



Human Resources Department

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Interoffice memorandum

Date: April 25, 2016
To: Board of County Commissioners
From: Kathleen Hinman, Human Resources Analyst
Re: 2016 Personal Health Assessment Proposal

During the 2015 plan year there were 811 participants who completed the Health Risk Assessment (HRA) and received an incentive. This is up 20% over 2014's participation, reaching our established goal. The increase in participation has been attributed to the change in the incentive structure and the improved process. The expense to the Health Benefit Trust Fund for the 2015 incentives was \$60,000; or about \$74 per participant. This is a reduction in cost per participant over the previous year of \$108.55 per participant. The decrease in cost is due to the decrease cost of the blood draw process and the incentives.

HRA Program Costs and Projected Cost Avoidance:

HRA Expenses	2013 (799 HRAs)	2014 (676 HRAs)	2015 (811 HRAs)	2016 (930 HRAs*)
Blood Draws	\$11,768	\$10,140	\$10,543	\$10,881
Additional Staff	\$6,835	\$3,778	\$4,000	\$9,500
Incentive Expense	\$71,910	\$73,380	\$60,000	\$76,000
Questionnaire	\$6,392	\$5,408	\$6,488	\$11,160
Other Expenses	\$179	\$500	\$500	\$600
Total	\$90,692	\$93,206	\$81,531	\$108,141
Cost Avoidance**	\$848,538	\$717,912	\$861,282	\$987,660
Net Plan Savings	\$757,846	\$624,706	\$779,751	\$879,519

*Projected HRA participation based on a goal of 15% increase over previous year. All eligible participants include 1794 employees and spouses and 390 dependents over 18 years old. The dependents are not included in the incentive expense.

**Cost avoidance is based on the average savings per participant multiplied by the number of participants.

Blood draw costs down from \$15 to \$11.70 per person beginning in 2015.

HRA Participation for Eligible Deschutes County Health Plan Members:

HRAs	Employees		Spouses		Dependents (18-26)		Total		Total (w/out dependents)		% year over year
	#	%	#	%	#	%	#	%	#	%	
2011	320	31%	48	7%	9	5%	377	20%	368	21%	n/a
2012	536	52%	45	7%	6	3%	587	28%	581	34%	58%
2013	532	52%	265	37%	2	1%	799	38%	797	46%	37%
2014	440	44%	233	33%	3	1%	676	32%	673	39%	-16%
2015	519	50%	290	39%	2	1%	811	37%	809	45%	20%
2016 (Projected)	597	57%	334	45%	2	1%	933	43%	930	52%	15%

In review of the 2015 HRA data the following information was identified:

- “Overall Wellness Rating” of Excellent increased from 29.9% to 36.9%. The rating reflects the presence or absence of health risks which in turn can lower healthcare costs.
- 32% of 2015 Participants fall into the Pre-diabetes category. Pre-diabetes and pre-hypertension are conditions not captured by claims data but are captured in the HRA.
- The annual HRA provides an opportunity to gather information, counsel employees to make needed changes, empower employees to continue/create healthier lifestyles.
- The HRA is free and convenient to participants; which are both barriers to going to a provider until there is a specific health concern.

The 2015 HRA uncovered indicators of the need for attention to wellness by employees:

- 70% get less than 5 days/week of physical activity.
- 91% practice nutrition habits that increase risk of heart disease, diabetes, and cancer.
- 42% have elevated blood pressure.
- 25% feel high levels of stress at work.

The good news is that the increase in “ready to change” numbers indicates support that the HRA, and Wellness Program, are materializing into behavior changes.

- Improving eating habits – 52% in action phase (up 3% from last year)
- Increasing physical activity – 39% in action phase (same as last year)
- Actively maintaining or working to lose weight – 66% (down 1% from last year)
- Adapting habits to improve cholesterol numbers – 59% in action phase (up 10% from last year)
- Adapting habits to improve blood pressure – 60% in action phase (up 23% from last year)

Some of the feedback provided to Human Resources from EBAC, Wellness Task Force, DOC, and employees regarding the 2015 HRA:

- The change in the incentive structure was more effective. The Hydroflasks and a one month free health premium cost-share were positively received, resulting in increased participation.
- The finger stick was preferred over the lab blood draw.
- The overall process was quicker and the addition of the tablets in the DOC increased efficiency.
- Being able to meet with the Wellness Coordinator instead of a medical provider delivered better value to those folks whose biometric screening was in the “normal” category.
- Increased HRA clinics would be preferred.

PHA Goals for 2016:

- Re-brand Health Risk Assessment (HRA) as Personal Health Assessment (PHA). A new questionnaire will be used by Medcor with a greater focus on Personal Health.
- Increase participation by 15%.
- Increase the Overall Wellness Rating for Deschutes County.
- Continue same program incentives and processes from 2015.

EBAC met and discussed the PHA process and incentive options for 2016. EBAC supports Human Resource's suggestions on goals and process improvements for the 2016 PHA. In addition to supporting HR's goals and suggestions, EBAC has requested Administration and HR staff review options for a greater incentive for employees. In particular, they recommend we review options to have a higher health insurance cost-share for those who do not participate in the PHA annually. HR staff has committed to review this option and continue the discussion at each EBAC meeting.

In response to the feedback received, HR staff recommends the following PHA program, which is the same as the 2015 program. The program will begin in May and end in September with the financial incentive to be awarded to participants in November and an immediate tangible incentive provided at the finger stick appointment. The DOC will continue to use a Cardiocheck Plus Analyzer (a finger-stick lipid/glucose machine) rather than a full blood draw and lab test for eligible participants. This will reduce the wait time for participants, the costs for the County, and the administrative burden on the DOC. Based on the results of the lipid panel, participants will be scheduled to complete their follow-up visit with either a medical provider or the Wellness Coordinator. Again this will reduce the impact of the process on available appointments at the DOC and make the follow-up visit more specific to the participant's health goals and needs. The program is designed to increase the impact of the incentive, create a more efficient use of resources, and produce a more meaningful PHA experience for participants.

The 2016 PHA incentive recommendation from HR staff, supported by EBAC, is as follows:

Single employees would not pay a premium cost share in November if they participate in, and complete, the PHA. Married employees would also not pay a premium cost share for November if both employee and spouse participate in, and complete, the PHA. If only one of the married couple participates, the employee will pay 50% of the monthly premium cost share. Additionally, an immediate "prize", possibly a Hydro Flask or insulated food container, would be given at the time of the finger stick. The anticipated cost for the 2016 PHA is about \$107,000.

Bonnie Baker

From: Kathleen Hinman
Sent: Friday, April 22, 2016 3:01 PM
To: Bonnie Baker
Cc: Danielle Fegley
Subject: RE: Agenda Item for BOCC Work Session 4/25/2016
Attachments: 2016 proposed HRA memo for BOCC.pdf

Hello Bonnie,

I just received information from Medcor that their calculations were off on the cost of blood draws, so I've corrected the attached Memo for the Board as well as my summary below. (change highlighted in yellow below)

Thank you and sorry for the inconvenience this may cause you,

Kathleen Hinman

HR Analyst - Benefit & Leave Administration
Deschutes County Human Resources
(541) 385-3215



From: Kathleen Hinman
Sent: Thursday, April 21, 2016 4:23 PM
To: Bonnie Baker
Cc: Danielle Fegley
Subject: Agenda Item for BOCC Work Session 4/25/2016

Attached is the document I'd like to provide the Commissioners in preparation for the discussion at the work session on 4/25/16.

Agenda Item: 2016 Personal Health Assessment Proposal

Summary: An overview of the 2015 Health Risk Assessment goals, costs, and outcomes are provided in the memo. Human Resource's staff, with recommendation from EBAC, is proposing the Commissioners review and approve the 2016 Personal Health Assessment (PHA) program.

PHA Goals for 2016:

- Re-brand Health Risk Assessment (HRA) as Personal Health Assessment (PHA). A new questionnaire will be used by Medcor with a greater focus on Personal Health.
- Increase participation by 15%.
- Increase the Overall Wellness Rating for Deschutes County.
- Continue same program incentives and processes from 2015.
- Keep costs at anticipated \$108,000 total or \$116 per participant.