The internal analysis compared outcomes for employees who experienced and improvement/reduction in health risks versus employees who experienced no improvement or had increased health risks. The external analysis compared outcomes between participating employees and a control group derived from a "natural flow" model to describe the benchmark health risk trend over time for a population that did not experience a program intervention. A second matched comparison group of similar employees who did not participate in a health improvement program was also selected from a national benchmark

database of workers from many different companies who had completed the World Health Organization's Health and Work Performance Questionnaire.

The enhancement program participants showed significant improvement in health risk level after the program. Compared to the control groups, the proportion of low risk DIRECTV employees was 8.1% higher, the proportion of medium risk employees was 7% lower, and the proportion of high risk employees was 1% lower. Additional outcomes indicate that the reduction in health risk was successful across risk groups:

- 87% of low risk employees in 2003 remained low risk in 2005; 11% moved to medium risk; 1.5% moved to high risk
- Nearly 60% of medium risk employees moved to low risk; 30% remained at medium risk; 10% moved to high risk
- 25% of high risk employees moved to medium risk; 22% moved to low risk; 53% remained at high risk

Many employees who participated in the program were able to eliminate a health risk that was initially identified on the 2003 HRA. For example, almost 85% of participants who reported high cholesterol in 2003 no longer reported high cholesterol in 2005. Nearly 41% of people who had a health risk from lack of exercise in 2003 were no longer at risk in 2005. Other factors that were eliminated by participants included: fatty diet (84%), obesity (23%), high blood pressure (69%), trouble sleeping (39%), smoking (35%), poor health (59%), stress (45%), and heavy drinking (83%).

Changes in the prevalence of 11 specific health conditions of participating employees were also analyzed. Positive outcomes were achieved in 8 of the 11 conditions which saw a significant to moderate decrease in prevalence among employees. These included allergy, asthma, depression, migraine, obesity, gastric reflux disease, cancer, and bronchitis/emphysema. Three conditions – diabetes, anxiety, and arthritis – showed a small to moderate *increase* in prevalence. One theory about the slight increase in diabetes prevalence among employees (5.1% in 2003 versus 5.8% in 2005) is that the DIRECTV program may have helped employees at risk for diabetes obtain an early diagnosis rather than waiting for symptoms or an acute event to manifest.

The comprehensive and integrated approach taken by DIRECTV appears to have been successful by a number of measures in improving employee health, changing lifestyle behaviors, reducing health risk, and improving productivity. Additional analysis is in progress to determine the impact of this integrated health enhancement program on total employee health-related costs.

Section IV: Additional Resources

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Bob Roehr, "Workplace Health Program Is Cost-Effective, Improves Productivity," February 2, 2008, Medscape Medical News, http://medgenmed.medscape.com/viewarticle/570538_print