

Strive

August 15, 2023

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2022 KEY FINDINGS

- All biometric averages are in the low-risk range
- 88% of repeat participants remained in the low-risk range or made a positive risk migration based on health score
- 88% of all participants scored in the ideal- or low-risk range
- No critical values were reported for 2023
- BMI and triglycerides decreased in repeat participants from 2022 to 2023
- Average health score remains in the **ideal** risk range
- 24.7% of members have a chronic condition compared to benchmark at 27.9%
- The PMPM cost of members with chronic conditions is 4.7% above benchmark
- There is room for improvement for members with a chronic condition & adherence to maintenance medication, especially for diabetics
- Every member who participated in the health screening also had at least 1 claim during 2022
- 57.6% of employees who screened had a wellness visit compared to 36.4% of employees who didn't screen
- Employees with screenings have an average cost of \$4,209 compared to employees without screenings at \$5,925, when excluding a high-cost claimant
- Employees who participated in the screening in both 2021 and 2022 experienced \$1,508 more in costs with mental illness being the diagnostic category with the highest cost and claim increase

WELLNESS PRESENTATIONS

- March Happiness Is...
- July Live Smart, Play Smart: Reducing the Risk of Skin Cancer
- September Relaxation Response
- November Managing Mental Health

WELLNESS CHALLENGES

- April 4th Annual Kapnick Strive Corporate Challenge: 24 participants
- July Hydration Station: 30 participants
- September Get Fit Crime Mystery: 18 participants
- November Maintain Don't Gain: 9 participants

STRIVE REWARD POINTS PROGRAM

Quarterly and Annual Raffles

MONTHLY WEBINARS

QUARTERLY MEDITATION MOMENTS

2022 EMPLOYEE EVENTS





TOTAL PARTICIPATION

50 REPEAT PARTICIPANTS



| YEAR | TOTAL PARTICIPATION | % OF EE Participation | AVG HEALTH SCORE |
|------|---------------------|-----------------------|---------------------|
| 2023 | 90 | 59% | 85 |
| 2022 | 72 | 44% | 85 |
| 2021 | 83 | 57% | 84 |
| 2020 | - | - | - |
| 2019 | 93 | 66% | 87.5 |
| 2018 | 101 | 63% | 84 |
| 2017 | 79 | 49% | 83 |
| 2016 | 100 | 61% | 79 |

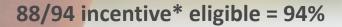


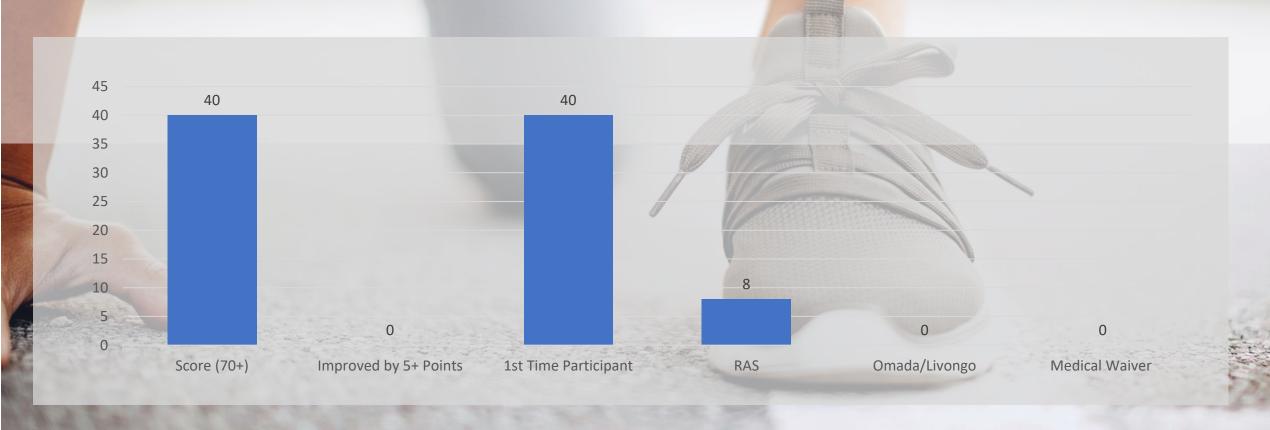
PARTICIPATION BY LOCATION



| LOCATION | 2023 | 2022 |
|--------------------|------|------|
| Ann Arbor | 57 | 53 |
| Chicago | 13 | 8 |
| Cleveland | 10 | 7 |
| At-home Screenings | 10 | 4 |

WELLNESS INCENTIVE BREAKDOWN







PROGRAM OUTREACHES

CRITICAL VALUES

There were no critical values reported in 2023

HEALTH COACHING

- 60 or below: 3 participants scored 60 or below
 - A health coach was able to connect with 0 out of the 3 participants
- RAS health coaching program: 10 eligible
 - 10 enrolled (including 4 Korea employees)
 - 8 completed to-date

BIOMETRIC AVERAGES

| Biometric | 2023 Repeat Participants | 2023 AVG | 2022 AVG | 2021 AVG | Strive AVG | Ideal Range |
|----------------------|-----------------------------|----------|----------|----------|------------|-------------|
| Health Score | 84 | 85 | 85 | 84 | 76 | 70 - 100 |
| ВМІ | 30.5 | 29.2 | 30.9 | 30.5 | 30 | 18.5 - 29.9 |
| Waist/Hip Ratio | 0.85 | 0.83 | 0.85 | 0.89 | 0.88 | <= 0.95 |
| BP: Systolic | 119 | 117 | 116 | 117 | 115 | ≤121mmHg |
| BP: Diastolic | 77 | 74 | 73 | 75 | 75 | ≤81mmHg |
| Total Cholesterol | 187 | 184 | 188 | 189 | 193 | <200mg/dL |
| HDL Cholesterol | 58 | 58 | 59 | 60 | 54 | >=50 |
| LDL Cholesterol | 108 | 105 | 107 | 106 | 112 | <=129 |
| Triglycerides | 107 | 106 | 107 | 112 | 134 | <150 |
| Blood Glucose | 91 | 91.5 | 93.5 | 92.4 | 100 | ≤100mg/dL |
| Hemoglobin A1C | 5.4 | 5.4 | 5.4 | 5.4 | 5.6 | <5.7% |

^{*} Strive AVE Benchmarking reflects data for all Kapnick Strive Biometric Clients

AVERAGE SCORE – 85

Ideal = 100-85

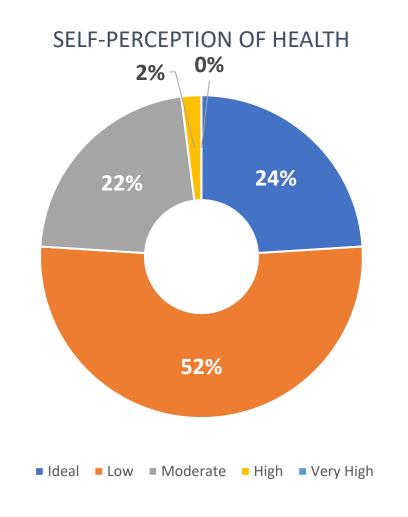
Low Risk = 84-70

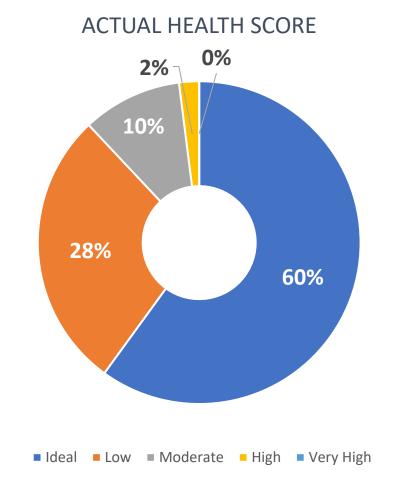
Moderate Risk = 69-60

High Risk = 59-50

Very High Risk = 49-0

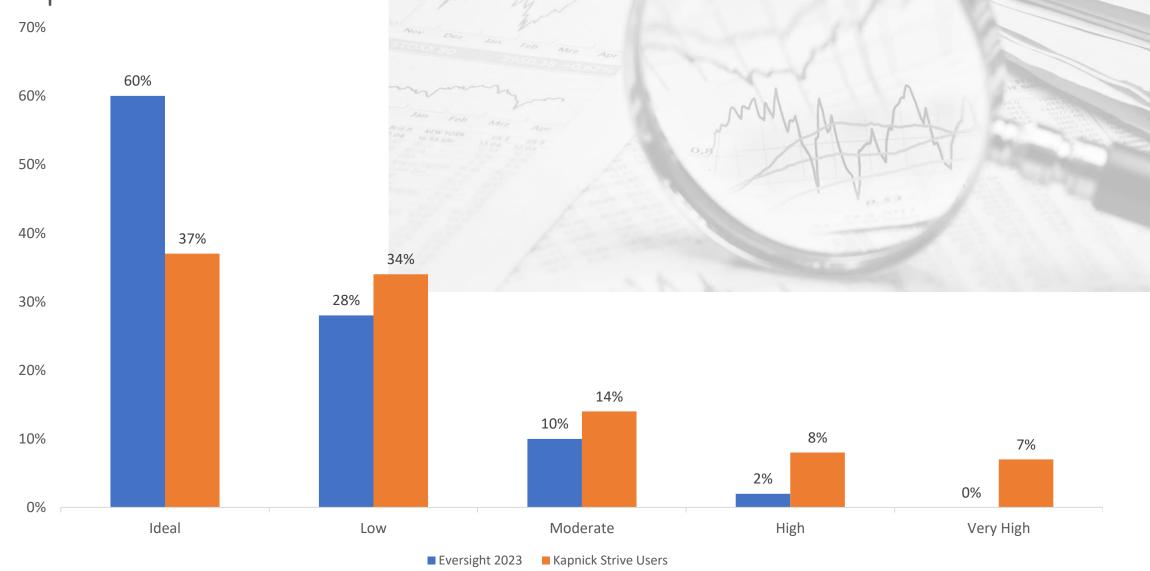
SELF-PERCEPTION VS ACTUAL HEALTH







HEALTH SCORE BENCHMARKING

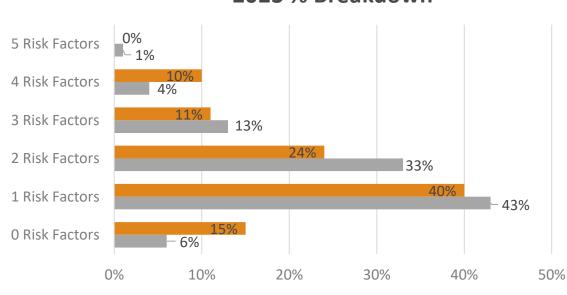




METABOLIC SYNDROME RISK

Prevalence of Metabolic Syndrome – 3 or more risk factors





The National Institutes of Health guidelines define metabolic syndrome as having three or more of the following traits, including traits you're taking medication to control:

- •Large waist A waistline that measures at least 35 inches for women and 40 inches for men
- •High triglyceride level 150 milligrams per deciliter (mg/dL) or higher of this type of fat found in blood
- •Reduced "good" or HDL cholesterol Less than 40 mg/dL in men or less than 50 mg/dL in women of high-density lipoprotein (HDL) cholesterol
- •Increased blood pressure 130/85 millimeters of mercury (mm Hg) or higher
- •Elevated fasting blood sugar 100 mg/dL or higher

■ 2022 % of Participants



REPEAT PARTICIPANT RISK CHANGE

REMAINED IDEAL/LOW AND/OR MADE **POSITIVE RISK MIGRATION**



44 388%

REMAINED MODERATE OR HIGH/V HIGH



MADE A NEGATIVE RISK MIGRATION





REPEAT PARTICIPANT BIOMETRIC RISK CHANGE

Total Cholesterol

| Remained low positive risl | risk or made a k migration | Remained in moderate or high risk | | Made a negative risk migration | |
|----------------------------|-------------------------------|-----------------------------------|-----|--------------------------------|-----|
| | 66% | <u> </u> | 18% | | 16% |

Blood Glucose

| | risk or made a k migration | Remained in moderate or high risk | | Made a negative risk migration | |
|---|-------------------------------|-----------------------------------|----|--------------------------------|----|
| • | 88% | <u>"</u> | 4% | | 8% |

Systolic Blood Pressure

| | risk or made a k migration | Remained in moderate or high risk | | Made a negative risk migration | |
|---|-------------------------------|-----------------------------------|-----|-----------------------------------|-----|
| • | 56% | <u>:</u> | 16% | | 28% |

Hemoglobin A1C

| | risk or made a k migration | Remained in moderate or high risk | | Made a negative risk migration | |
|----------|-------------------------------|--------------------------------------|-----|--------------------------------|-----|
| 3 | 74% | <u> </u> | 14% | | 12% |

Diastolic Blood Pressure

| | risk or made a k migration | | moderate or risk | egative risk ration |
|---|-------------------------------|-----------|---------------------|------------------------|
| • | 68% | <u>••</u> | 8% | 24% |

Tobacco

| gative or made sk migration | Remaine | d positive | negative risk gration |
|--------------------------------|----------|------------|--------------------------|
| 94% | <u>:</u> | 4% | 2% |

TOP RISK FACTORS

DIABETES



HEART HEALTH



NICOTINE USE













Chronic Conditions & Health Screening Claims Analysis



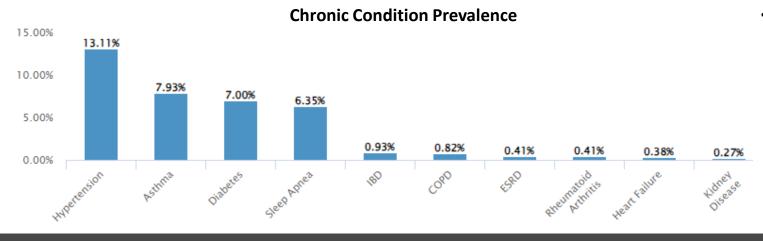


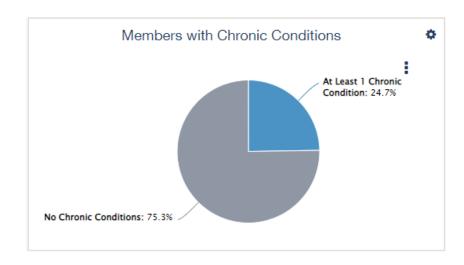
Chronic Condition Prevalence

Summary:

- 24.7% of members on Eversight's health plan have at least 1 chronic condition
 - This is **below** the Kapnick book of business benchmark which is 27.9%
- Asthma, sleep apnea, IBD and ESRD all have a higher prevalence as compared to benchmark

- All members enrolled in the health plan are included
- Data is from the most recent 12 months on an incurred basis





- Chronic condition prevalence in the Kapnick benchmark is as follows:
 - Hypertension: 16.82%
 - Diabetes: 8.58%
 - Asthma: 7.33%
 - Sleep Apnea: 5.01%
 - COPD: 1.20%
 - Heart Failure: 1.08%
 - IBD: 0.61%
 - Kidney Disease: 0.56%
 - Rheumatoid Arthritis: 0.47%
 - ESRD: 0.14%





Chronic Condition Cost

Total Cost & PMPM Cost of Members with and without Chronic Conditions

| Total Allowed Amount | Total Allowed with Chronic Conditions | Chronic Condition % of Total Cost | Eversight PMPM <u>without</u> Chronic Condition | Eversight PMPM <u>with</u> Chronic Condition | Benchmark PMPM <u>without</u> Chronic Condition | Benchmark PMPM <u>with</u> Chronic Condition |
|-------------------------|--|--------------------------------------|---|--|---|--|
| \$1,611,661 | \$866,044 | 54% | \$235 | \$950 | \$217 | \$907 |
| | | | | | γ | |

- · All members enrolled in the health plan are included
- Data is from Jan 2022 through Dec 2022 on an incurred basis
- Benchmark reflects Kapnick's book of business benchmark (49k members)

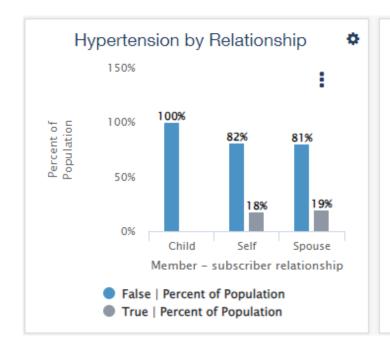
- The PMPM cost of members without chronic conditions is 8.3% above benchmark
- The PMPM cost of members with chronic conditions is 4.7% above benchmark

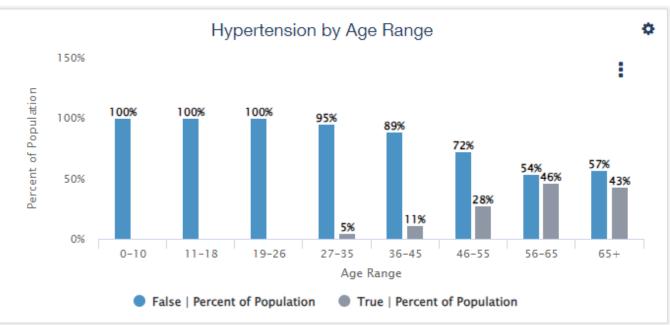




Hypertension: Demographics

- Total hypertensive members:
 - 2021:41
 - 2022: 44
- Total hypertensive employees:
 - 2021: 28
 - 2022: 29
- Total hypertensive spouses:
 - 2021: 12
 - 2022: 15
- Total hypertensive dependent children:
 - · 2021: 1
 - 2022: 0





- · All members enrolled in the health plan are included
- Data is from Jan 2022 through Dec 2022 on an incurred basis
- True = hypertensive members





Hypertension: Gaps in Care

| Year | Total Hypertensive Members | Total Hypertensive Members (enrolled full 12 months) | % Hypertensive Members (enrolled full 12 months) | Total Hypertensive Members with No Maintenance Rx (enrolled full 12 months) |
|------|-------------------------------|--|---|---|
| 2021 | 41 | 18 | 7.5% | 3 (16.7%) |
| 2022 | 44 | 20 | 9.9% | 4 (20.0%) |

• In 2021:

- 2 of the 3 members without maintenance drugs were employees & strive participants with health scores of 76 & 80
- The other member was a spouse & non-strive participant
- All 3 members were above age 40

• In 2022:

- 2 of the 4 members without maintenance drugs were employees & strive participants with health scores of 72 & 94
- 1 member was an employee & non-strive participant
- The other member was a spouse & non-strive participant
- All 4 members were above age 40
- None of the members in 2021 & 2022 were the same member

- All members enrolled in the health plan are included
- Data is from Jan 2022 through Dec 2022 on an incurred basis

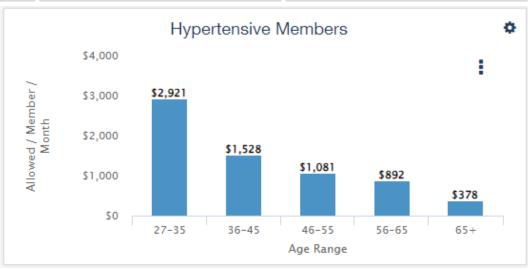




Hypertension: PMPM Cost

| Year | Hypertensive Members PMPM Cost | Hypertensive Members PMPM Cost (Excluding Claimants > \$120k) | Hypertensive Members PMPM Cost Benchmark |
|------|-----------------------------------|---|---|
| 2021 | \$841 | \$841 | \$996 |
| 2022 | \$1,196 | \$872 | \$920 |





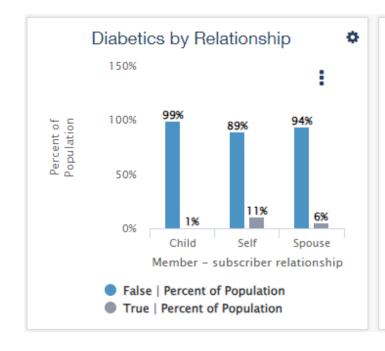
- Employees & spouses enrolled in the health plan were included <u>in the</u> <u>table</u> (dependent children excluded)
- In the middle column, 1 member with claims totaling \$174k due to a hemorrhagic stroke was excluded
- All members enrolled in the health plan are included in the bar charts
- Data is from Jan 2022 through Dec 2022 on an incurred basis
- Benchmark reflects Kapnick's book of business benchmark (49k members)

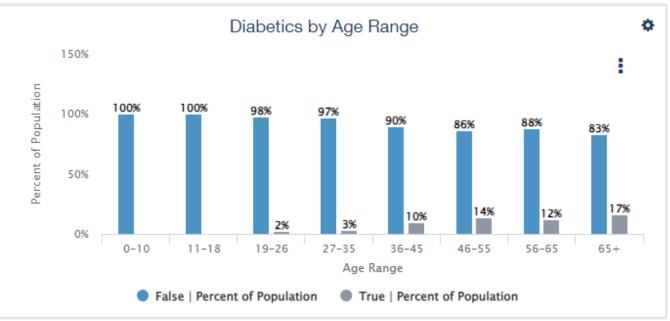




Diabetes: Demographics

- Total diabetic members:
 - · 2021: 23
 - 2022: 21
- Total diabetic employees:
 - 2021: 19
 - · 2022: 16
- Total diabetic spouses:
 - 2021:4
 - 2022:4
- Total diabetic dependent children:
 - · 2021: 0
 - 2022: 1





- · All members enrolled in the health plan are included
- Data is from Jan 2022 through Dec 2022 on an incurred basis
- True = diabetic members





Diabetes: Gaps in Care

| Year | Total Diabetic Members | Total Diabetic Members (enrolled full 12 months) | % Diabetic Members (enrolled full 12 months) | Total Diabetic Members with No Maintenance Rx (enrolled full 12 months) |
|------|------------------------|---|---|---|
| 2021 | 23 | 12 | 5.0% | 3 (25.0%) |
| 2022 | 21 | 15 | 7.4% | 8 (53.3%) |

• In 2021:

- 1 of the 3 members without maintenance drugs was an employee & strive participant with health scores of 74
- 2 of the 3 members were employees & non-strive participants
- All 3 members were above age 40

• In 2022:

- 4 of the 8 members without maintenance drugs were employees & strive participants with health scores of 60, 76, 76 & 94
- 3 of the 8 members were employees & non-strive participants
- The other member was a spouse & non-strive participant
- 7 of the 8 members were above age 40
- 2 of the members in 2021 & 2022 were the same member
 - Both members were non-strive participants in 2021 then had scores of 60 & 76 in 2022

- All members enrolled in the health plan are included
- Data is from Jan 2022 through Dec 2022 on an incurred basis

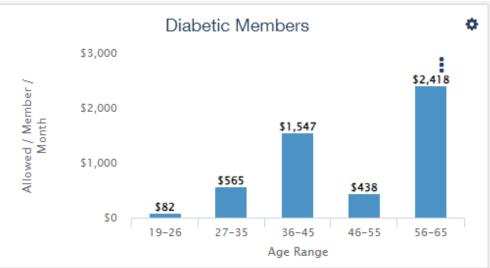




Diabetes: PMPM Cost

| Year | Diabetic Member PMPM Cost | Diabetic Member PMPM Cost (Excluding Claimants > \$80k) | Diabetic Member PMPM Cost Benchmark |
|------|------------------------------|---|--|
| 2021 | \$1,261 | \$943 | \$1,277 |
| 2022 | \$1,114 | \$911 | \$1,169 |





- Employees & spouses enrolled in the health plan were included in the table (dependent children excluded)
- In the middle column, 1 member with claims totaling \$90k due to an organ transplant was excluded
- All members enrolled in the health plan are included in the bar charts
- Data is from Jan 2022 through Dec 2022 on an incurred basis
- Benchmark reflects Kapnick's book of business benchmark (49k members)





Screening Overview

| Participated in the Health Screening | Employees |
|--|-----------|
| Enrolled in Health Plan in 2022 | 76 |
| Enrolled all 12 Months | 59 |
| Had 0 Claims | 0 |
| % Total w/ 0 Claims (Enrolled 12 Months) | 0.0% |

| Did not Participate in the Health Screening | Employees |
|---|-----------|
| Enrolled in Health Plan in 2022 | 67 |
| Enrolled all 12 Months | 33 |
| Had 0 Claims | 4 |
| % Total w/ 0 Claims (Enrolled 12 Months) | 12.1% |

- Of the 4 non-strive participants with no claims:
 - 2 were male & 2 were female
 - 3 were from MI & 1 from IL
 - Ages were 30, 39, 48 & 51

- Employees enrolled in the health plan & eligible to participate in health screenings in 2022 were included (spouses & dependent children excluded)
- Data is from Jan 2022 through Dec 2022 on an incurred basis





Wellness Visit

| Participated in the Health Screening | Employees |
|--|-----------|
| Enrolled in Health Plan in 2022 | 76 |
| Enrolled all 12 Months | 59 |
| Had a Wellness Visit | 34 |
| % with a Wellness Visit (Enrolled 12 Months) | 57.6% |

| Did not Participate in the Health Screening | Employees |
|--|-----------|
| Enrolled in Health Plan in 2022 | 67 |
| Enrolled all 12 Months | 33 |
| Had a Wellness Visit | 12 |
| % with a Wellness Visit (Enrolled 12 Months) | 36.4% |

• Those who participated in the health screening had a significantly higher rate of also having an annual wellness visit

- Employees enrolled in the health plan & eligible to participate in health screenings in 2022 were included (spouses & dependent children excluded)
- Data is from Jan 2022 through Dec 2022 on an incurred basis





Screenings & Cost

| | Meml | bers with Screenings | • | Members without Screenings (EEs Only) | | | Es Only) |
|---|-------------------------------|---------------------------------------|--------------------|--|-------------------------------|---------------------------------------|--------------------|
| | Member ID (Count Distinct) | Medical/RX Provider Allowed Amount | Allowed per Member | | Member ID (Count Distinct) | Medical/RX Provider Allowed Amount | Allowed per Member |
| 1 | 76 | \$411,439 | \$5,414 | 1 | 67 | \$396,983 | \$5,925 |
| | Members wi | ith Screenings (Excl | 1 HCC) | | No member | without a screening | was a |
| | Member ID (Count Distinct) | Medical/RX Provider Allowed Amount | Allowed per Member | No member without a screening was a high-cost claimant | | | |
| 1 | 75 | \$315,660 | \$4,209 | | | | |

- Members with screenings cost \$511 less than members without screenings
- When excluding a member with total claims of \$96k due to TMJ/jaw surgery, members with screenings cost \$1,716 less than members without screenings

- Employees enrolled in the health plan & eligible to participate in health screenings in 2022 were included (spouses & dependent children excluded)
- Data is from Jan 2022 through Dec 2022 on an incurred basis





Cost by Health Score

| | Health Score for All Members | | | | Hea | alth Score 60-69 | ٥ |
|---------------------|-------------------------------|--|-----------------------|-------------|--|--|-----------------------|
| | Member ID (Count Distinct) | Medical/RX Provider Allowed Amount | Allowed per Member | | Member ID (Count Distinct) | Medical/RX Provider Allowed Amount | Allowed per Member |
| 1 | 75 | \$315,660 | \$4,209 | 1 | 8 | \$30,995 | \$3,874 |
| Health Score 85-100 | | | | | Health Score 50-59 | | |
| | Member ID (Count Distinct) | Medical/RX Provider Allowed Amount | Allowed per Member | | Member ID (Count Distinct) Medical/RX Provider Allow Amount | | Allowed per Member |
| 1 | 44 | \$213,953 | \$4,863 | 1 | 2 | \$1,047 | \$524 |
| | Hea | alth Score 70-84 | ٥ | | He | ealth Score 0-49 | ۰ |
| | Member ID (Count Distinct) | Medical/RX Provider Allowed Amount | Allowed per Member | | Member ID (Count Distinct) | Medical/RX Provider Allowed Amount | Allowed per Member |
| 1 | 21 | \$69,664 | \$3,317 | No Results. | | | |

- Employees enrolled in the health plan & eligible to participate in health screenings in 2022 were included (spouses & dependent children excluded)
- 1 member with total claims of \$96k due to TMJ/jaw surgery was excluded. This member had a health score of 69
- Data is from Jan 2022 through Dec 2022 on an incurred basis





Members who Participated in the Screening in 2021 & 2022

| | Members with Screenings | | | | | | |
|---|--|----|--|-----------------------|--|--|--|
| | Year number Member ID (Count Distinct) | | Medical/RX Provider Allowed Amount | Allowed per Member | | | |
| 1 | 2021 | 46 | \$133,723 | \$2,907 | | | |
| 2 | 2022 | 49 | \$216,338 | \$4,415 | | | |

- Members who participated in the screening both years experienced \$1,508 more in costs
- More members experienced a health score decrease than a health score increase; however, the per member cost increased for members with a health score increase, decrease or for a score that stayed the same
- Mental illness was the diagnostic category with the highest cost and claim increase followed by pregnancy/childbirth

Assumptions:

- Employees enrolled in the health plan & eligible to participate in health screenings in 2022 were included (spouses & dependent children excluded)
- 1 member with total claims of \$96k due to TMJ/jaw surgery was excluded. This member had a health score of 69 & a prior year score of 100
- Data is from Jan 2022 through Dec 2022 on an incurred basis

Repeat Participants

| Health Score Increased 🌣 | | | | | | | | |
|--------------------------|-------------|-------------------------------|--|-----------------------|--|--|--|--|
| | Year number | Member ID (Count Distinct) | Medical/RX Provider Allowed Amount | Allowed per Member | | | | |
| 1 | 2021 | 16 | \$75,451 | \$4,716 | | | | |
| 2 | 2022 | 16 | \$99,881 | \$6,243 | | | | |
| | He | alth Score Stay | ed the Same | ٥ | | | | |
| | Year number | Member ID (Count Distinct) | Medical/RX Provider Allowed Amount | Allowed per Member | | | | |
| 1 | 2021 | 8 | \$17,422 | \$2,178 | | | | |
| 2 | 2022 | 9 | \$26,655 | \$2,962 | | | | |
| | | Health Score D | ecreased | ۰ | | | | |
| | Year number | Member ID (Count Distinct) | Medical/RX Provider Allowed Amount | Allowed per Member | | | | |
| 1 | 2021 | 22 | \$40,850 | \$1,857 | | | | |
| 2 | 2022 | 24 | \$89,802 | \$3,742 | | | | |





Repeat Participants

| | Health Score Improvement | | | | | | | | |
|---|--------------------------|----------------------------------|--|--|---|--|--|---|-----------------------|
| | Year number | Member ID (Count Distinct) | Medical/RX Provider Allowed Amount | Medical Provider Allowed Amount | RX Provider Allowed Amount | Medical Claim Count | RX Claim Count | Medical/RX Claim Count | Allowed per Member |
| 1 | 2021 | 16 | \$75,451 | \$70,966 | \$4,485 | 282 | 178 | 460 | \$4,716 |
| 2 | 2022 | 16 | \$99,881 | \$89,753 | \$10,129 | 397 | 217 | 614 | \$6,243 |
| | | | | Health Sc | ore Improver | ment | | | 0 |
| | Year number | Member ID (Count Distinct) | Hypertension Maintenance RX Claim Count | Diabetes Maintenance RX Claim Count | Cholesterol Maintenance RX Claim Count | Hypertension Maintenance RX Amount Paid | Diabetes Maintenance RX Amount Paid | Cholesterol Maintenance RX Amount Paid | Allowed Rx PMPM |
| 1 | 2021 | 16 | 23 | 0 | 9 | \$227 | \$0 | \$8 | \$23 |
| 2 | 2022 | 16 | 23 | 4 | 7 | \$243 | \$0 | \$54 | \$53 |

- Members with a health score improvement from 2021 to 2022 experienced \$1,527 more in costs
- 16 members fell into this category totally \$24k in additional costs
- Medical costs increase due to mental illness & diseases of the digestive system
- Diabetes maintenance medication utilization increased in this population

- Employees enrolled in the health plan & eligible to participate in health screenings in 2022 were included (spouses & dependent children excluded)
- Data is from Jan 2022 through Dec 2022 on an incurred basis









CONSIDERATIONS

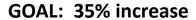


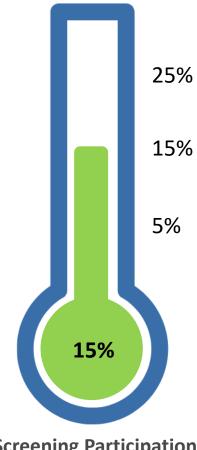
PROGRESS BY QUARTER

| | 2022 YTD | 2023 Q1 | 2023 Q2 |
|--|----------|---------|---------|
| Active Users *# of unique users per quarter and YTD | 147 | 37 | 103 |
| Total Points Tracked *per quarter, cumulative YTD | 178,515 | 22,261 | 261,221 |
| % of Census Active *# unique users/census per quarter | 95% | 23% | 64% |
| Reached 500 or more points *# of unique users per quarter | 83 | 15 | 4 |
| Reached 1000 or more points *# of unique users per quarter | 57 | 83 | 3 |
| Health Assessments Completed *# of completions per quarter | 62 | 35 | 70 |



STRIVE 2023 PROGRAMMING GOAL





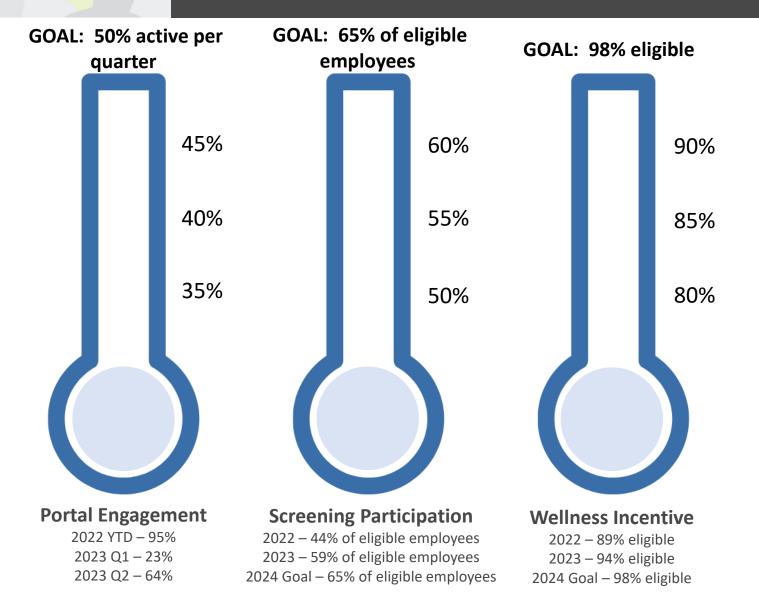
Screening Participation

2022 - 72 participants (44%)

2023 - 90 participants (59%)



STRIVE 2023-2024 GOALS





2023 GOALS AND STRATEGIES

| 2023 Goals | 2023 Strategies | Overall Strategies |
|---|---|---|
| Target Top Health Risks Diabetes Heart Health Nicotine Use | Promote participation in wellness challenges that focus on heart health, weight management, nutrition, etc. Push for Omada and Livongo utilization Nicotine Cessation campaign | Advertise quarterly wellness testimonials or participant spotlights Distribute an updated wellness needs and interest survey Utilization of Strive Health Hub to increase utilization of current resources (benefits, Wellness Portal, etc.) Rewards Point Program – utilize Tango Option 1: \$500 annual 4 quarterly winners @ \$25 (\$400) 1 annual winner @ \$100 Option 2: \$800 annual 3 quarterly winners @ \$50 (\$600) 1 annual winner @ \$200 Option 3: \$1,000 annual 4 quarterly winners @ \$50 (\$800) 2 annual winners @ \$100 OR 1 annual winner @ \$200 |
| Increase screening participation by 6% | Prize raffle – anyone that logins and signs up for their health screening will be entered into a raffle Increase wellness incentive amount Allow covered spouses to participate in screenings Increased screening communications | |
| Encourage RAS enrollment and completion | Communicate Omada and Livongo as RAS options along with the Strive RAS health coaching program | |

2023 WELLNESS CALENDAR

- Awareness Observance Dates
- Wellness Challenge
- Wellness Presentation
- HRA/Quarterly Reward Points Dates
- Other

Patient Experience & Empowerment

National Drugs & Alcohol Facts Week: 1/20 -



The Cost of Health & Self-Investment

- Wear Red Day: 2/5
- African Heritage & Health Week: 2/1 2/7
- Nutrition 101: 2/20 3/13
- SMART Workshop: 2/16, 12:00 1:00 PM



Practical Nutrition & Your Relationship with Food

- Neurodiversity Celebration Week: 3/21 -
- Q1 Reward Points Due: 3/31
- Nutrition 101: 2/20 3/13



The Environment & You

- National Oral Health Month
- Earth Day: 4/22
- Strive Corporate Challenge: 4/3 4/21

All About Allergies

- Women's Health Month
- Mental Health Awareness Week: 5/10 5/16
- The Benefits of Spending Time in the Great Outdoors: 5/18, 12:00 - 1:00 PM



Children's Mental Health

- National Migraine & Headache Awareness Month
- Q2 Reward Points Due: 6/30
- Summer Fun: 6/19 7/17



Hearing Loss & Ear Safety

- UV Safety Month
- International Self-Care Day: 7/24
- Summer Fun: 6/19 7/17



Cannabis: Reducing Harm

- International Overdose Awareness Day: 8/31
- Breaking Burnout: 8/10, 12:00 1:00 PM

Ergonomics, Posture, & Reducing Pain

- Pain Awareness Month
- Q3 Reward Points Due: 9/30
- Beat the Flu: 9/15 9/29



Disillusionment, Community Action, & Self-Care

World Food Day: 10/16



Perfectionism & OCD

- American Diabetes Month
- World Diabetes Day: 11/14
- Financial Wellness: 11/2, 12:00 1:00 PM



Disconnect & Reconnect (To Your Youth)

- Human Rights Day: 12/10
- Disconnect & Reconnect: 12/1 12/15



STAND-OUT-STATS & STORIES

Participant A: Improved their health score by 14. They achieved this by improving their total and LDL cholesterol!

Participant B: Improved their health score by 11 points! They achieved this by lowering their blood pressure and cholesterol.

7 participants improved by 5+ points!







14 PARTICIPANTS RECEIVED A PERFECT HEALTH SCORE OF 100







RESULTS BIUIVIE I I **BIOMETRIC**



BIOMETRIC DESCRIPTIONS



CHOLESTEROL

A fat-like, waxy substance found in the blood. In excess, it can form tough, fatty plaques that clog arteries, which can increase the risk of heart disease.



BLOOD PRESSURE

Blood pressure is another main factor in determining overall heart health. Systolic pressure is the pressure in the arteries when the heart is contracting. Diastolic blood pressure is the pressure on the walls of the arteries when the heart is relaxing.



BLOOD GLUCOSE & HEMOGLOBIN A1C

Blood glucose is sugar that the blood stream carries to all the cells in the body to supply energy. High blood glucose for a prolonged period can cause damage to the kidneys, eyes, and other organs. Hemoglobin A1C measures average glucose levels over a 2–3-month period and is the best predictor and indicator of diabetes.



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.



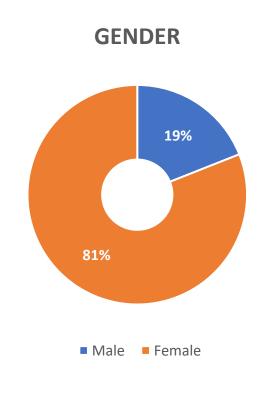
Nicotine use presents a serious risk to individuals. Those who abuse tobacco not only have increased rates of cancer and other diseases, but they are more likely to miss work. The CDC estimates that tobacco use costs \$156 billion in lost productivity each year and \$170 billion in healthcare expenditures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

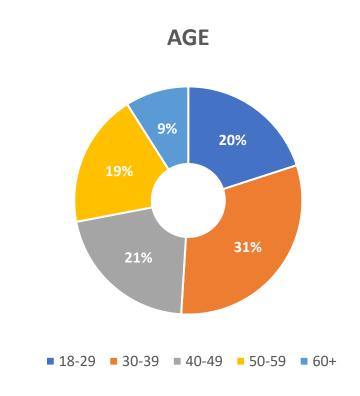
GAMMA-GLUTAMYLTRANSFERASE (GGT)

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.



2023 DEMOGRAPHICS





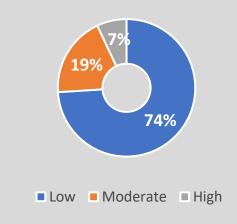
AVERAGE - 41



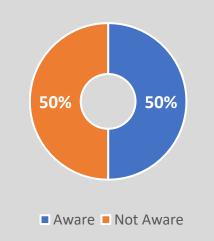
HEART HEALTH: TOTAL CHOLESTEROL

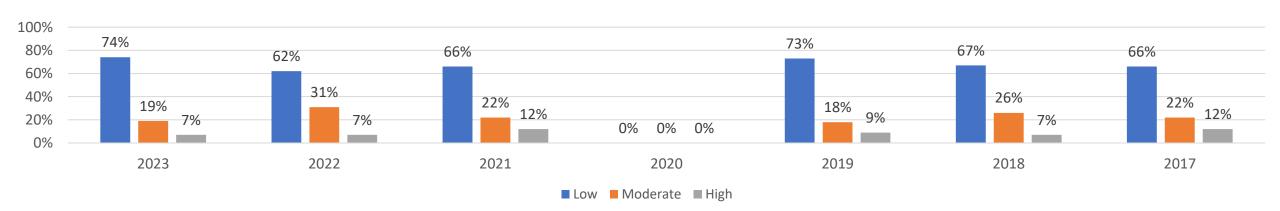
(HDL + LDL + TRIGLYCERIDES)

TOTAL CHOLESTEROL BREAKDOWN



HIGH RISK AWARENESS

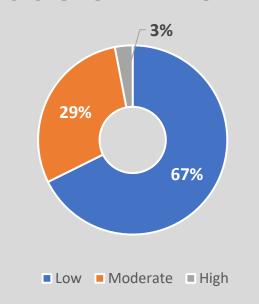




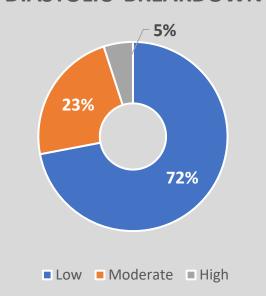


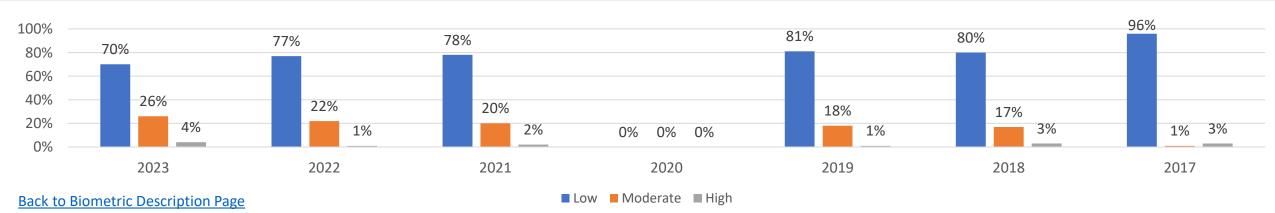
HEART HEALTH: BLOOD PRESSURE

SYSTOLIC BREAKDOWN



DIASTOLIC BREAKDOWN

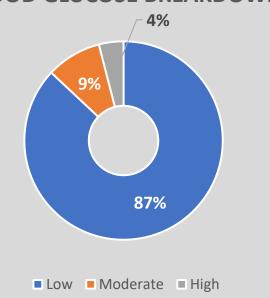


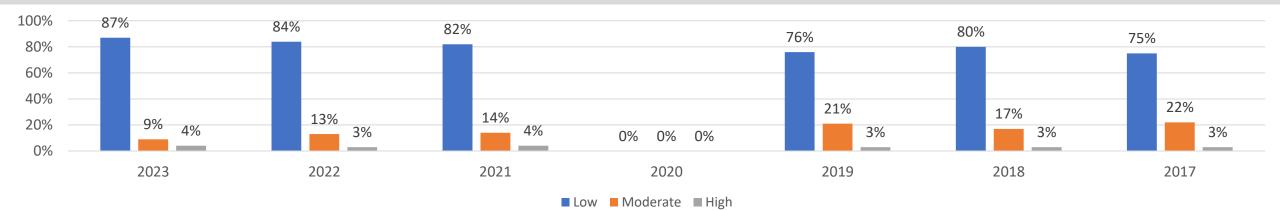




DIABETES: BLOOD GLUCOSE

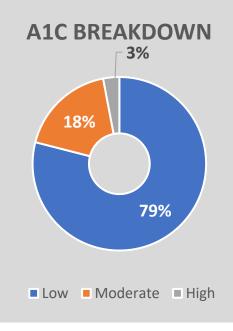
BLOOD GLUCOSE BREAKDOWN



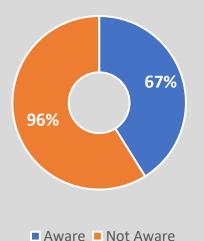




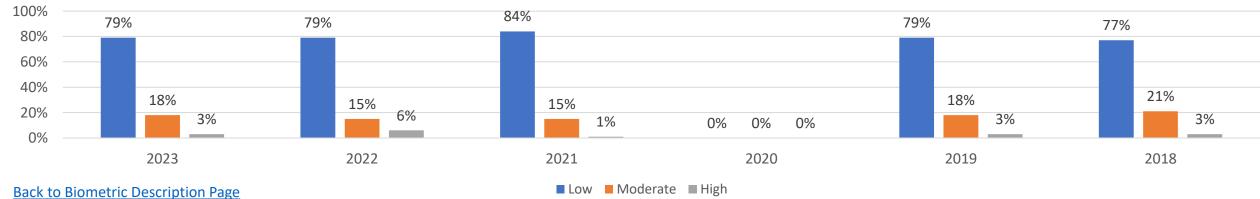
DIABETES: HEMOGLOBIN A1C



HIGH RISK AWARENESS

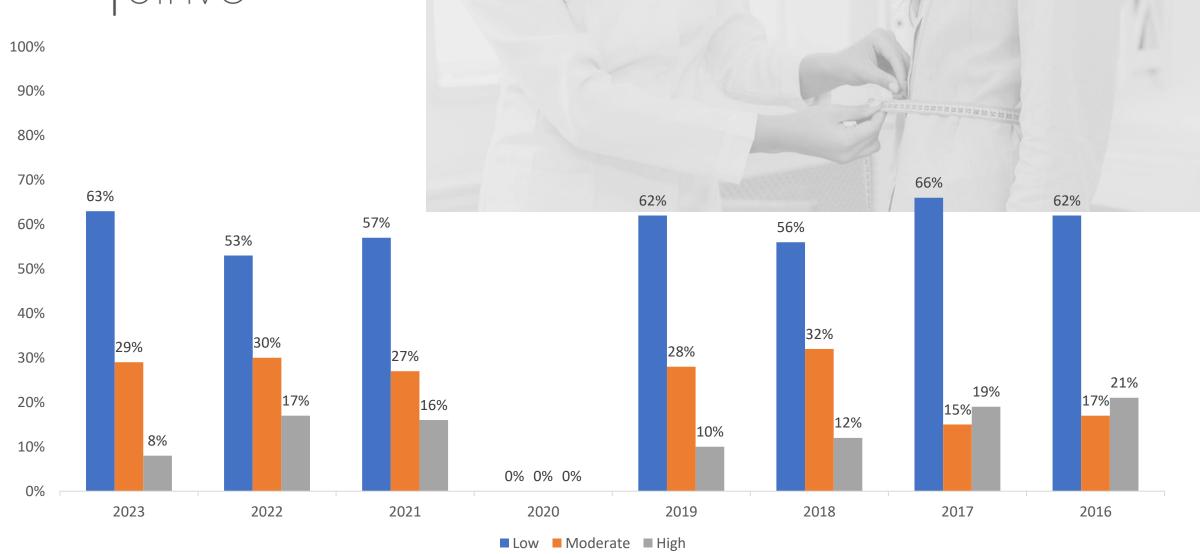






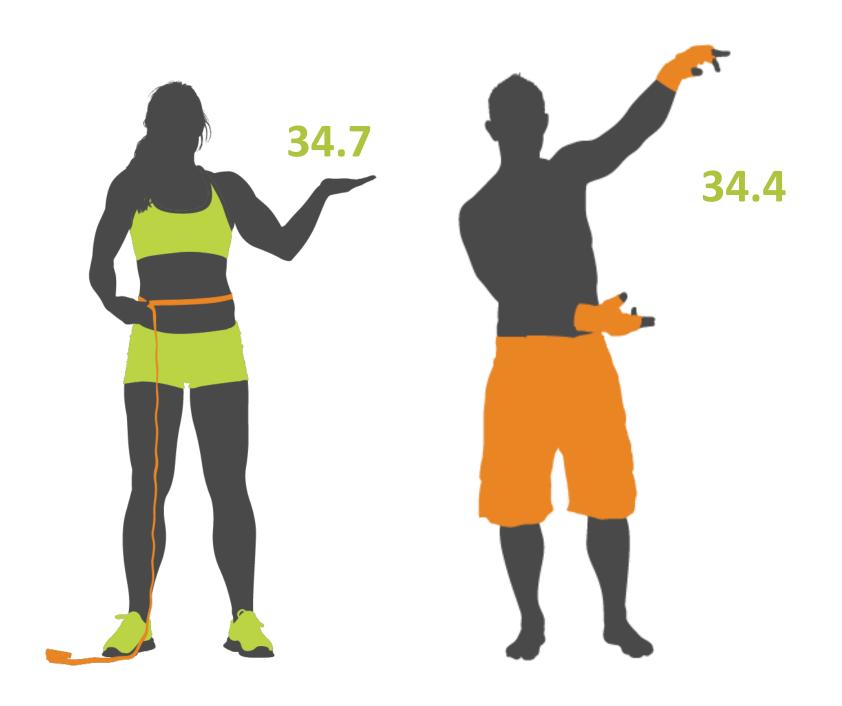


BODY COMPOSITION: BODY MASS INDEX



AVERAGE WAIST CIRCUMFERENCE FOR MEN AND WOMEN

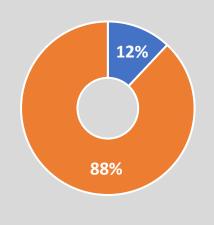






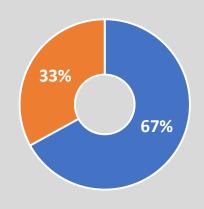
NICOTINE USE

TESTED POSITIVE

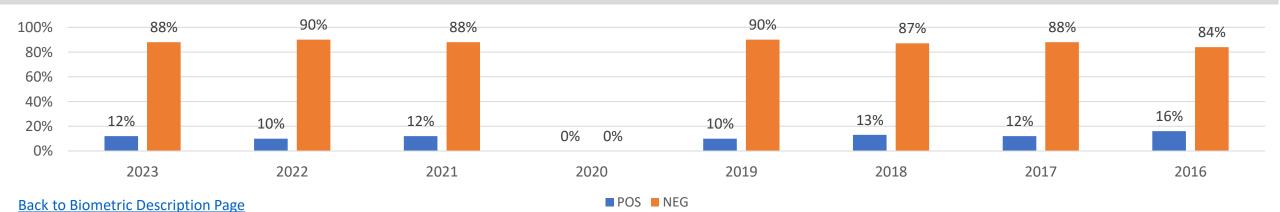


■ POS ■ NEG

INTERESTED IN QUITTING









GAMMA-GLUTAMYLTRANSFERASE (GGT) TEST RESULTS

