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SME

## 2018 Strive Executive Review

Presented by Kapnick Insurance Group

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## Summary

### Trends

- 91% of participants fell in the low/ideal risk range for health score results
- 38% of participants fell into the moderate and high risk range for Body Mass Index (BMI)
- 34% of participants fell into the moderate and high risk range for Total Cholesterol
- 17% of participants fell into the moderate and high risk range for Hemoglobin A1C

### Top Health Risks

- Weight Management
- Cholesterol
- Diabetes

### Goals for Upcoming Year

- Increase health screening participation
- Help individuals find ways to be more accountable for their health year-round through the Kapnick Strive portal
  - Robust communication campaign
  - Strive for 5 Reward Points Program
  - Interactive wellness challenges (individual and/or team)
  - Implement interactive Lunch & Learns that will increase education about weight management, cholesterol, and diabetes
- Target participants in the high risk level (health score of 60 points or below) to review health report and top risk factors
  - A total of three high risk participants were provided two outreaches and we were able to connect with two of them

### 2018 Employee Events

- Health Screenings – October 9<sup>th</sup> at the Cleveland location and October 10<sup>th</sup> at the Southfield location
- Lunch and Learns
  - May – Wellness Portal Demonstration & Happy Healthy Heart
  - July – Health Screenings Kick Off & Lifestyle Not a Diet
  - September – Office Fitness
  - November – Review of Findings & Stress Busters
- Challenges
  - May – Hollywood Walk to Fame Activity Challenge
  - July – Eat the Rainbow Nutrition Challenge
  - September – Around the World Activity Challenge
  - December – No Time like the Pleasant Stress Reduction Challenge

## Participation and Demographics

Strong participation numbers ensure eligible employees and dependents are being educated on their health risks. In addition, a more complete representation of the population is being screened, which allows for better analytics and a comprehensive view of your population's risks.

The tables below show some demographics of screening participation this year.

	Participants	Average Age	Average Score	Core Health Avg. Score
<b>SME 2018</b>	<b>44</b>	<b>46</b>	<b>86</b>	<b>80.5</b>
<b>Repeat Participants</b>	<b>20</b>			
SME 2017	29	48	85	78

Ideal =100-85    Low = 84-70    Moderate = 69-60    High = 59-50    Very High = 49-0

	# of Participants	% of Participation
<b>Male</b>	19	43%
<b>Female</b>	25	57%

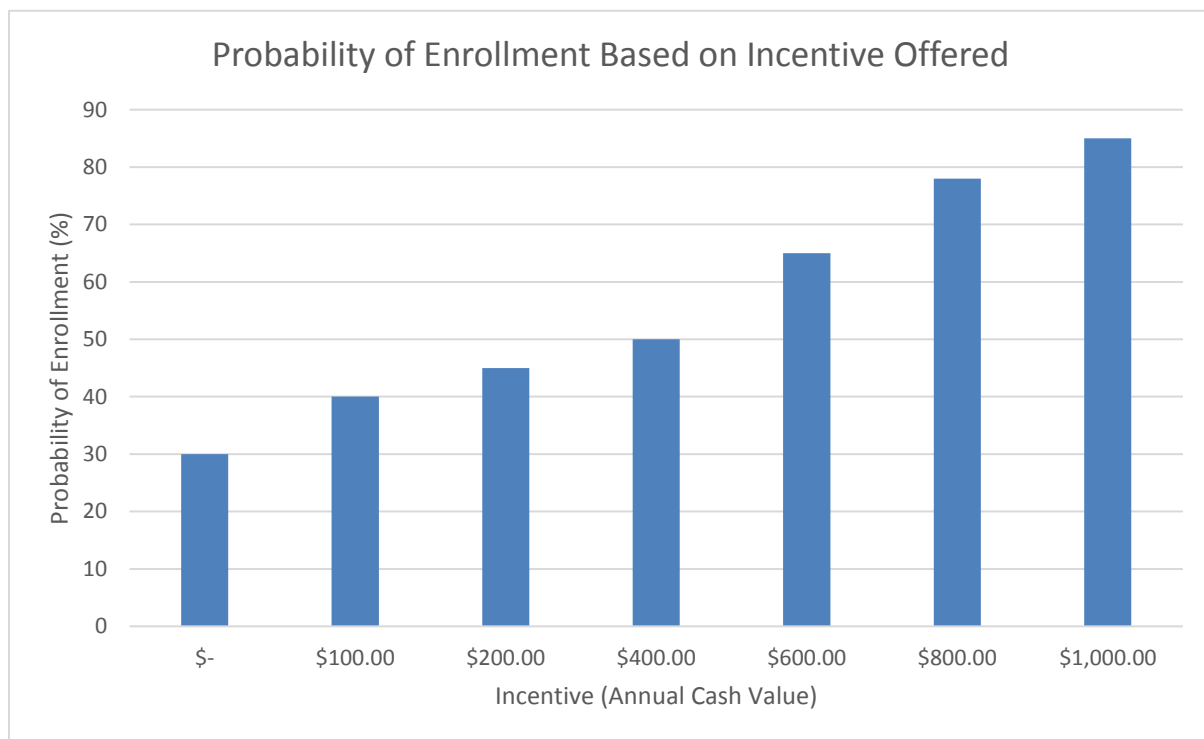
## Participation/Incentive Structure

### 2018 Eligible Employee Participation

44 (# of employees screened)/ 156 (# of eligible employees) =28%

To qualify for the full incentive, an eligible participant (includes past participants AND employees that waived participation last fall) must complete a Kapnick Strive Health Screening and receive a Health Score of 70 or higher OR improve his or her Health Score by 5 points from last year's score.

Previously eligible participants that take the screening and do not meet the threshold discussed above can still qualify for the incentive through the Reasonable Alternative Standard provided by Kapnick strive®.

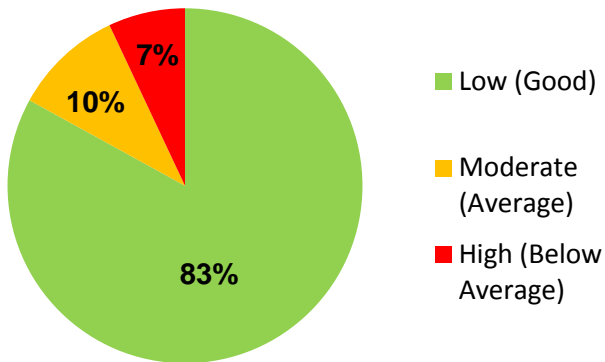


## Health Score Analysis

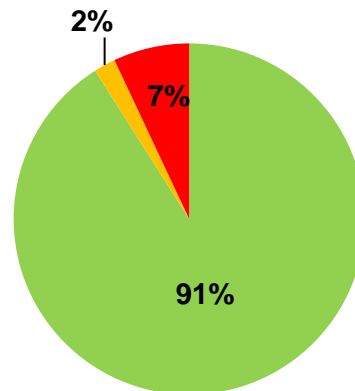
### Self-Perception vs. Actual Health

The following graphs show employees perception of health as self-reported on the Health Risk Assessment along with the actual biometric scores from those who completed a screening this year.

**Self-Perception of Health**



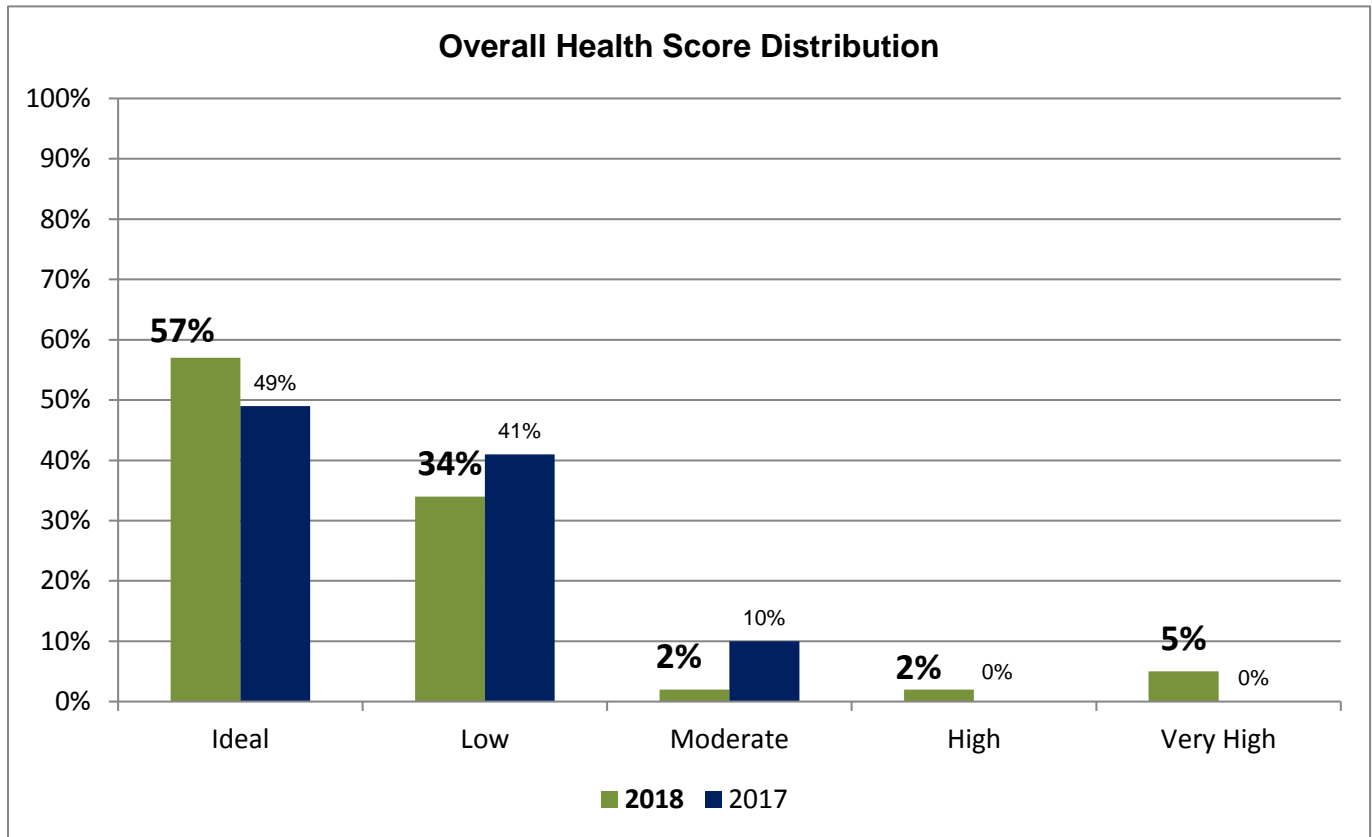
**Actual Health**



2018	Self-Reported	Actual Results
Low Risk	83%	91%
Moderate Risk	10%	2%
High Risk	7%	7%

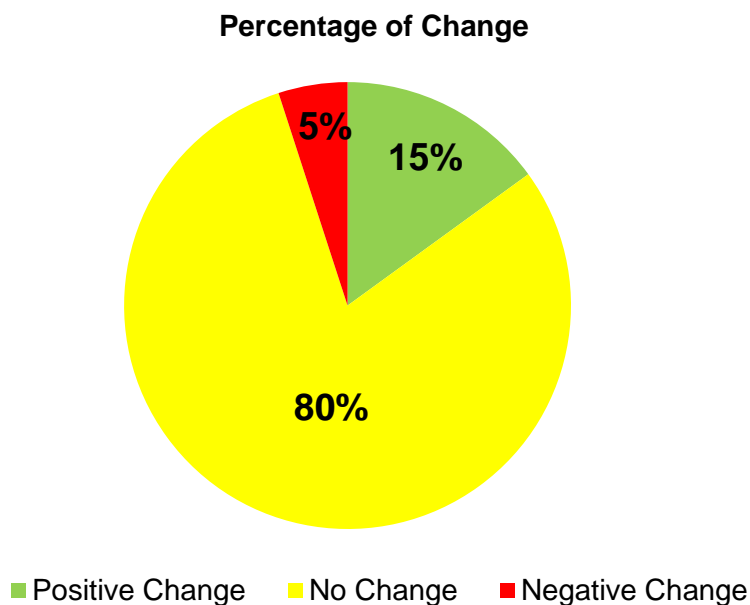
## Company Average

The average health score of your population is a strong indicator of the overall wellness of your population. The graph below shows the average score of your participants.



## Risk Status Change for Repeat Participants

The following graph shows how participants improved from the 2017 screenings to the 2018 screenings.



### Risk Status Change for Repeat Participants

■	POSITIVE CHANGE	3
■	NO CHANGE	16
■	NEGATIVE CHANGE	1



## Biometric Averages

	2018	2017	CoreHealth
Total Score	86	85	80.5
BMI	30.1	29.92	29.3
Waist/Hip Ratio	.83	.86	.91
Blood Pressure: Systolic	114	117	117
Blood Pressure: Diastolic	71	78	75
Cholesterol	191	203	192
HDL (Good)	59	60	55
LDL (Bad)	108	119	109
Triglycerides	119	125	132
Blood Sugar	99	90	98
Hemoglobin A1C	5.3	5.2	5.4

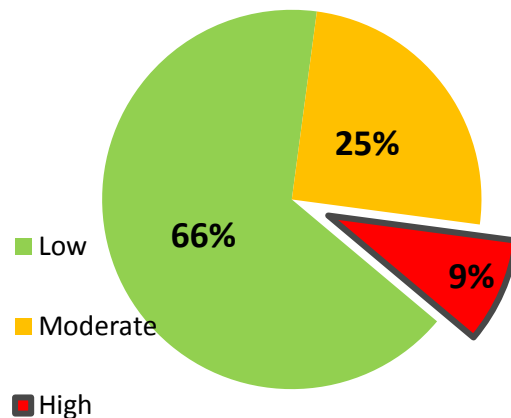
Outside of Healthy Range

Within Healthy Range

## Heart Health: Total Cholesterol

Cholesterol is a main factor in determining overall heart health. The graph below shows the breakdown of your participants cholesterol ranges. The awareness graph shows what percent of participants scoring in the high or very high risk were aware of their condition.

### 2018 Total Cholesterol Risk Level Breakdown



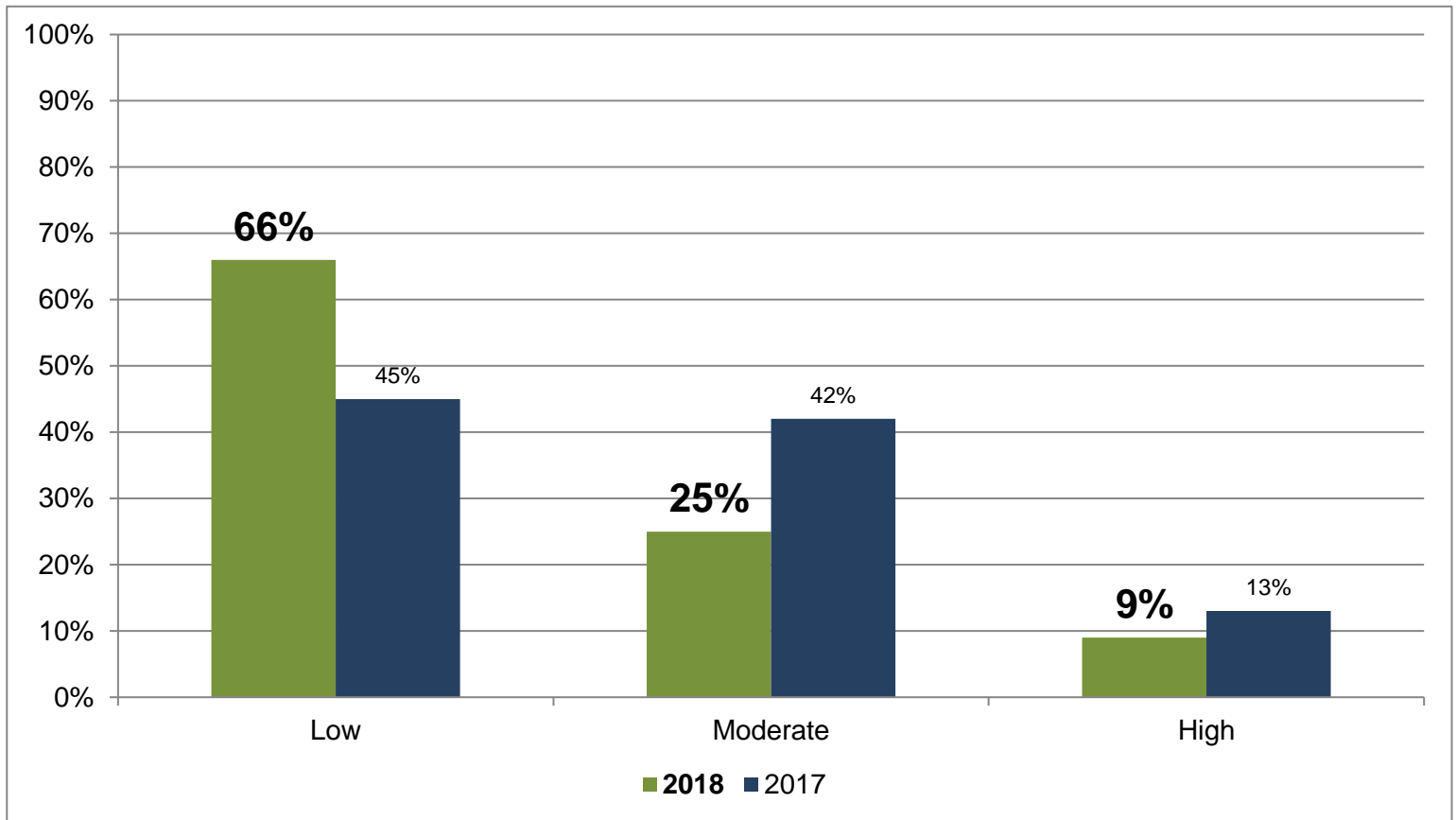
Low- (<200mg/dL) Moderate- (200-239mg/dL) High- (≥240mg/dL)

**Area of Attention:** 34% of participants fell into the moderate and high risk range

#### Risk Status Change for Repeat Participants

■	POSITIVE CHANGE	5
■	NO CHANGE	15
■	NEGATIVE CHANGE	0

## Year-to-Year Cholesterol Trends



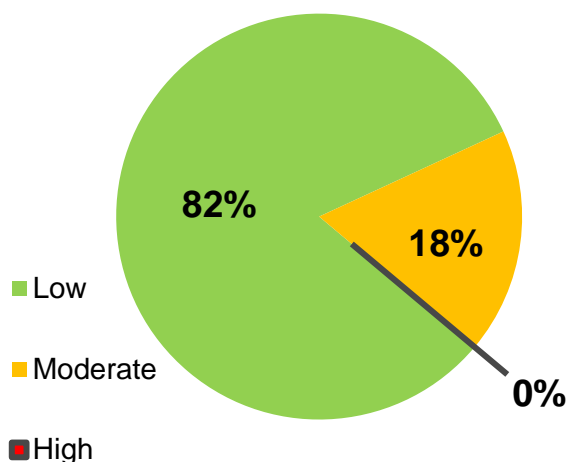
Low- (<200mg/dL) Moderate- (200-239mg/dL) High- (≥240mg/dL)

## Heart Health: Systolic Blood Pressure

Blood pressure is another main factor in determining overall heart health. Blood pressure is closely tied not only to the excess strain put on the heart through lack of exercise and proper nutrition, but also through unmanaged stress.

The chart below shows the percentage of participants in each risk category for systolic blood pressure measurements.

### 2018 High Blood Pressure Risk Level Breakdown



Low- ( $\leq 121$ mmHg) Moderate- (122-140mmHg) High- ( $\geq 141$  mmHg)

**Area of Applause:** The majority of participants are in the low risk range for high blood pressure.

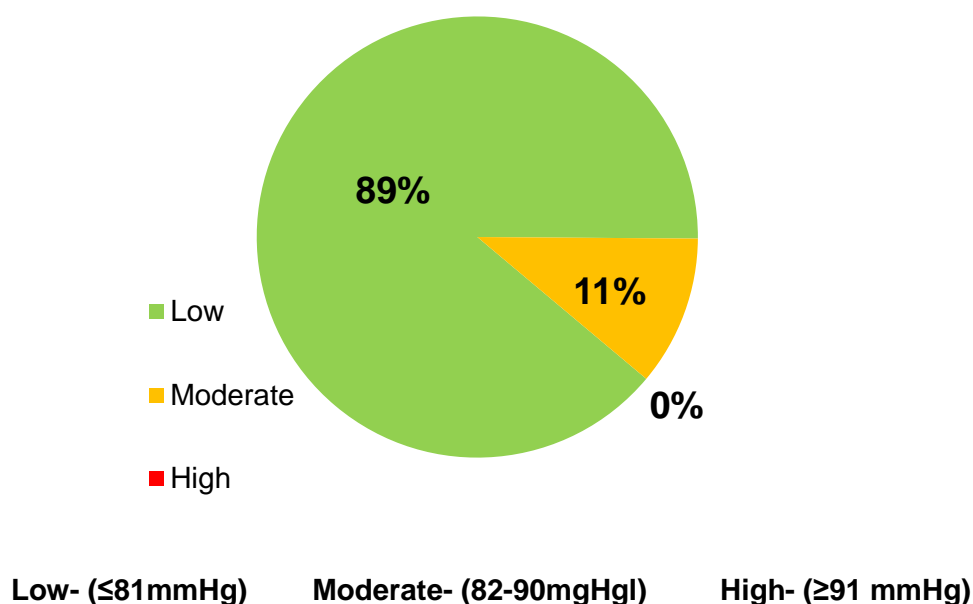
#### Risk Status Change for Repeat Participants

■	POSITIVE CHANGE	2
■	NO CHANGE	15
■	NEGATIVE CHANGE	3

## Heart Health: Diastolic Blood Pressure

Blood pressure is another main factor in determining overall heart health. Diastolic blood pressure is the pressure in the arteries when the heart is relaxing. The graph below shows the breakdown of your participant's diastolic blood pressure ranges.

### 2018 Diastolic Blood Pressure Risk Level Breakdown

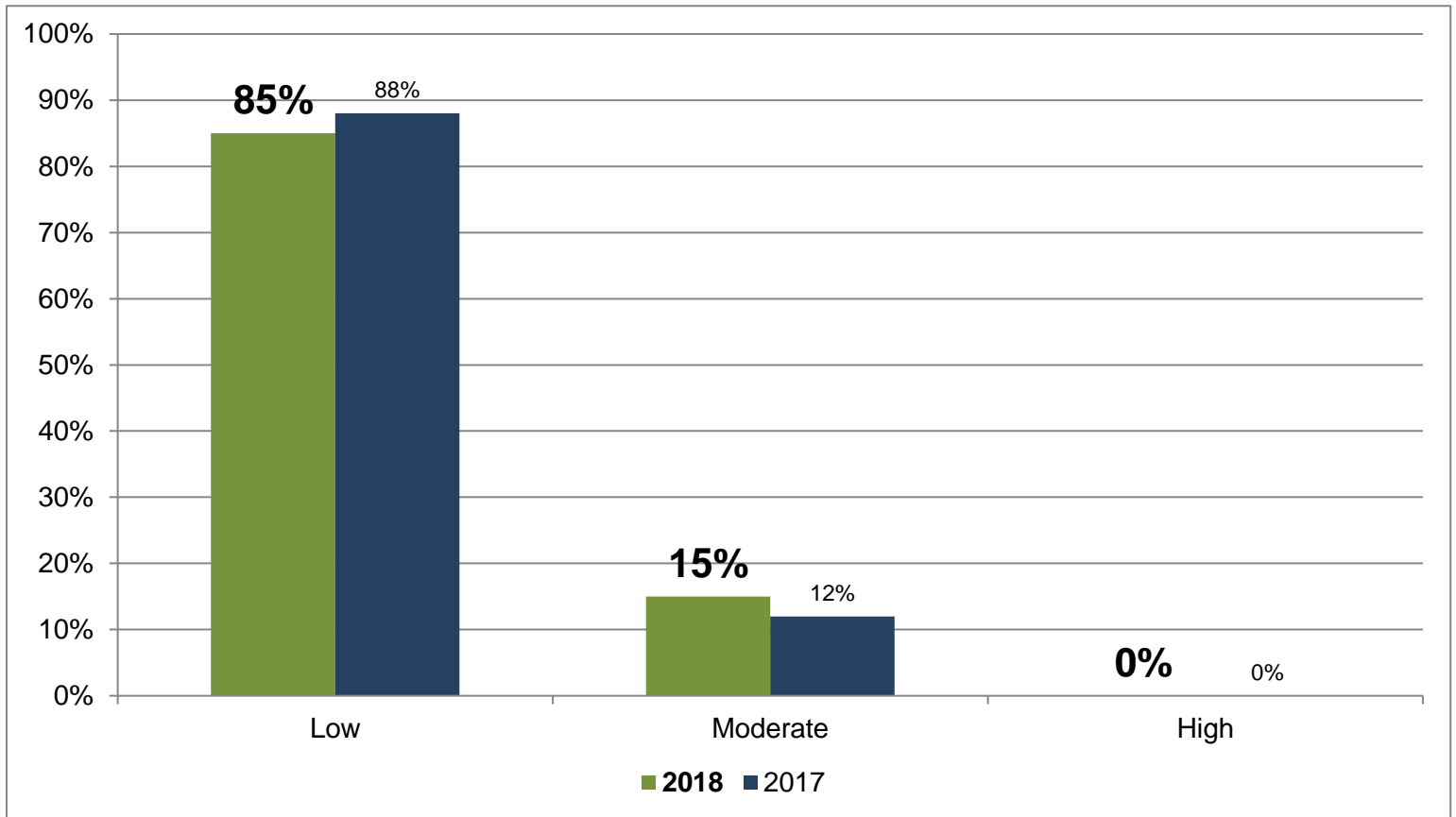


**Area of Applause:** The majority of participants are in the low risk range for high blood pressure.

### Risk Status Change for Repeat Participants

■	POSITIVE CHANGE	2
■	NO CHANGE	17
■	NEGATIVE CHANGE	1

## Year-to-Year Blood Pressure Trends

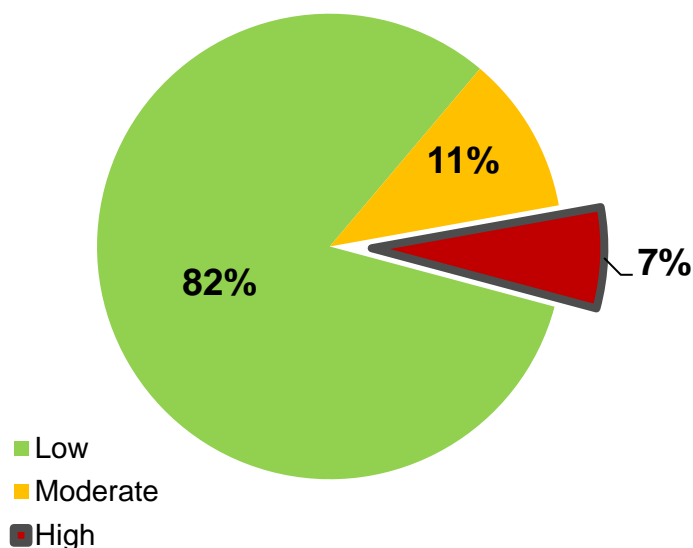


Low- ( $\leq 121/81$ mg/dL) Moderate- (122/82-140/90mg/dL) High - ( $\geq 141/91$ mg/dL)

## Diabetes Risk: Blood Glucose

Diabetes presents a serious risk to your participants and also to your bottom line. Undiagnosed diabetics are a catastrophic claim waiting to happen, while those who are diabetic present a significant cost, especially if they are not compliant with their care. The graph below demonstrates the participants risk for diabetes.

### 2018 Blood Glucose Risk Level Breakdown



Low Risk- ( $\leq 100\text{mg/dL}$ )

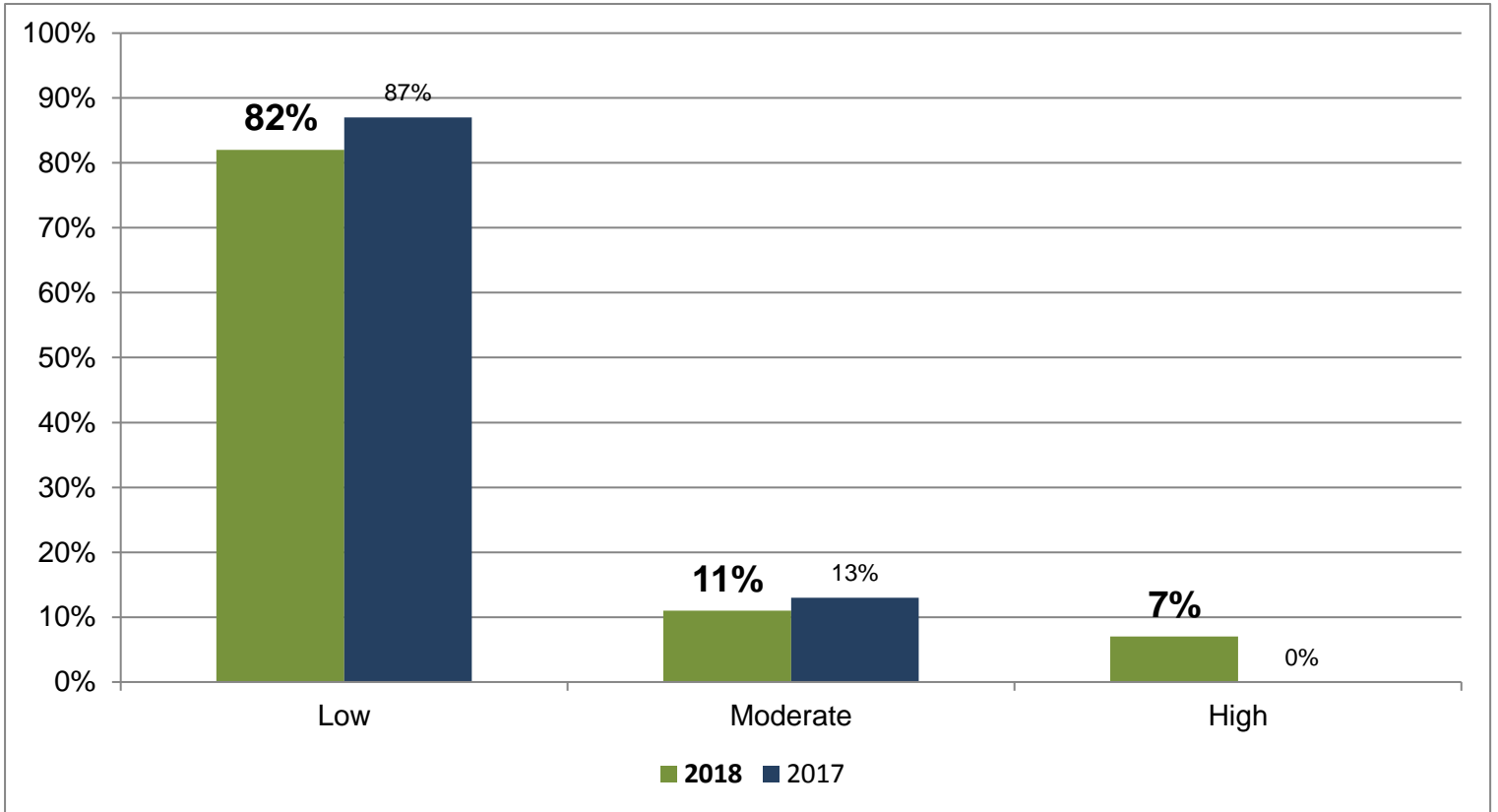
Moderate Risk- ( $101\text{-}125\text{mg/dL}$ )

High Risk- ( $\geq 126\text{mg/dL}$ )

### Risk Status Change for Repeat Participants

■	POSITIVE CHANGE	2
■	NO CHANGE	17
■	NEGATIVE CHANGE	1

## Year-to-Year Glucose Trends



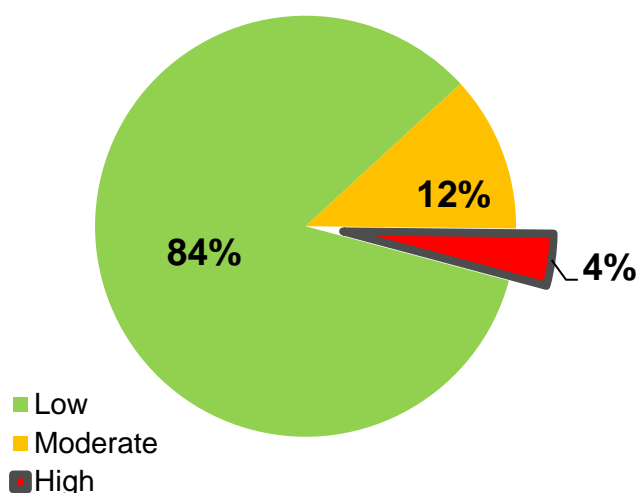
Low Risk- ( $\leq 100\text{mg/dL}$ )    Moderate Risk- ( $101\text{-}125\text{mg/dL}$ )    High Risk- ( $\geq 126\text{mg/dL}$ )



## Diabetes Risk: Hemoglobin A1C

Hemoglobin A1C measures average glucose levels over a 2-3 month period. Anything 6.5% or higher represents an increased risk for diabetes. Diabetes presents a serious risk to your participants and also to your bottom line. Undiagnosed diabetics are a catastrophic claim waiting to happen, while those who are diabetic present a significant cost, especially if they are not compliant with their care. The graph below demonstrates your populations risk for diabetes.

### 2018 A1C Risk Level Breakdown



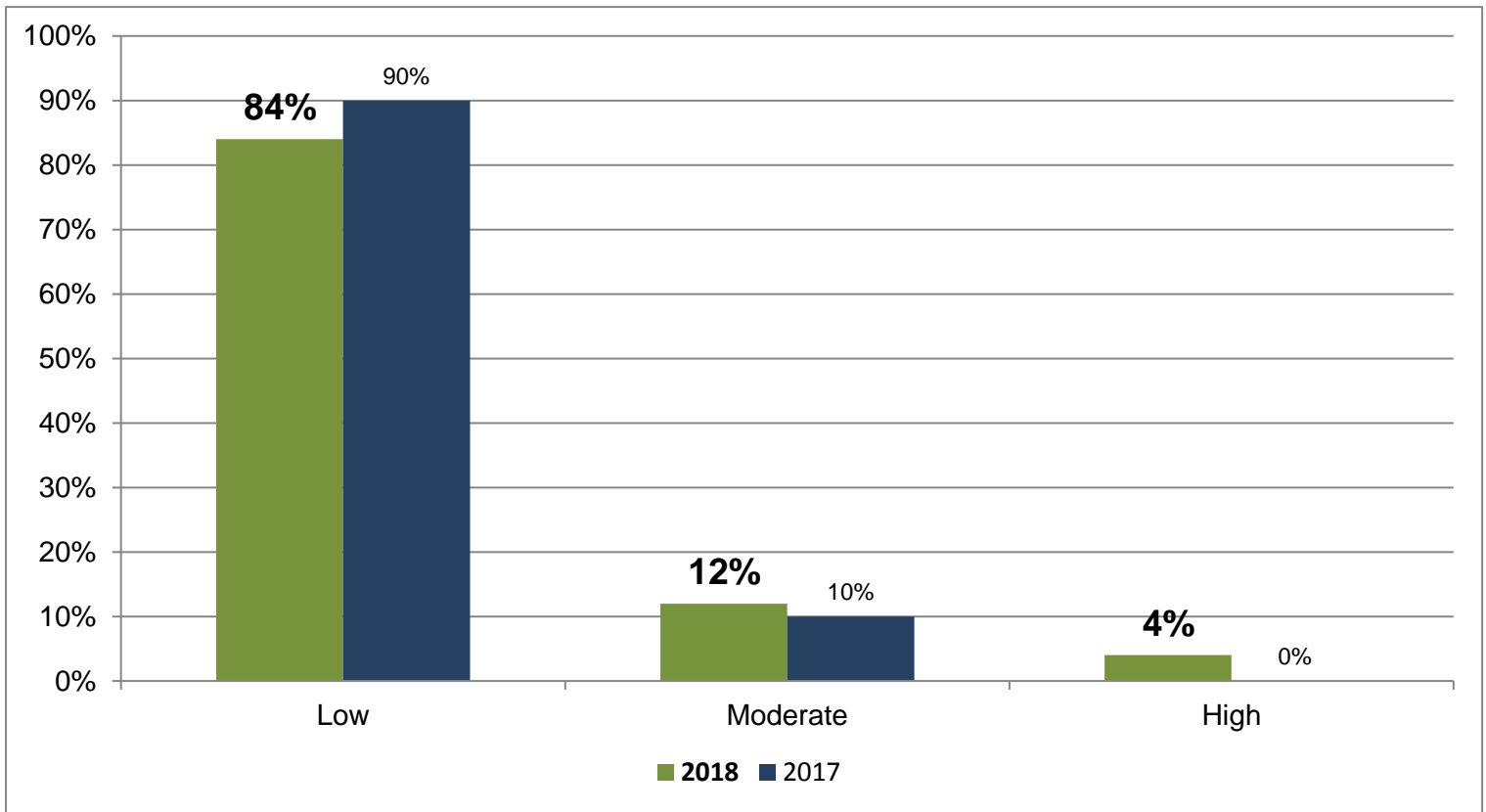
**Low Risk: <5.7% Moderate Risk: 5.7%-6.4% High Risk: ≥6.5%**

**Area of Attention:** 16% of participants fell into the moderate and high risk range

#### Risk Status Change for Repeat Participants

■	POSITIVE CHANGE	0
■	NO CHANGE	18
■	NEGATIVE CHANGE	2

## Year-to-Year Hemoglobin A1C Trends

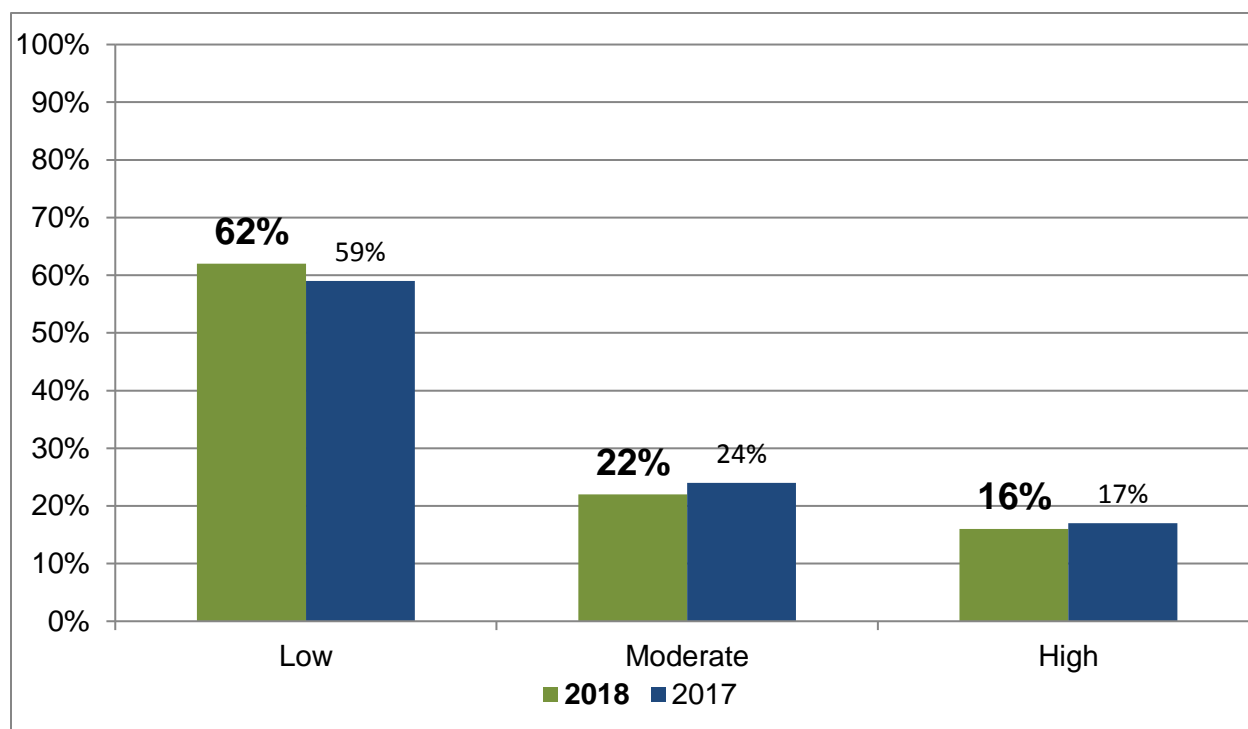


**Low Risk: <5.7%    Moderate Risk: 5.7%-6.4%    High Risk: ≥6.5%**

## Body Composition

### Body Mass Index

BMI is an indicator of excess body weight. Generally, those with a higher BMI are also more likely to suffer from high cholesterol, increased blood pressure, and diabetes. BMI does have its limitations, but overall is a good indication of a serious risk. The graph below demonstrates the participants risk breakdown of BMI.



Low- (18.5-29.9) Moderate- (30-39.9) High- (≥40)

**Area of Attention:** 38% of participants fell into the moderate and high risk range

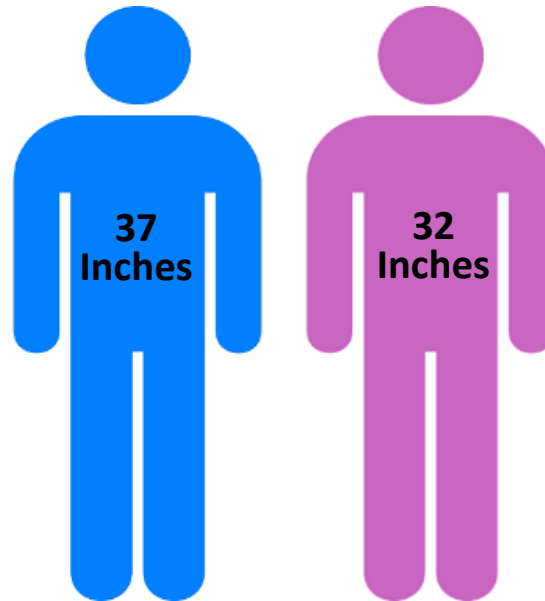
#### Risk Status Change for Repeat Participants

■	POSITIVE CHANGE	0
■	NO CHANGE	20
■	NEGATIVE CHANGE	0

## Average Waist Circumference

Waist circumference is an indicator of excess body weight. Generally, those with a higher waist circumference are also more likely to suffer from high cholesterol, increased blood pressure, and diabetes.

The graphic below provides the average waist measurement in inches of the male and female participants.



Low risk: < 40 inches

Moderate risk: 40 – 45 inches

High risk: > 45 inches

Low risk: <35 inches

Moderate risk: 35 – 40 inches

High risk: > 40 inches

**Area for Applause:** The average waist circumference for both males and females is in the low risk range.

## Nicotine Use

Nicotine use presents a serious risk to individuals. Those who abuse tobacco not only have increased rates of cancer and other diseases, but they are more likely to miss work. The CDC estimates that tobacco use costs \$156 billion in lost productivity each year and \$170 billion in healthcare expenditures (CDC, 2017). The table below summarizes your participant's tobacco use, as well as self-reported tobacco use.

	2018	2017
Tested Positive	9% (4 out of 44)	17% (5 out of 29)
Self-reported Nicotine Use	6% (4 out of 70)	17% (7 out of 40)

**Area of Attention:** Those who tested positive for nicotine use are not those who self-reported it on their HRA.

### Nicotine Change for Repeat Participants

■	POSITIVE CHANGE	0
■	NO CHANGE	20
■	NEGATIVE CHANGE	0

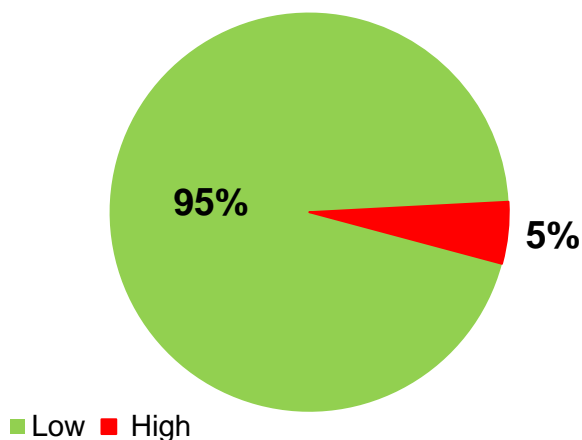
## Additional Testing

### Gamma-Glutamyltransferase (GGT) Test Results

GGT is used for diagnosing and monitoring disease of the liver, gallbladder, bile ducts and bile. Levels outside of the normal range could indicate any form of liver disease or biliary obstruction.

Elevated levels of GGT can also indicate alcoholic cirrhosis or individuals who are heavy drinkers.

### 2018 GGT Risk Level Breakdown



Low Risk: <66    High Risk: ≥66

### GGT Change for Repeat Participants

■	POSITIVE CHANGE	0
■	NO CHANGE	20
■	NEGATIVE CHANGE	0

## Critical Values

A Critical Value (CV) is when a testing metric is elevated to a critical range that requires immediate participant notification.

Clinical Reference Laboratory's registered nurses will reach out via phone and email/mail within 24 hours to inform participant of abnormal lab results. The RN provides recommended steps and follows up when warranted.

The Kapnick Strive Wellness Team will reach out to all individuals who fall within the critical range for blood pressure.

**SME had no reported critical values in 2018.**

## Stand-Out Stories

Participant A: By lowering their Total cholesterol and Triglycerides, they increased their health score by 10 points!! This moved them from overall moderate risk to low risk!

A total of 8 participants received a health score of 100!



## 2019 Wellness Strategy

- Increase health screening participation and year-round engagement via the Kapnick Strive Portal
  - Robust communication campaign
  - Strive for 5 Reward Points Program
  - Interactive wellness challenges (individual and/or team)
  - Implement interactive Lunch & Learns that will increase education about weight management, cholesterol, and diabetes
- Reasonable Alternative Standard health coaching program is available to those who did not meet the qualifying standard
  - Each qualifying participant received a personal outreach stating the enrollment process
  - Currently one employee has completed the RAS program
- Participants scoring 60 & below will receive a voluntary telephonic coaching call from a certified Kapnick Strive Health Coach to discuss lifestyle modifications to improve health. Two attempts will be made to the participant
  - A total of three high risk participants were provided two outreaches and we were able to connect with two of them
- Our Kickin' Butts Smoking Cessation Program is available at an additional cost to those who are looking to become tobacco free
- Wellness Committee consultation
  - Startup committee
- Health Fair Coordination
- Monthly communication materials

## Questions, comments or concerns?



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