



# Executive Review

April 30, 2025





## Table of Contents



5. Lens Analysis

6. Goals & Strategies

7. Biometric Risk Breakdown

pg. 18

pg. 32

pg. 44

## All Participants



- All biometric averages are in the low-risk range
- 93% of all participants scored in the ideal- or low-risk range
- No critical values were reported for 2024
- Average health score remains in the ideal risk range
- The PMPM cost of members with chronic conditions is 2x higher than members without chronic conditions.
- The number of hypertensive members with no maintenance Rx decreased from 9 in 2023 to 3 in 2024.
- There were no Strive members identified as a high-risk diabetic in 2024.
- Members who participated in the health screening accounted for 3.4% of members with no claims compared to 6.7% of members who did not participate in the screening.
- The percentage of members with a wellness and/or office visit is 6.5% higher in the population of Strive participants compared to non-Strive participants.
- Members with screenings had a higher average cost compared to members without screenings.

## Repeat Participants

- 95% of repeat participants remained in the low-risk range or made a positive risk migration based on health score
- Cholesterol, blood pressure, and A1C decreased in repeat participants from 2023 to 2024
- Members who had a health score increase averaged a 124% increase in costs.
- Repeat participants experienced a 41% increase in costs.



# Employee Events

## **2024 Presentations**

- Positive Effects of Inclusion on Employee Well-Being
- Stress Busters
- The Healthy Traveler
- Substance Abuse, Overdose Awareness, & Preventions

## **Additional Offerings**

- 12 Strive Monthly Webinars
- 12 Strive Monthly Newsletters
- 12 Custom Monthly Communications
- 4 Meditation Moments



## **2024 Challenges**

- Annual Corporate Challenge: 14
   participants
- The Beat Goes On: 9 participants
- Hydration Station: 15 participants
- Flex Your Flexibility: 10 participants
- Gratitude Challenge: 6 participants

## **2024 Health Screenings**

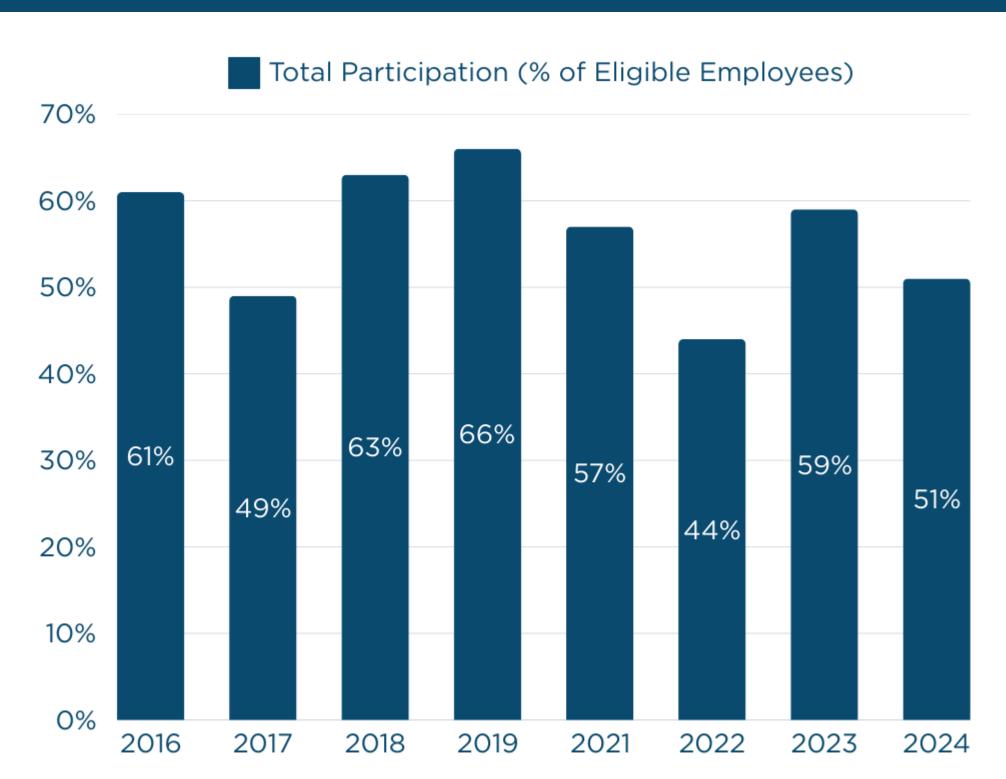
- 5 Events
- 10 Home Screenings



# Total Screening Participation

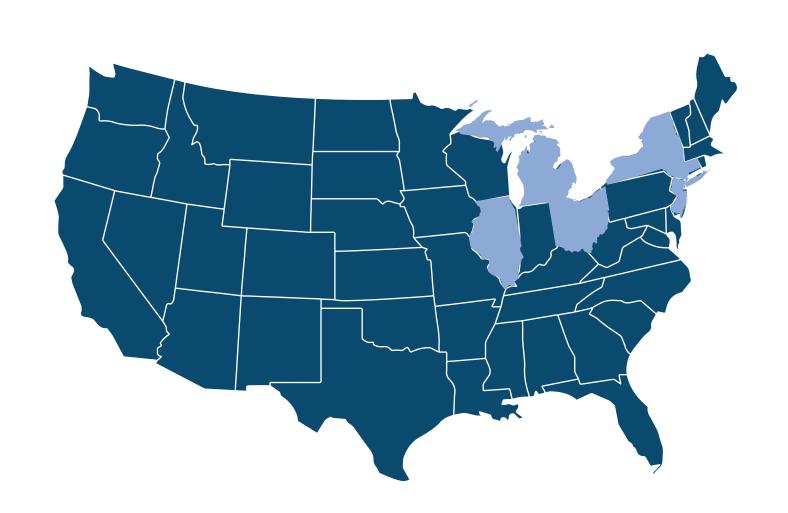
Year	# of Participants	% of Eligible	Avg. Health Score
2024	84	51%	87
2023	90	59%	85
2022	72	44%	85
2021	83	57%	84
2019	93	66%	87.5
2018	101	63%	84
2017	79	49%	83
2016	100	61%	79

There were **64 repeat participants** in 2024, or **76%** of the total screening participation. This **increased** from 50 repeat participants in 2023.





# Participation by Location



Location	2024	2023	2022
Ann Arbor	55	57	53
Cleveland	8	10	7
Chicago	11	13	8
Remote	10	10	4

Participation decreased in each location in 2024 but remained higher than 2022 participation numbers.

Remote screenings experienced no change.



# Wellness Incentive

Incentive: \$500 Premium Reduction/Waiver Dollars

## How to Earn:

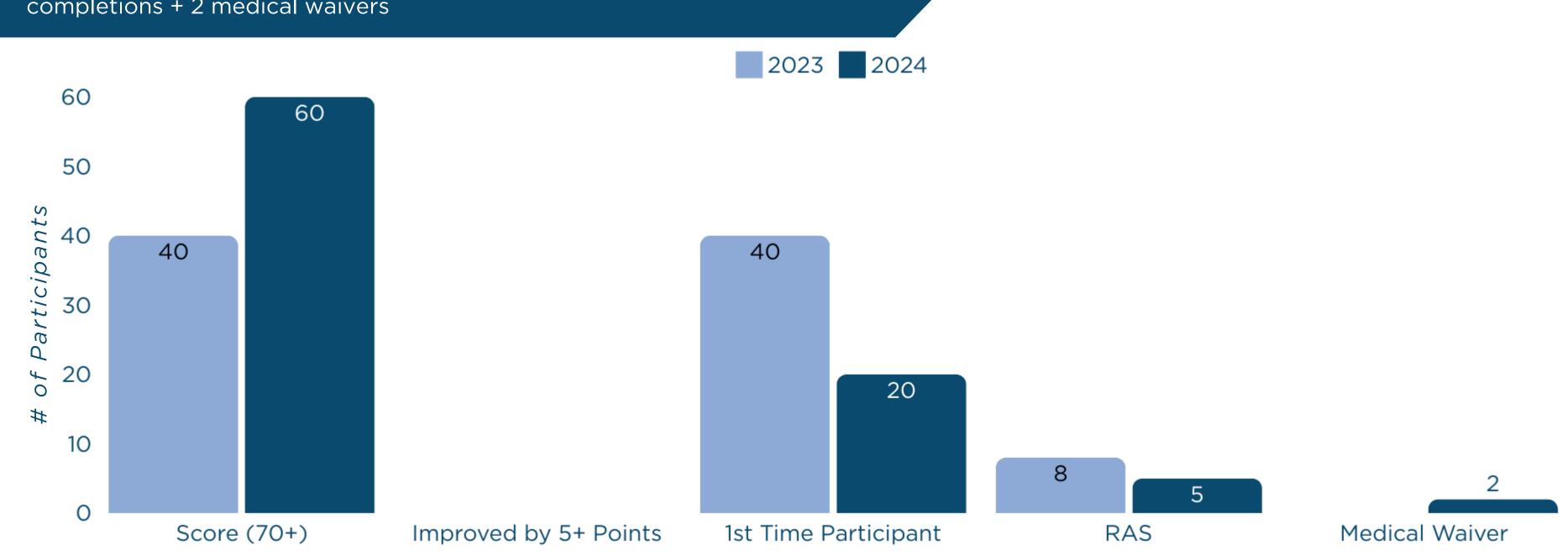
- First-time participant
- Repeat participant
  - Score 70 or higher
  - Improve previous score 5+ points
  - Complete RAS health coaching program
- Submit medical waiver



## Wellness Incentive Breakdown

## 2025 Incentive Eligible: 87/90 = 97%

90 Total = 84 screening participants + 4 South Korea-based RAS completions + 2 medical waivers





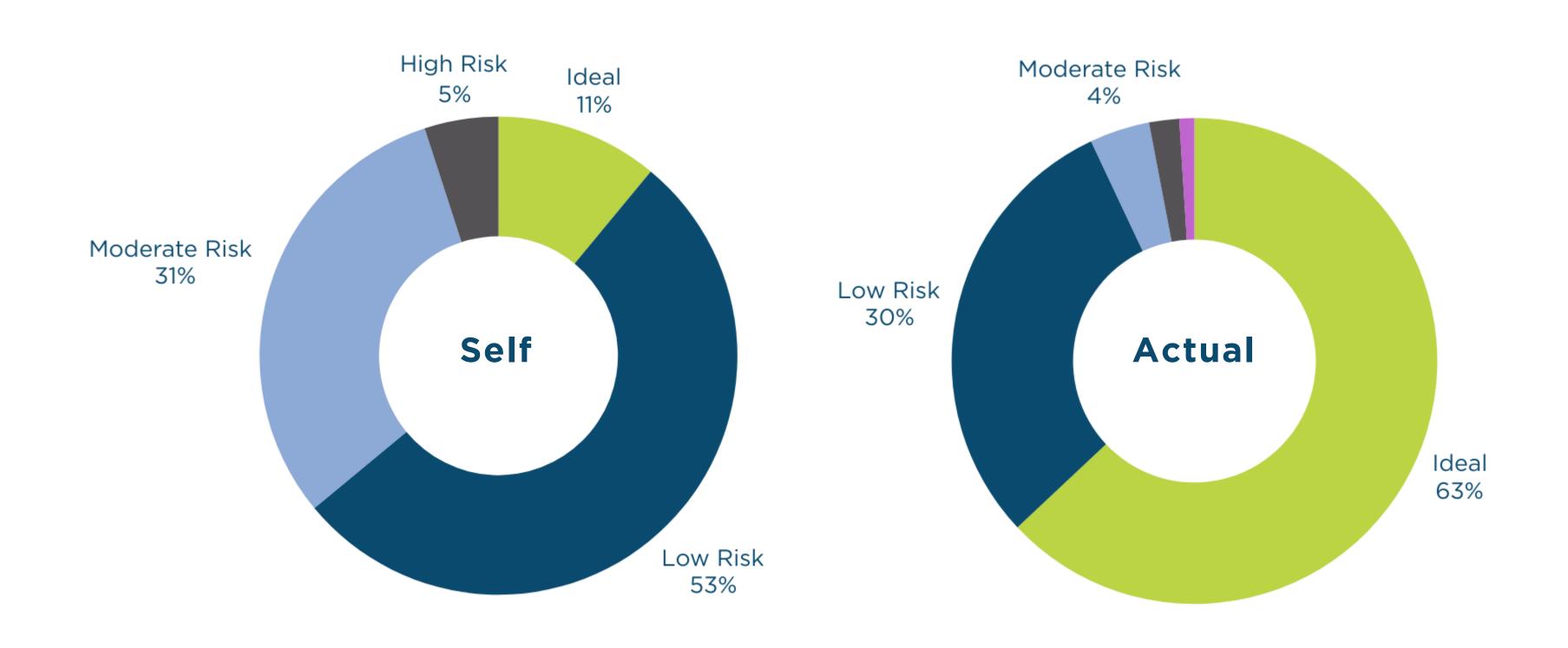
# Program Outreaches

Qualification Category:	2024	2023
60 & Below	3 participants (4% of screened)	3 participants
oo a below	Connected with 0/3	Connected with 0/3
	8 eligible for RAS (4 South Korea-based, 4 outcome- based)	10 eligible for RAS
RAS Reasonable Alternative Standard	5 enrolled (4 South Korea-based, 1 outcome- based)	10 enrolled
	5/5 completed	10/10 completed
Critical Value	0	O

	2024	2023	2022	2021	2024 Strive Benchmark	Ideal Range
Health Score	87	85	85	84	80	70 - 100
BMI	29.2	29.2	30.9	30.5	30.1	18.5 - 29.9
Waist/Hip Ratio	.84	.83	.85	.89	0.91	≤ 0.95
Blood Pressure: Systolic	115	117	116	117	117 mmHg	≤121 mmHg
Blood Pressure: Diastolic	75	74	73	75	76 mmHg	≤81 mmHg
Total Cholesterol	184	184	188	189	190 mg/dL	<200 mg/dL
HDL Cholesterol	61	58	59	60	57 mg/dL	≥50 mg/dL
LDL Cholesterol	101	108	107	106	108 mg/dL	≤129 mg/dL
Triglycerides	108	106	107	112	125 mg/dL	<150 mg/dL
Blood Glucose	93	91.5	93.5	92.4	98 mg/dL	≤100 mg/dL
Hemoglobin A1C	5.4	5.4	5.4	5.4	5.6%	<5.7%

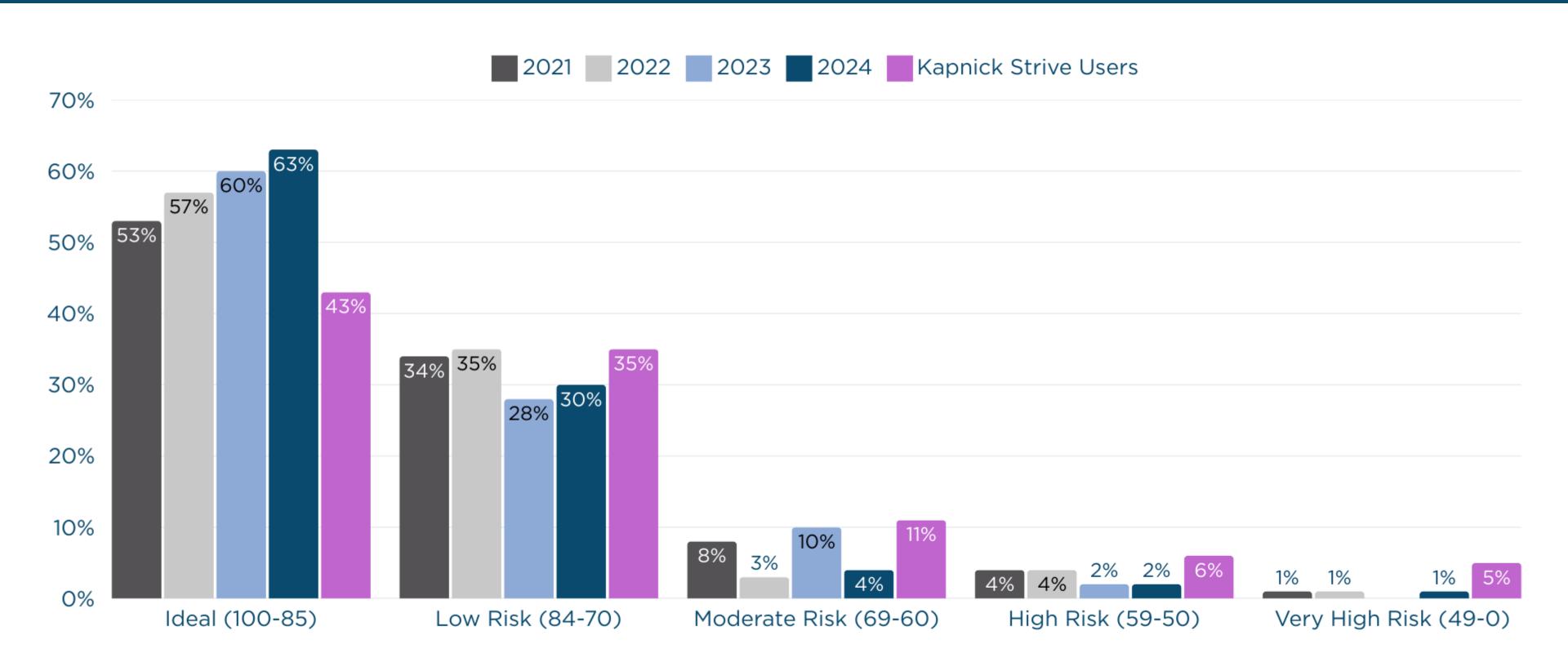


# Self-Perception vs. Actual Health



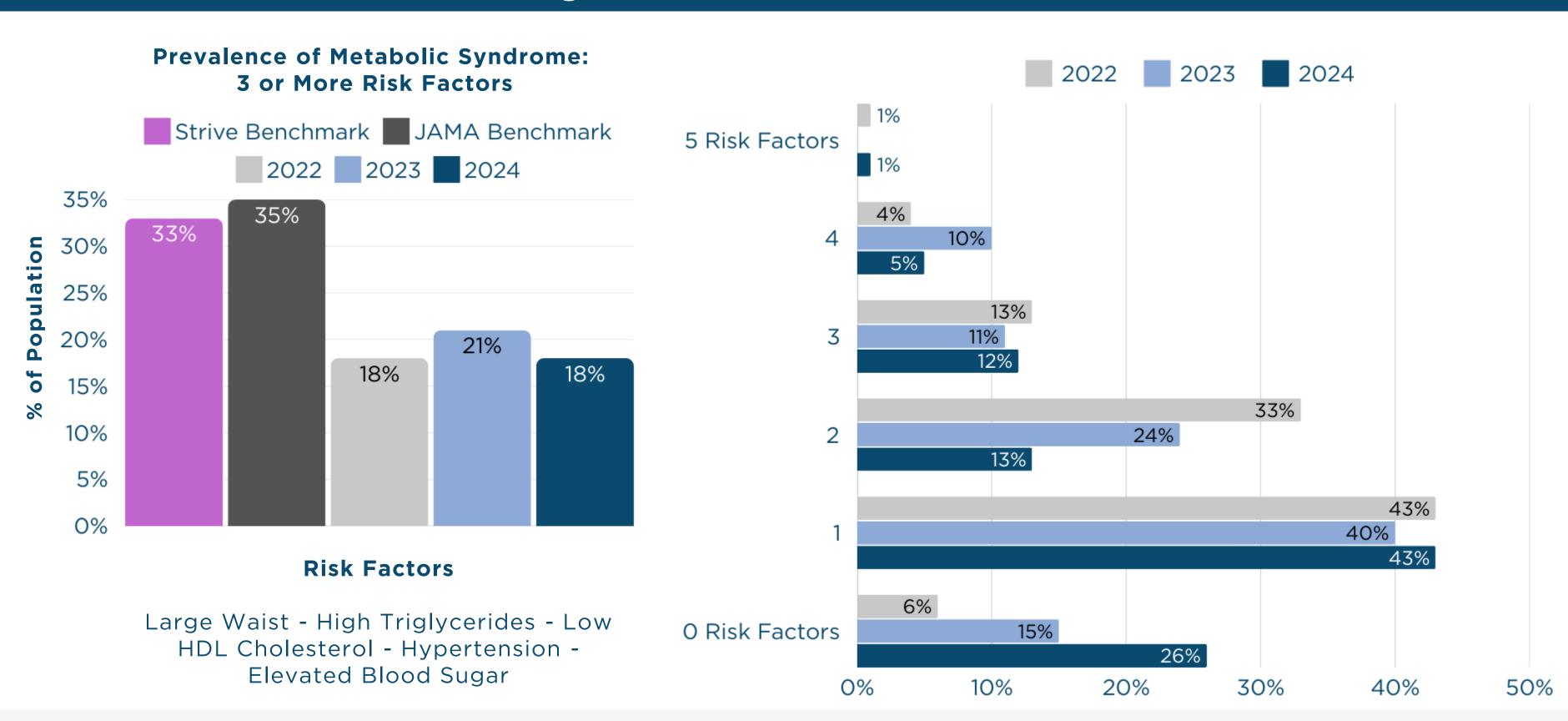


# Health Score Benchmarking





# Metabolic Syndrome Risk





# Repeat Participant Risk Change





Remained Moderate or High/Very High



Made a Negative Risk Migration



64 repeat participants!



## Repeat Participant Risk Change Heart Health

## **Systolic Blood Pressure**

Negative Migration	Remained Mod/High Risk	Low Risk/Positive Migration
8%	9%	83%
20% from PY	7% from PY	1 27% from PY

## **Total Cholesterol**

Negative Migration	Remained Mod/High Risk	Low Risk/Positive Migration
16%	9%	59
No Change	9% from PY	1 9% from PY

## **Diastolic Blood Pressure**

Negative Migration	Remained Mod/High Risk	Low Risk/Positive Migration
8%	3%	89%
16% from PY	5% from PY	1 21% from PY

## Key:





## What's the difference?

**Systolic blood pressure** (the top number) measures the force of blood against artery walls when the heart contracts.

Diastolic blood pressure (the bottom number) measures the same force when the heart is at rest between beats.



# Repeat Participant Risk Change Nicotine & Diabetes Management

## **Blood Glucose**

Negative Migration	Remained Mod/High Risk	Low Risk/Positive Migration
8%	9%	83%
No Change	1 5% from PY	5% from PY

## **Nicotine**

Made a Negative Migration	Remained Positive	Remained Negative/Quit	
0%	8%	92%	
2% from PY	4% from PY	2% from PY	1 rticipa
			quit

## **Hemoglobin A1C**

Negative Migration	Remained Mod/High Risk	Low Risk/Positive Migration
3%	17%	80%
9% from PY	→ 3% from PY	1 6% from PY

Key:





## What's the difference?

**Blood Glucose** (blood sugar) measures the amount of sugar (glucose) in your bloodstream at a given moment. It can fluctuate throughout the day in response to food, exercise, and other factors.

Hemoglobin A1c is a measure of your average glucose levels over the past 2-3 months. Provides long-term view of your blood sugar control and used to assess diabetes management.



# Top Risk Factors







**CHOLESTEROL** 

**NICOTINE USE** 

**DIABETES** 



# Chronic Conditions & Health Screening Claims Analysis







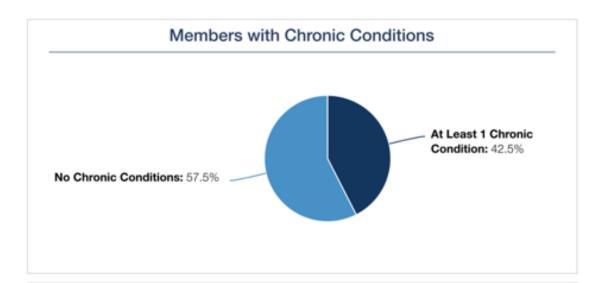


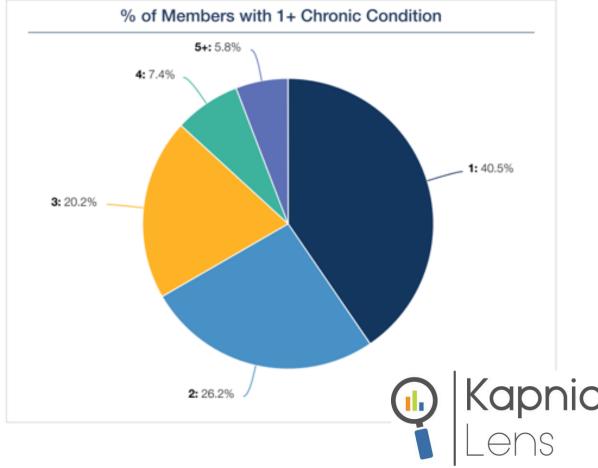


## Chronic Condition Prevalence

- 42.5% (91) of members on Eversight's health plan have at least 1 chronic condition
  - This is **favorable** compared to the Kapnick book of business benchmark which is 44.3%
- Of the 91 members with a chronic condition, 59.5% (54) have more than 1
  - This is unfavorable compared to benchmark which had 44.4% with only 1 and 55.6% with more than 1
- The top 5 chronic conditions are obesity, hypertension, hyperlipidemia, mental illness & diabetes
  - Mental illness (12.6%) has a **higher prevalence** as compared to benchmark (5.7%)
  - Hypertension (13.4%), hyperlipidemia (16.0%), diabetes (8.8%) & obesity (18.5%) have a lower prevalence as compared to benchmark (18.6%, 20.8%, 10.1%, 23.4%)
- Compared to benchmark, SME had a higher average age & lower member ratio
  - The avg age was 34 compared to benchmark at 38
  - The member ratio was 1.9 compared to benchmark at 2.1

- All members enrolled in the health plan are included
- Data is from the most recent 12 months ending Dec 2024 on an incurred basis
- Chronic conditions include: Asthma, COPD, Congestive Heart Failure, Diabetes, End Stage Renal Disease, HIV,
   Hyperlipidemia, Hypertension, Inflammatory Bowel Disease, Kidney Disease, Mental Illness, Obesity, Osteoarthritis,
   Parkinson's, Rheumatoid Arthritis, & Sleep Apnea







## **Chronic Condition Cost**

Year	Total Allowed Amount	Total Allowed with Chronic Conditions	Chronic Condition % of Total Cost	Chronic Condition % of Total Cost (Benchmark)
2022	\$1.6M	\$1.1M	69%	73%
2023	\$2.1M	\$1.4M	67%	75%
2024	\$2.4M	\$1.6M	67%	77%



While members with chronic conditions make up 42.5% of membership, they make up 67% of the total spend in 2024

- All members enrolled in the health plan are included
- Data is from Jan 2022 through Dec 2024 on an incurred basis





## **Chronic Condition Cost**

Year	PMPM Total Cost	PMPM <u>with</u> Chronic Condition	PMPM <u>without</u> Chronic Condition	PMPM <u>with</u> Chronic Condition (Benchmark)	PMPM <u>without</u> Chronic Condition (Benchmark)
2022	\$514	\$2,142	\$290	\$751	\$168
2023	\$701	\$1,151	\$430	\$825	\$179
2024	\$853	\$1,255	\$413	\$884	\$239
			1		J

The PMPM cost of members with chronic conditions is 3.0x higher than members without chronic conditions

The PMPM cost of members with chronic conditions is 3.7x higher than members without chronic conditions

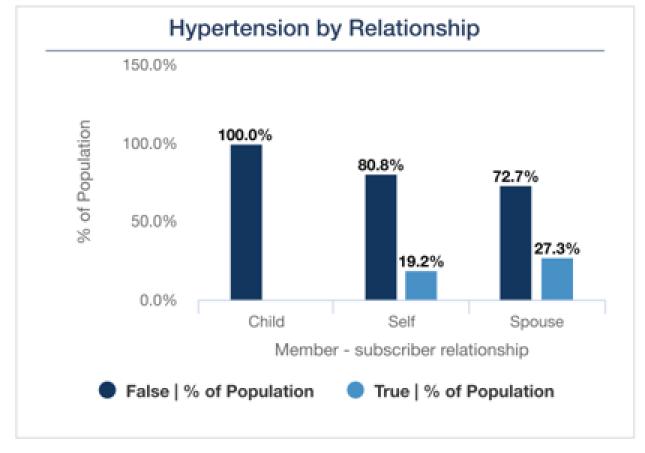
- All members enrolled in the health plan are included
- Data is from Jan 2022 through Dec 2024 on an incurred basis

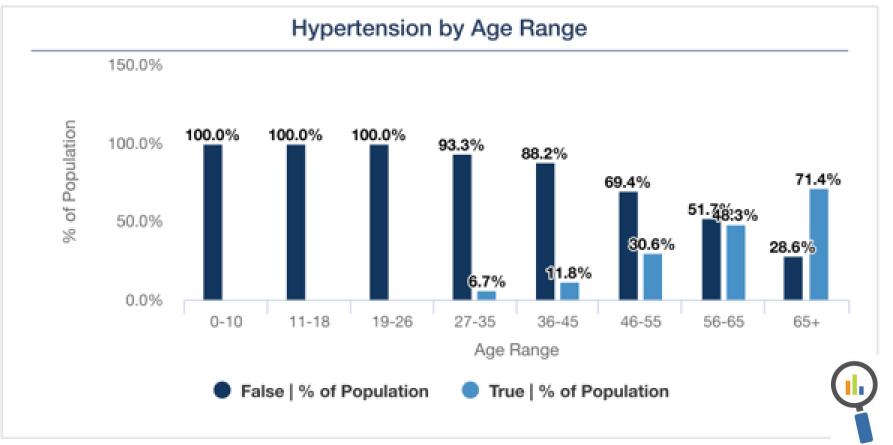




## Hypertension: Demographics

Year	Hypertensive Members (Employees)	Hypertensive Members (Spouses)	Hypertensive Members (Dep CH)	Hypertensive Members (Total)	Hypertensive Members (% of Total Population)	Hypertensive Members Benchmark (% of Total Population)
2022	29	14	0	43	14.8%	17.8%
2023	32	16	0	48	17.9%	18.5%
2024	29	15	0	44	18.8%	18.6%





Kapnick



## Hypertension: Gaps in Care

Year	Total Hypertensive Members	Total Hypertensive Members  (enrolled full 12 months)	Total Hypertensive Members with No Maintenance Rx  (enrolled full 12 months)
2022	43	34	11 (32%)
2023	48	40	17 (43%)
2024	44	38	12 (32%)

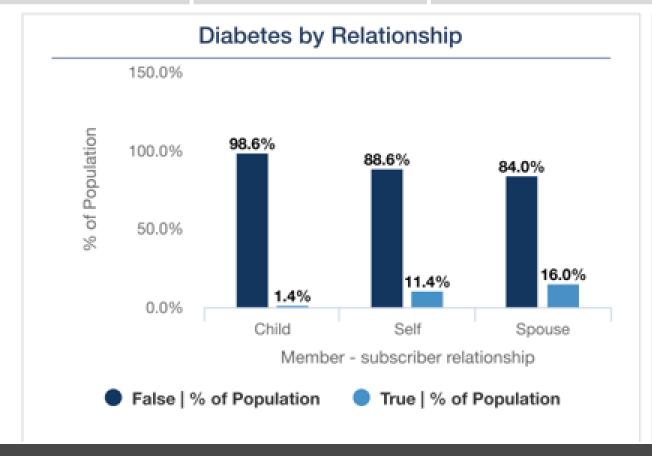
- 3 Strive members were identified as having no hypertension medication in 2024.
- 1 Strive member had a high-risk biometric result.

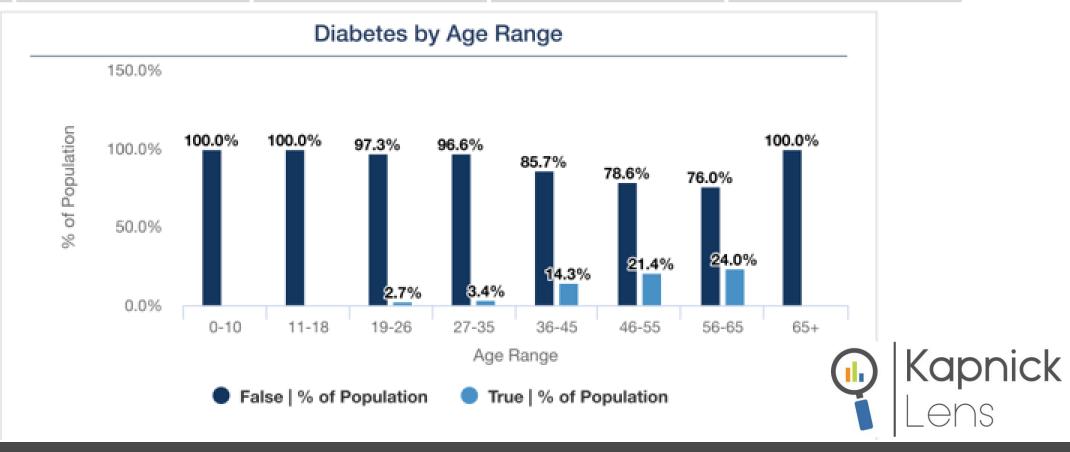




## Diabetes: Demographics

Year	Diabetic Members (Employees)	Diabetic Members (Spouses)	Diabetic Members (Dep CH)	Diabetic Members (Total)	Diabetic Members (% of Total Population)	Diabetic Members Benchmark (% of Total Population)
2022	15	4	1	20	6.7%	9.0%
2023	15	8	1	24	8.9%	9.7%
2024	16	8	1	25	10.6%	10.1%







## Diabetes: Gaps in Care

Year	Total Diabetic Members	Total Diabetic Members  (enrolled full 12 months)	Total Diabetic Members with No Maintenance Rx  (enrolled full 12 months)
2022	20	17	9 (53%)
2023	24	20	7 (35%)
2024	25	21	9 (43%)

- 4 Strive members were identified as having no diabetic medication in 2024.
- No Strive members were identified as high risk in 2024.





## Screening Overview

Participated in the Health Screening	Total
Enrolled in Health Plan	72
Enrolled all 12 Months	58
Had 0 Claims	2
% Total w/ 0 Claims (Enrolled 12 Months)	3.4%

<ul> <li>Of</li> </ul>	the 2	strive	partici	pants	with	no c	laims:
------------------------	-------	--------	---------	-------	------	------	--------

- The average age was 38
- The average health score was 89
- Of the 56 strive participants with at least 1 claim:
  - The average age was 42
  - The average health score was 79

Did not Participate in the Health Screening	Total
Enrolled in Health Plan	70
Enrolled all 12 Months	45
Had 0 Claims	3
% Total w/ 0 Claims (Enrolled 12 Months)	6.7%

- Of the 3 non-strive participants with no claims:
  - The average age was 52
- Of the 42 non-strive participants with at least 1 claim:
  - The average age was 42

- Employees enrolled in the health plan & eligible to participate in health screenings in 2024 were included (spouses & dependent children excluded)
- Data is from Jan 2024 through Dec 2024 on an incurred basis





## Wellness/Office Visit

Participated in the Health Screening	Total
Enrolled in Health Plan	72
Enrolled all 12 Months	58
Had a Wellness Visit	39
% with a Wellness Visit (Enrolled 12 Months)	67.2%
Had an Office Visit	49
% with an Office Visit (Enrolled 12 Months)	84.5%
Had a Wellness or Office Visit	54
% with a Wellness or Office Visit (Enrolled 12 Months)	93.1%

Did not Participate in the Health Screening	Total
Enrolled in Health Plan	70
Enrolled all 12 Months	45
Had a Wellness Visit	19
% with a Wellness Visit (Enrolled 12 Months)	42.2%
Had an Office Visit	38
% with an Office Visit (Enrolled 12 Months)	84.4%
Had a Wellness or Office Visit	39
% with a Wellness or Office Visit (Enrolled 12 Months)	86.6%

- Those who participated in the health screening had a higher rate of having a wellness or office visit
- An office visit is defined as a non-urgent/emergent visit with a doctor

- Employees enrolled in the health plan & eligible to participate in health screenings in 2024 were included (spouses & dependent children excluded)
- Data is from Jan 2024 through Dec 2024 on an incurred basis





# Screenings & Cost

Members with Screenings				
	Year number	Member ID (Count Distinct)		Allowed Per Member
1	2024	68	\$590,616	\$8,686

Members without Screenings				
	Year number	Member ID (Count Distinct)	Medical/RX Provider Allowed Amount	Allowed Per Member
1	2024	70	\$527,127	\$7,530

No screened members had claims above \$100k

Members w/o Screenings (Excl HCC)					
	Year number	Member ID (Count Distinct)	Medical/RX Provider Allowed Amount	Allowed Per Member	
1	2024	69	\$410,634	\$5,951	
				-	

- Members with screenings had higher costs than members without screenings
- Members with screenings had \$89k in allowed claims for chronic condition maintenance drugs (668 claims)
- Members without screenings had \$59k in allowed claims from chronic condition maintenance drugs (404 claims)

- Employees enrolled in the health plan & eligible to participate in health screenings in 2024 were included (spouses & dependent children excluded)
- Data is from Jan 2024 through Dec 2024 on an incurred basis





## Cost by Health Score

	IIIW- O All Marshard								
		Health Score A	II Members				Health Scor	e 60-69	
	Year number	Member ID (Count Distinct)	Medical/RX Provider Allowed Amount	Allowed Per Member		Year number	Member ID (Count Distinct)	Medical/RX Provider Allowed Amount	Allowed Per Member
1	2024	68	\$590,616	\$8,686	1	2024	3	\$44,094	\$14,698
Health Score 85-100				Health Score 50-59					
	Year number	Member ID (Count Distinct)	Medical/RX Provider Allowed Amount	Allowed Per Member		Year number	Member ID (Count Distinct)	Medical/RX Provider Allowed Amount	Allowed Per Member
1	2024	42	\$314,014	\$7,477	1	2024	2	\$10,137	\$5,069
	Health Score 70-84						Health Sco	re 0-49	
			500 W 18-300					Description.	
	Year number	Member ID (Count Distinct)	Medical/RX Provider Allowed Amount	Allowed Per Member		Year number	Member ID (Count Distinct)	Medical/RX Provider Allowed Amount	Allowed Per Member
1	2024	20	\$221,577	\$11,079	1	2024	1	\$794	\$794

- Employees enrolled in the health plan & eligible to participate in health screenings in 2024 were included (spouses & dependent children excluded)
- Data is from Jan 2024 through Dec 2024 on an incurred basis





	Members with Screenings					
	Year number	Member ID (Count Distinct)	Medical/RX Provider Allowed Amount	Allowed Per Member		
1	2023	55	\$368,708	\$6,704		
2	2024	52	\$489,592	\$9,415		

- Repeat participants experienced a 41% increase in costs
  - Members who had a health score increase averaged a 124% increase
  - Members who had the <u>same</u> health score averaged a 20% decrease
  - Members who had a health score <u>decrease</u> averaged an 44% increase
- 10 repeat participants saw more than a \$10k increase in med/Rx costs
  - 7 had a health score increase
    - High-cost procedures included: shoulder surgery, kidney stone removal, gallbladder removal, brain imaging, PET scan, sacroiliac joint injection
    - 1 member had \$26k in claims for Descovy (treats HIV)
  - 3 had a health score decrease
    - High-cost procedures included: knee replacement, myocardial perfusion imaging, emergency room visit for pregnancy complications

## Repeat Participants

	Year number	Member ID (Count Distinct)	Medical/RX Provider Allowed Amount	Allowed Per Member
1	2023	26	\$79,872	\$3,072
2	2024	24	\$165,277	\$6,887

	Year number	Member ID (Count Distinct)	Medical/RX Provider Allowed Amount	Allowed Per Member
1	2023	14	\$119,558	\$8,540
2	2024	14	\$96,178	\$6,870

Health Score Decreased						
	Year number	Member ID (Count Distinct)	Medical/RX Provider Allowed Amount	Allowed Per Member		
1	2023	15	\$169,278	\$11,285		
2	2024	14	\$228,137	\$16,295		

- Employees enrolled in the health plan & eligible to participate in health screenings in 2024 were included (spouses & dependent children excluded)
- Data is from Jan 2024 through Dec 2024 on an incurred basis





## Repeat Participants

	Health Score Improvement						
	Year number	Medical/RX Provider Allowed Amount	Medical Provider Allowed Amount	RX Provider Allowed Amount	Medical Claim Count	RX Claim Count	Medical/RX Claim Count
1	2023	\$79,872	\$55,710	\$24,163	423	222	645
2	2024	\$165,277	\$119,393	\$45,885	555	240	795

	Health Score Improvement						
	Year number	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
1	2023	22	6	17	\$11	\$136	\$146
2	2024	25	17	18	\$86	\$7,360	\$172

- 26 total members had a health score improvement
- Total costs increased \$85k
  - Medical increased \$64k
  - Rx increased \$21k

	Highest Costing Rx in 2024						
	Year number 2023			2024			
	Drug Product Name	Member ID (Count Distinct)	Total amount paid	Member ID (Count Distinct)	Total amount paid		
1	Descovy	1	\$14,758	1	\$25,935		
2	Xiidra	1	\$3,674	1	\$5,640		
3	Ozempic (2 MG/DOSE)			1	\$4,525		
4	Ozempic (0.25 or 0.5 MG/DOSE)			1	\$1,794		
5	Ozempic (1 MG/DOSE)			1	\$905		
	Total		\$18,432		\$38,800		
	Grand Total	22	\$21,390	21	\$43,137		

- Employees enrolled in the health plan & eligible to participate in health screenings in 2024 were included (spouses & dependent children excluded)
- Data is from Jan 2024 through Dec 2024 on an incurred basis





# 2025 Goals & Strategies









## Stand-Out-Stats & Stories

30 repeat participants improved their health score by at least 1 point from the previous year!



DIET PLAN
METER
THE STATE OF TH

Participant A: Improved their health score by 15 points, moving from moderate to ideal risk. They achieved this by lowering their triglycerides and blood pressure!

19 participants received a health score of 100

Participant B: Improved their health score by 16 points! They achieved this by losing nearly 30 pounds, lowering their triglycerides, blood pressure, and cholesterol.





14
participants
improved by
10+ points

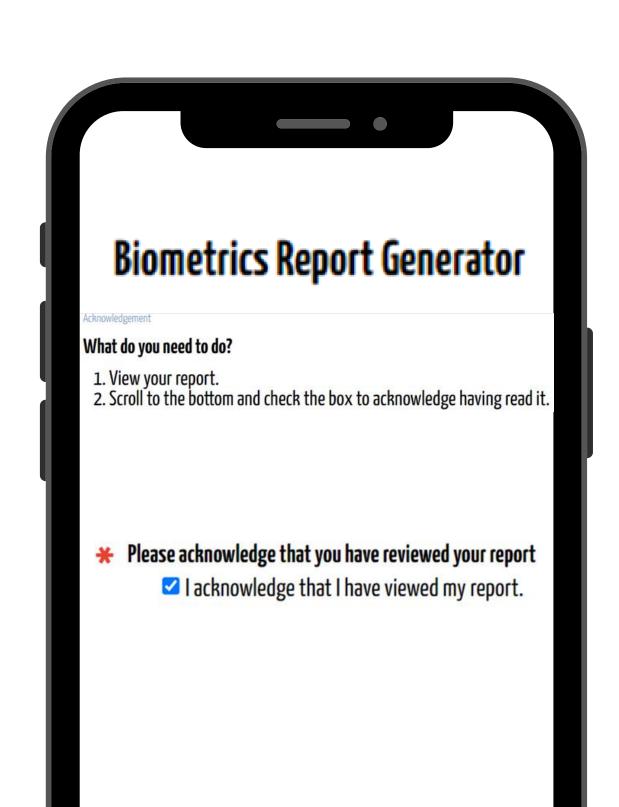


# Participation Metrics

	Q1	Q2	Q3	Q4	YTD	2023
Acknowledged Health Report (% of Screened)	N/A	55 (65%)	2 (2%)	1 (1%)	58 (69%)	59 (66%)
Total Points Tracked	20,701	214,643	11,255	2,725	249,324	248,354
Active Users (% of Census)	37 (24%)	93 (56%)	30 (18%)	13 (7%)	94 (56%)	91 (53%)
Average Points per Active User	505	2,190	375	227	2,652	2,458
Health Hub Views	7	15	3	1	26	19



# Screening Acknowledgement



	2024			
Did NOT Acknowledge	31% (27 participants)			
Of those that did NOT acknowledge their health report:				
% Scored <70	7% (2 participants)			
% 60 or Below (High-Risk)	7% (2 participants)			

31% of the 84 who screened did NOT acknowledge their results.

2 of 3 participants who scored 60 or below did NOT acknowledge their results.

**Recommendation:** Incorporate acknowledgement into incentive eligibility criteria.

**Note:** Participants CAN view their report without acknowledgement



# Strive 2024 Programming Goals

#### 2024 Goals & Results

#### **GOAL: Portal Engagement**

- → Increase active users by 16%
- Results: 10% increase
  - Though not meeting the 50% goal, average active users per quarter increased to 40% in 2024 from 30% in 2023.

#### **GOAL: Screening Participation**

- → Increase screening participation by 6%
- Results:
- Screening participation decreased to 51% in 2024 from 59% in 2023. This is still an increase, however, from 44% in 2022.

#### **GOAL: Wellness Incentive**

- → Increase incentive eligibility by 4%
- Results:
  - Incentive eligibility increased to 97% in 2024 from 94% in 2023.

Goal: Avg. 50%
Active Users
per Quarter

Portal
Engagement
80% to
goal

2022 Avg./Qtr. - 32% 2023 Avg./Qtr. - 30% 2024 Avg./Qtr. - 40% Goal: 65% of Eligible Employees

Screening
Participation
78% to
goal

2022 - 44% of EEs 2023 - 59% of EEs 2024 - 51% of EEs Goal: 98% Incentive-Eligible

Wellness Incentive
99% to goal

2022 - 89% Eligible2023 - 94% Eligible2024 - 97% Eligible



# Strive 2025 Programming Goals





Portal **Engagement** 

2022 - 95% 2023 - 53% 2024 - 56% **2025 Goal - 60%**  Goal: 55% Participation



Screening Participation

2022 - 44% 2023 - 59% 2024 - 51% **2025 Goal - 55%**  Goal: 98% Incentive Eligible



Wellness Incentive

2022 - 89% 2023 - 94% 2024 - 97%

2025 Goal - 98%



# 2025 Goals and Strategies

Goals	Strategies	Overall Strategies
Employee Engagement		
• Portal Engagement • 2025 Goal: 60% active users	Wellness portal revamp     Re-structure & re-introduce rewards program: point threshold,	<ul> <li>Implement monthly engagement data reports</li> <li>Continue Quarterly Pulse Checks</li> <li>Postcard, wallet card and home mailer</li> <li>Recommendation: Strive delivers program communications</li> <li>Program guide &amp; video for new</li> </ul>
• Wellness Incentive • 2025 Goal: 98% eligible	<ul> <li>PTO, swag, surprise raffles, etc.</li> <li>Recommendation: Move to short-form videos (Five with Strive) in lieu of presentations</li> </ul>	
Health Screening		<ul><li>hires</li><li>Connect with top participants to</li></ul>
<ul> <li>Screening</li> <li>Participation</li> <li>2025 Goal: 55%</li> <li>eligible users</li> </ul>	<ul> <li>RAS health coaching email and phone call outreach campaign provided following screenings</li> <li>Post-health screening "Next Steps" email</li> <li>Monthly site contact meeting</li> </ul>	<ul> <li>elicit testimonials</li> <li>Incentivized company-wide wellness benchmarks</li> </ul>

### **Timing of Health Screenings**



- Claims data via Kapnick Lens captures the plan year (January December)
  - Annual data analysis ready in Q1 following plan year
- Health screening timing
  - Historically occurred in January, moved to April to increase engagement
  - Incentive is paid out during the same calendar year as the screenings
  - Currently a 10-month gap between health screenings and earliest data review

### **Options for Consideration:**

- 1. Move the health screenings to Q3/Q4 of the calendar year
  - Pros:
    - More timely data analysis and pairing with claims data
    - Allows for wellness program strategy development in Q1 of following plan year
    - Incentive is paid out over the full plan year following the screenings
  - Cons:
    - Tighter turn-around for open enrollment
    - Transition requires either two screenings in one year or a gap >1 year between screenings
- 2. Utilize rolling 12 months of Kapnick Lens claims data (vs. plan year)
  - o Pros:
    - More timely data analysis and pairing with health screening data for annual review
  - Cons:
    - May limit strategy development
- 3. Separate the annual Strive Executive Review and Kapnick Lens data analysis review.



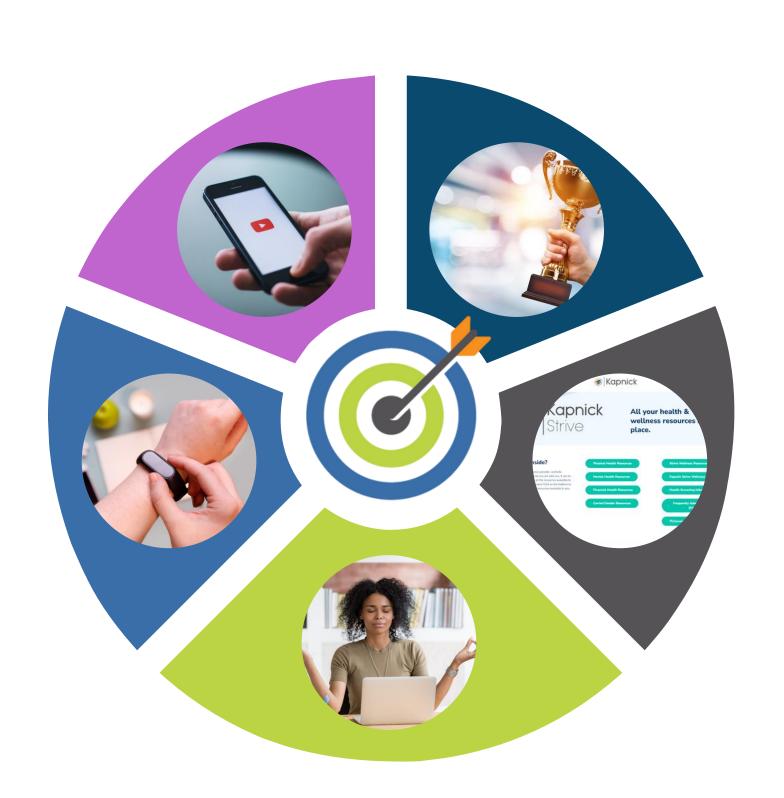
# 2025 Employee Events

#### **Presentations**

- Positive Effects of Inclusion on Employee Well-Being
  - Recorded
- Feeding Your Microbiome
- Mindfulness Meditation
- Financial Wellness

#### **Challenges**

- Annual Corporate Challenge
- Core Some More
  - 7 participants
- Disconnect & Reconnect
  - 8 participants
- Hydration Station
- Going for Growth
- No Time Like the Pleasant



### **Additional Offerings**

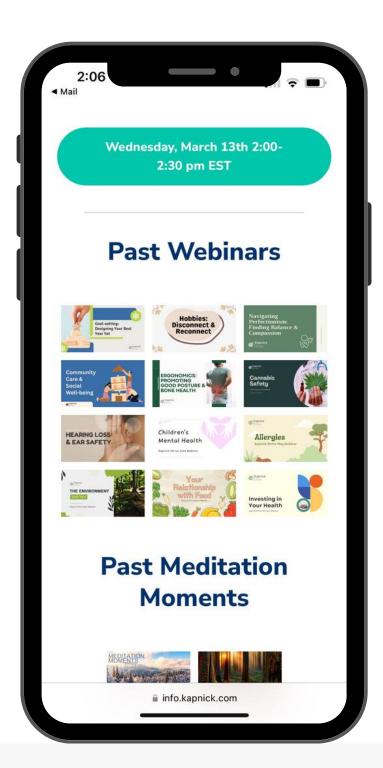
- 12 Strive Monthly Webinars
- 12 Strive Monthly Newsletters
- 12 Custom Monthly Communications
- 4 Meditation Moments

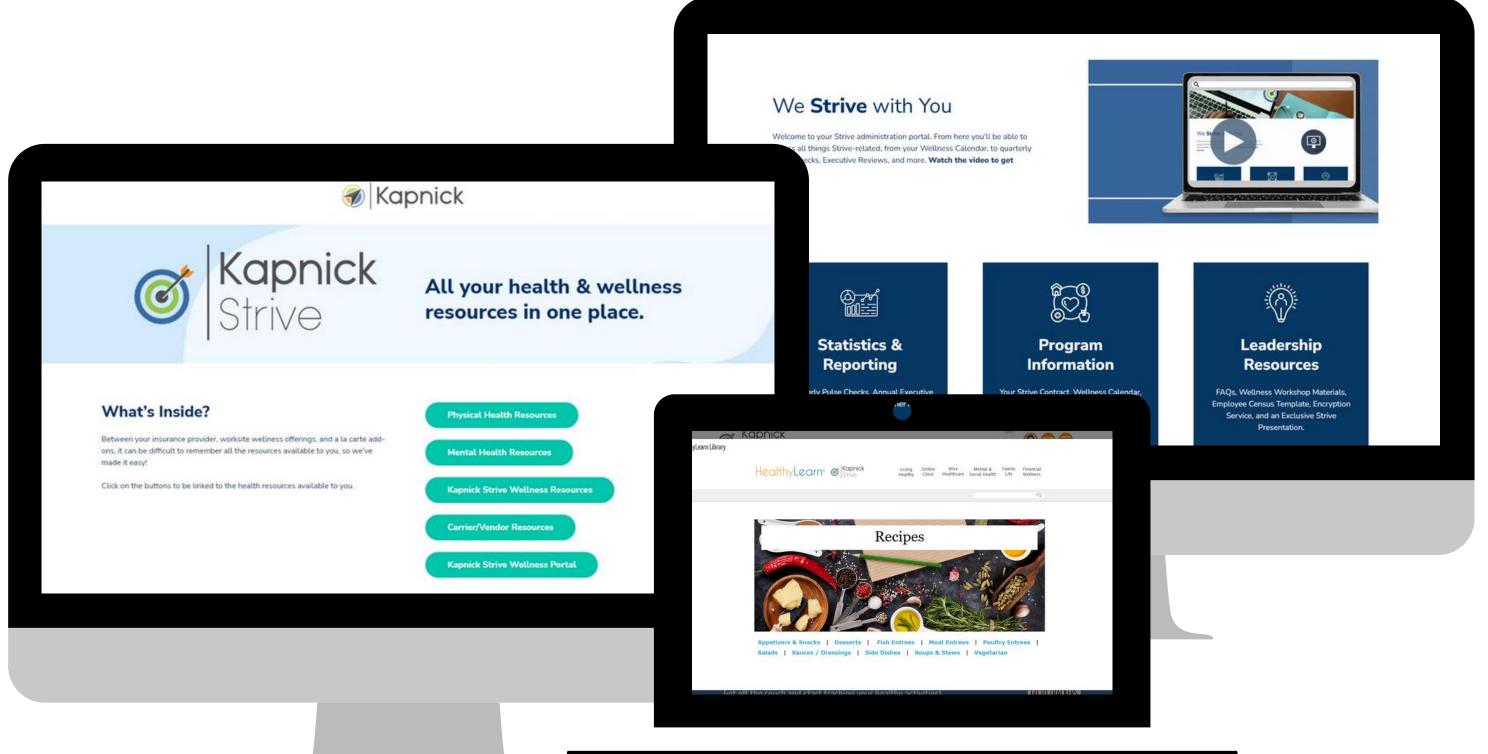
#### **Health Screenings**

- 5 Screening Events
- At-home Screenings



# Wellness Resources







# NEW Offerings!

### Mental Health First Aid

#### What is it?

An internationally recognized skills-based training designed to help individuals identify, understand, and respond to signs and symptoms of mental health or substance use challenges in adults (ages 18+).

#### What's included?

Participants will learn to apply the MHFA action plan in real-world situations, including when someone is experiencing a mental health or substance use challenge.

Additionally, participants will receive:

- A Certificate (valid for 3 years)
- MHFA Manual & Processing Guide
- Access to Kapnick Strive's MHFA Toolbox, featuring tools and resources to support ongoing mental wellbeing
   Mental Health FIRST AID

### **Nutrition Services**

#### What's available?

Kapnick Strive is offering a variety of nutrition services developed and delivered by Registered Dietitians (R.D.s)., including:

- Nutrition presentations
- 1-on-1 and group nutrition counseling
- Metabolic testing and anthropometric screening
- Cooking demonstrations
- Culinary garden design and educational programming
- Social media campaigns
- Recommendations for company-provided food selections





## Worksite Well-being Discussion

#### Discussion:

What is Eversight's biggest business goal?

 How will employee well-being impact that?

# Implementing in 2025

- Micro-moments
- Five with Strive



# Biometric Risk Breakdown









# Biometric Descriptions

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 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 at rest.

# 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 of time 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.

### **Body Composition**

BMI is an indicator of excess body weight. Generally, those with a higher BMI are 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.

#### **Tobacco 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.

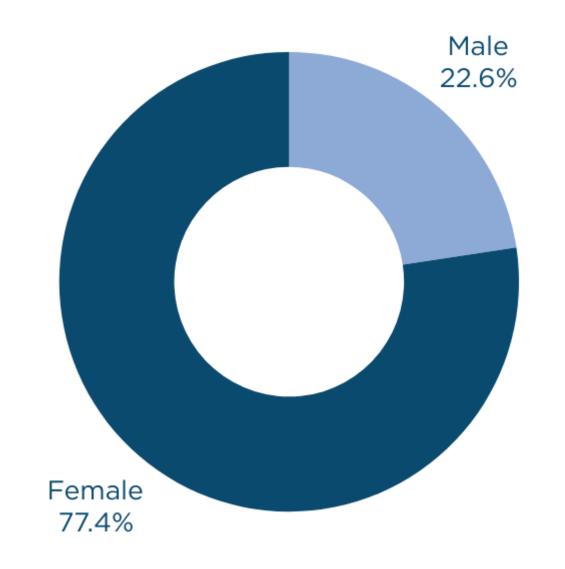
### Gamma-Glutamyltransferase (GGT)

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.

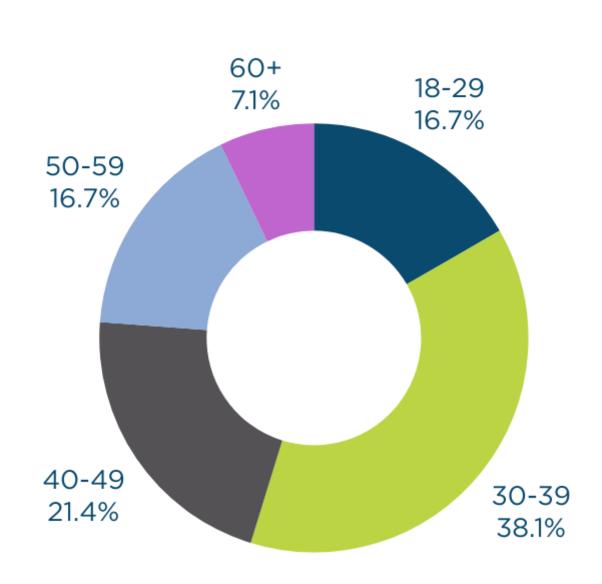


# Demographics

### **GENDER**



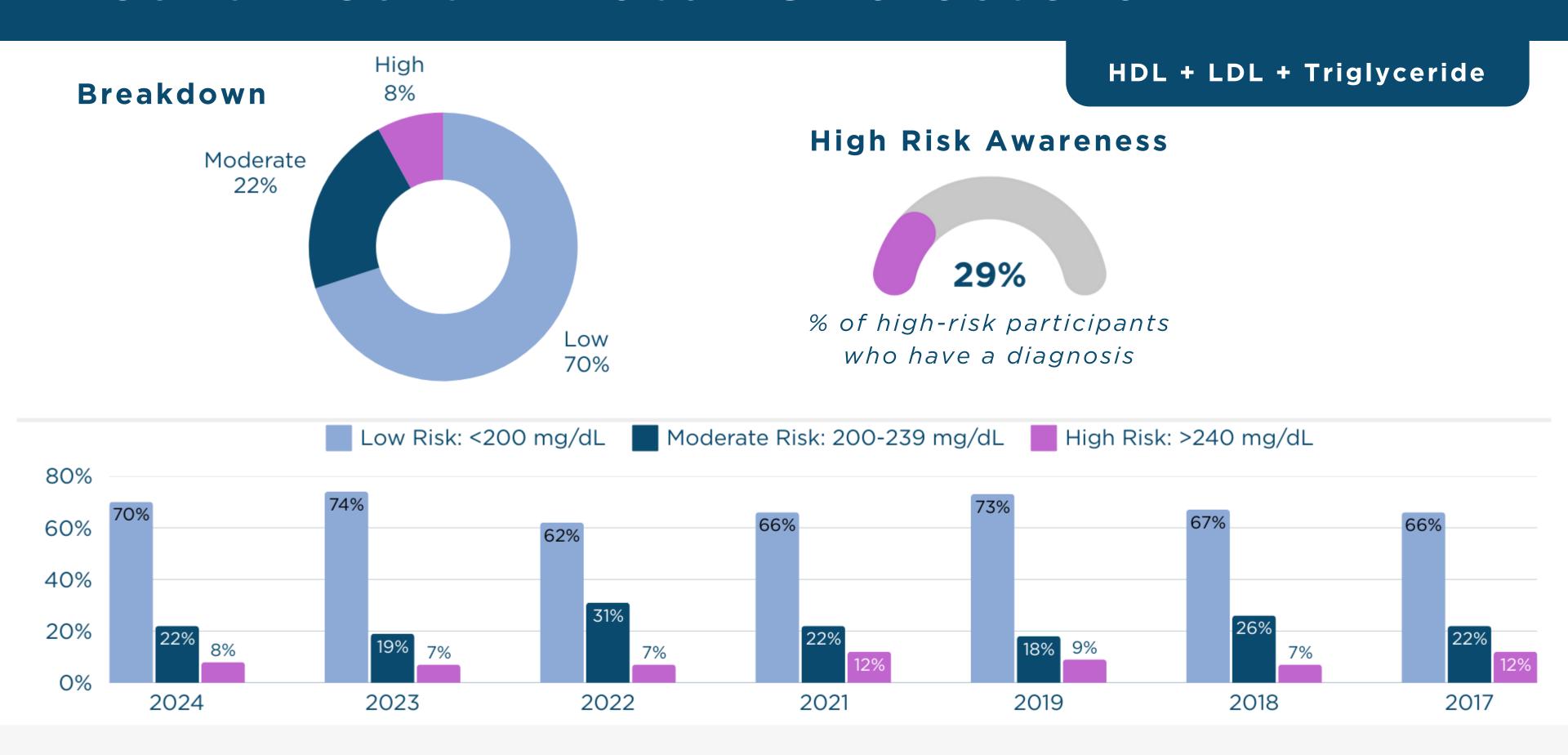
AGE



AVERAGE AGE: 40

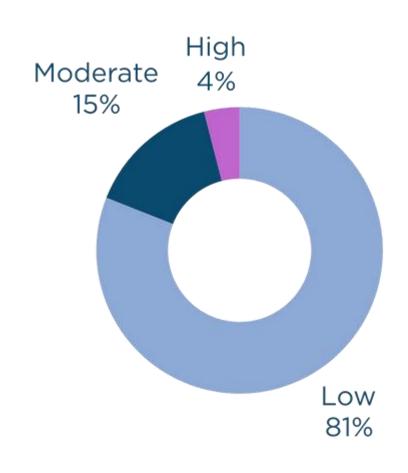


### Heart Health: Total Cholesterol





### Heart Health: Blood Pressure

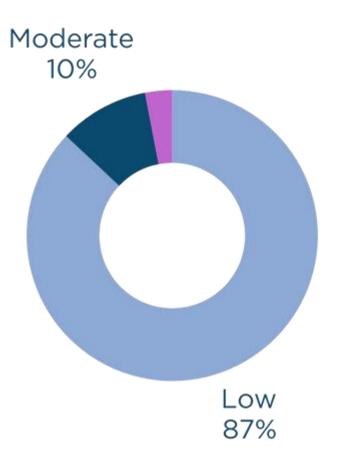


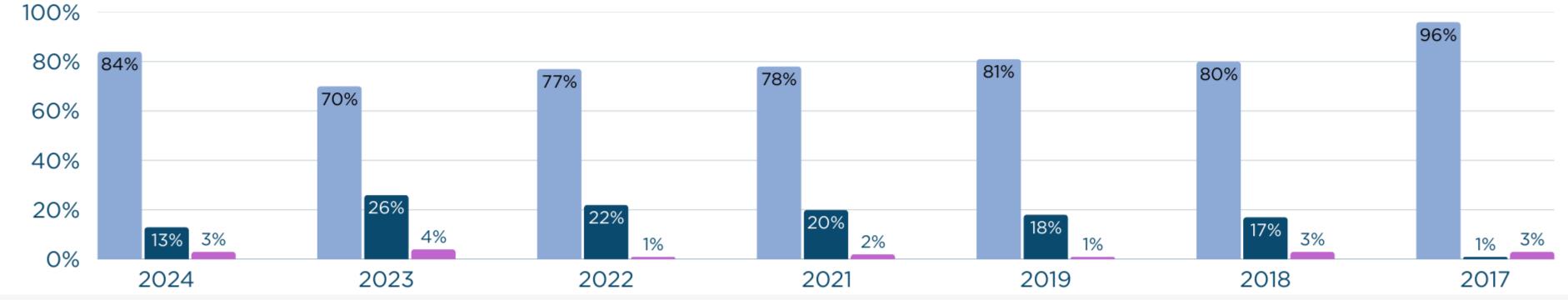
### Systolic Breakdown

Systolic blood
pressure (the top
number) measures the
force of blood against
artery walls when the
heart contracts.

#### **Diastolic Breakdown**

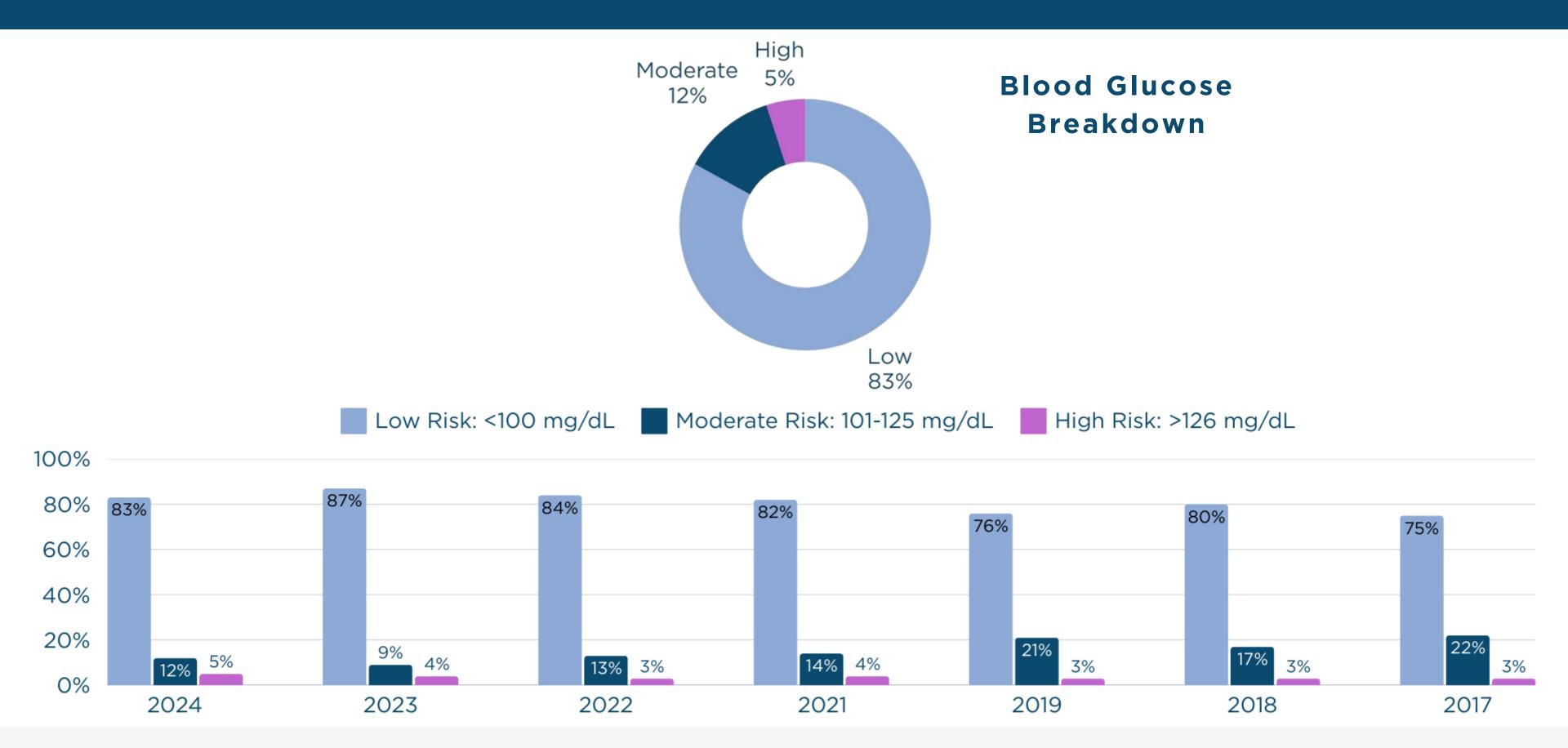
pressure (the bottom number) measures the same force when the heart is at rest between beats.





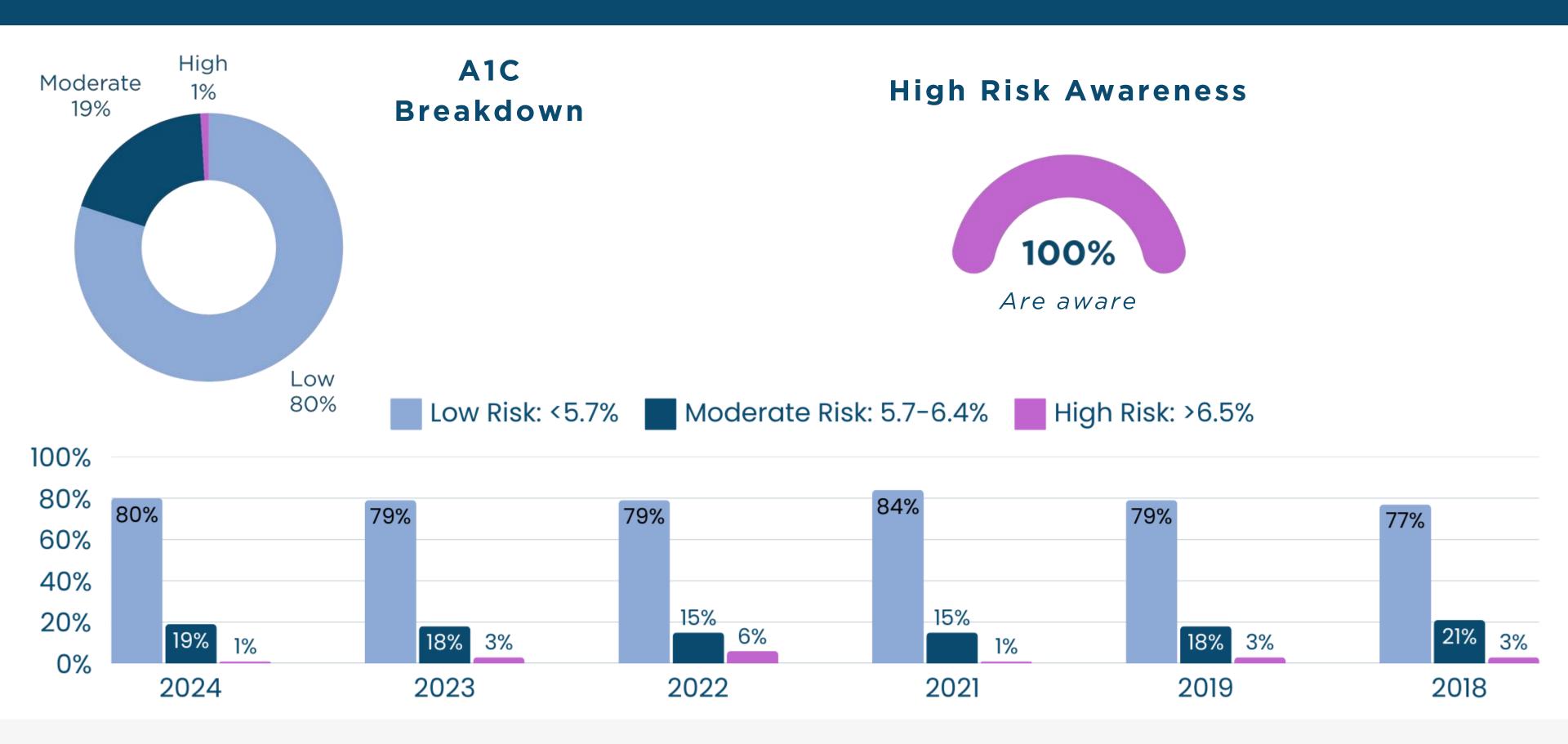


# Diabetes Management: Blood Glucose



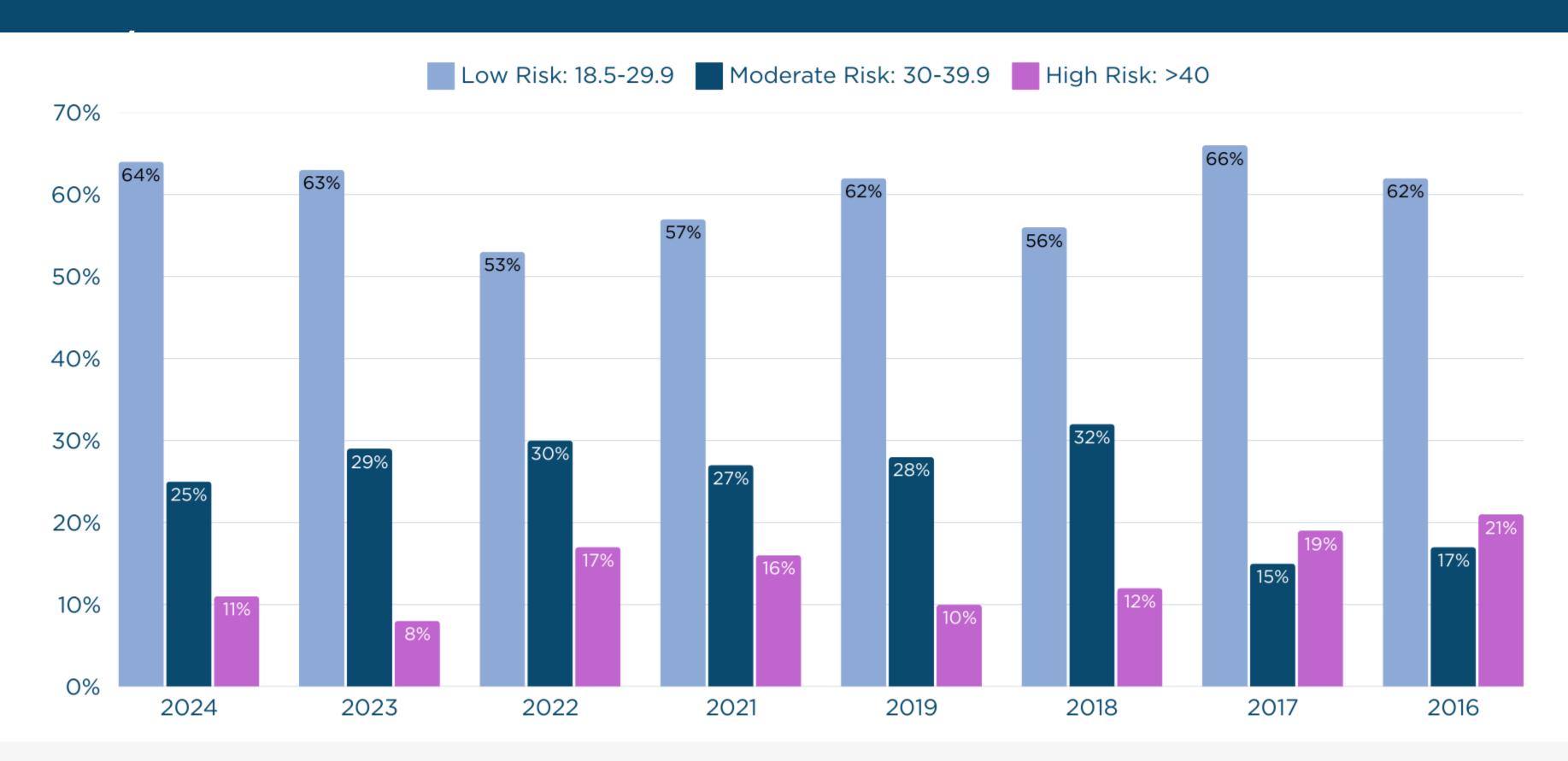


# Diabetes Management: Hemoglobin A1C



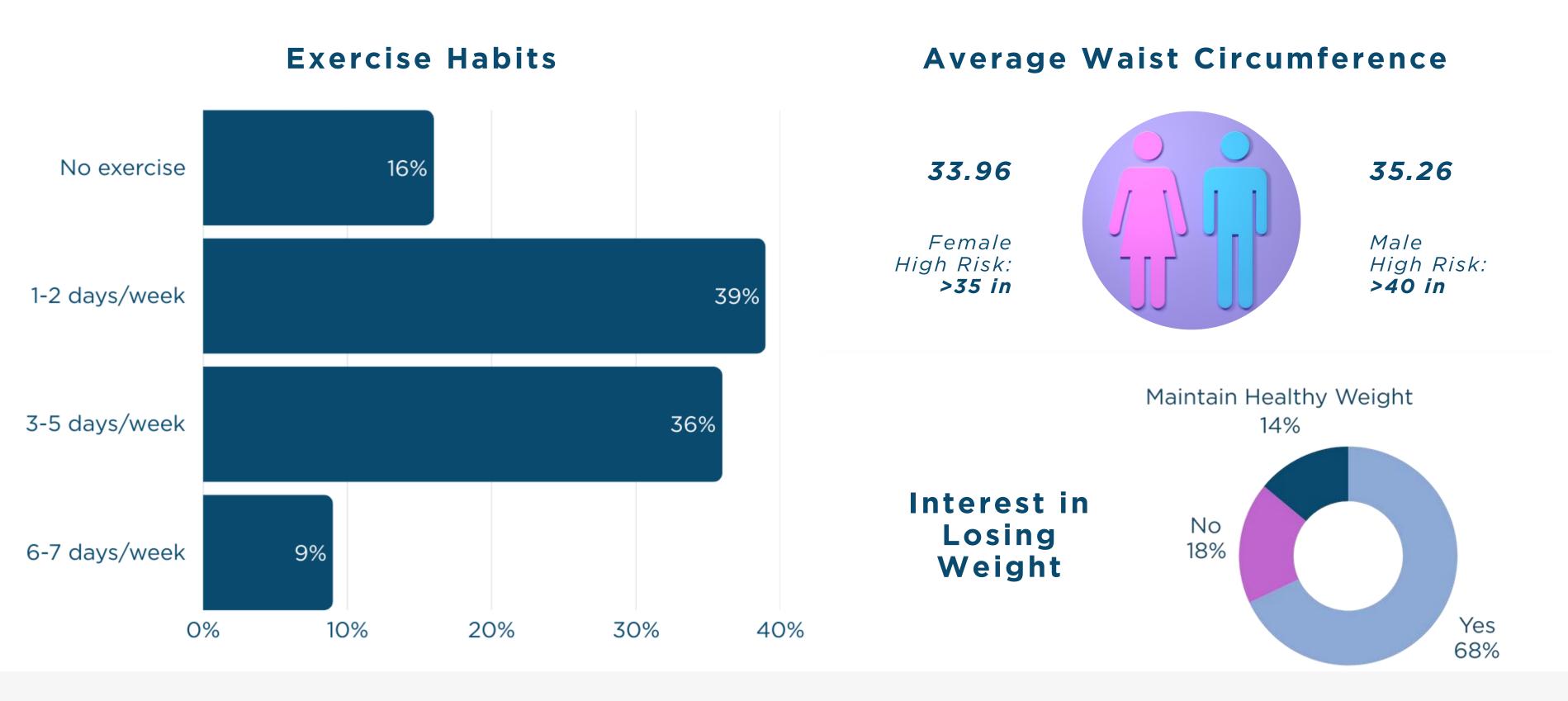


# Body Composition: Body Mass



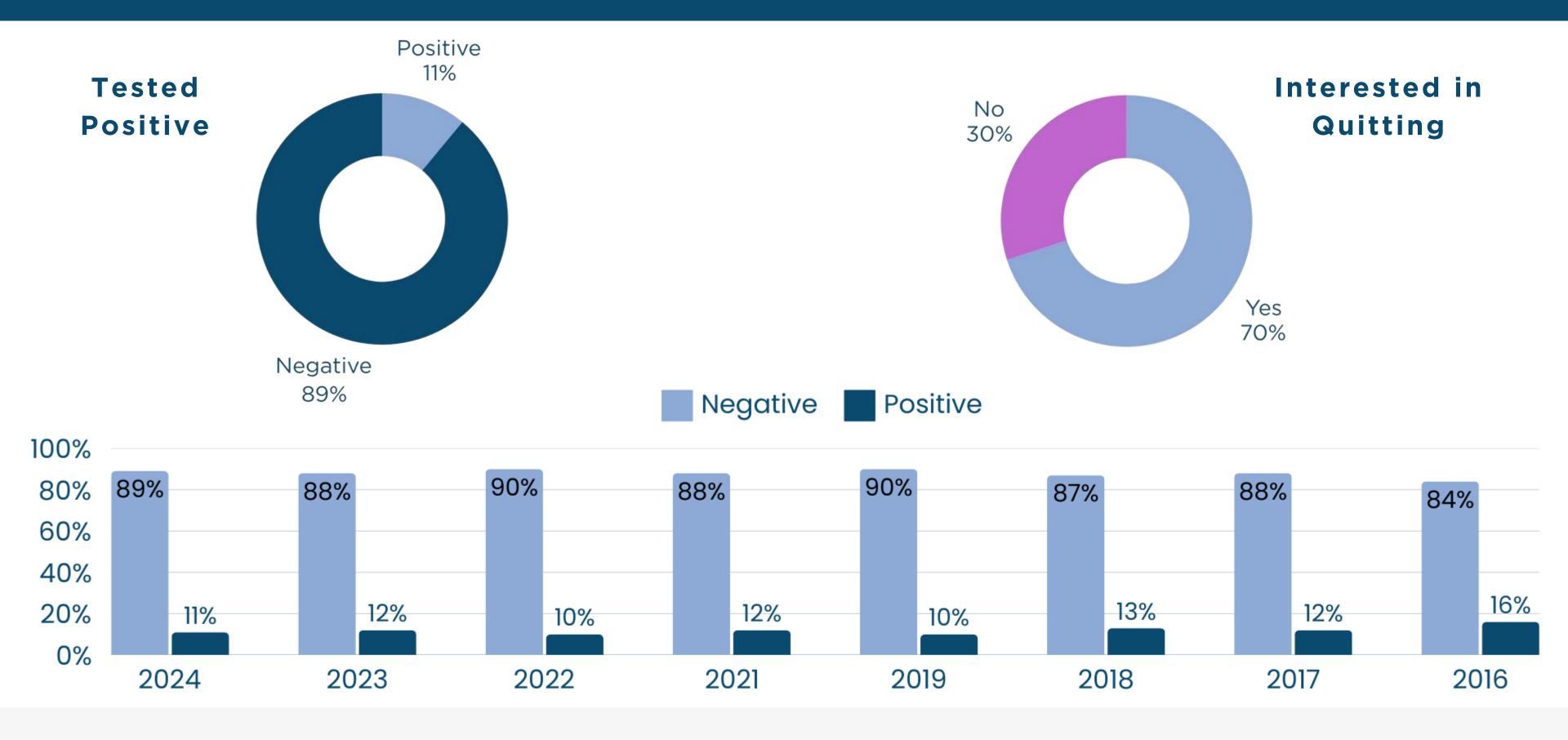


# Body Composition





### Nicotine Use



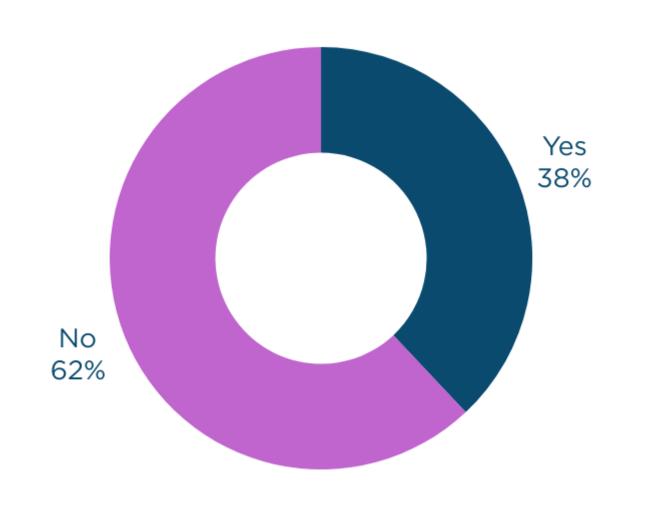


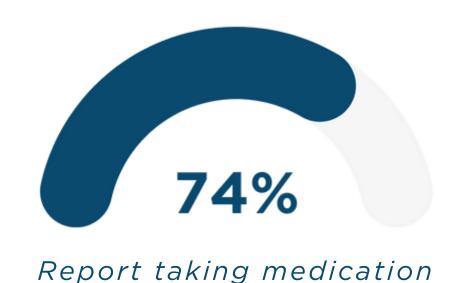
# Mental Health & Well-being

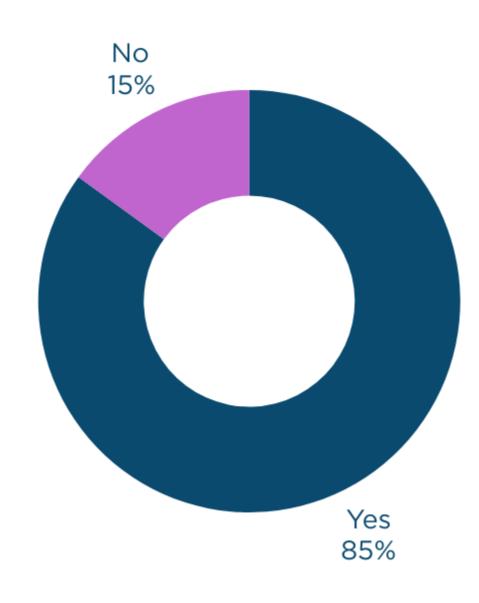




Maintains a
Healthy Work-Life
Balance





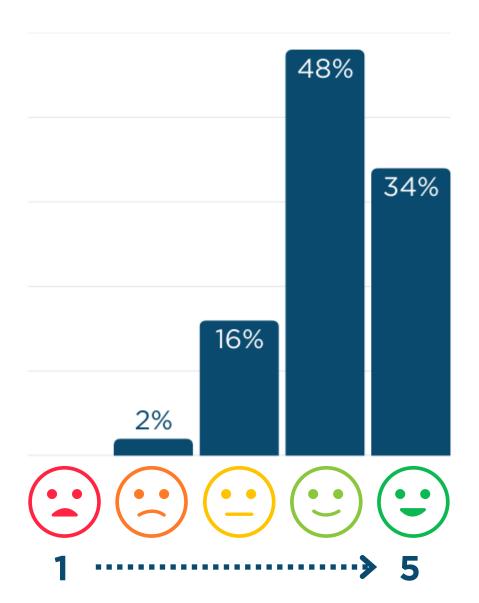




# Occupational Well-Being - Part 1

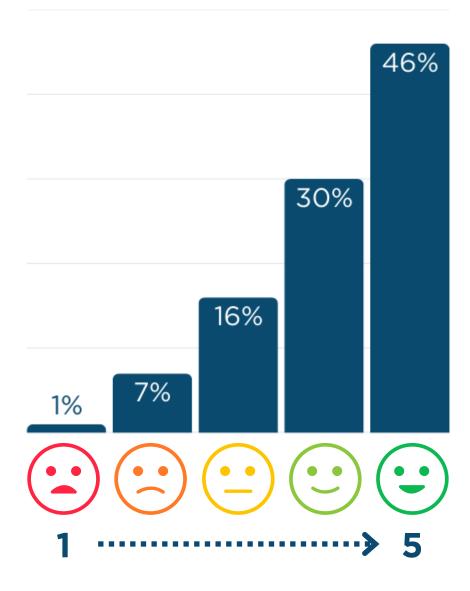
### Fulfillment at Work

Eversight Average: 4.14 Strive Average: 4.00



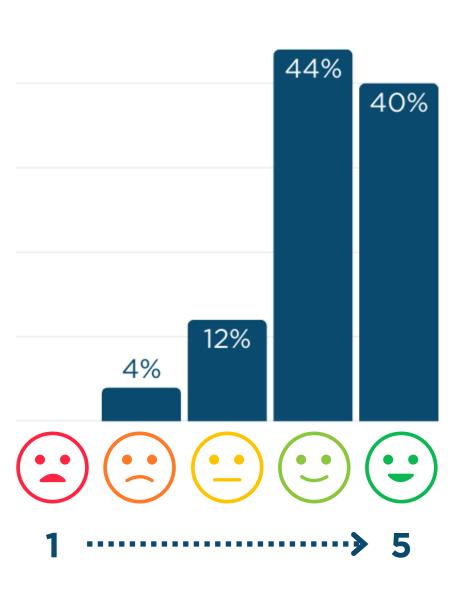
### Feeling Valued at Work

Eversight Average: 4.13 Strive Average: 3.97



#### Job Satisfaction

Eversight Average: 4.20 Strive Average: 3.99

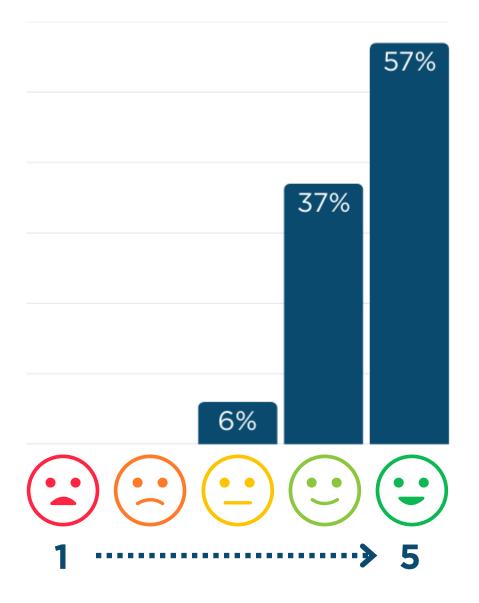




# Occupational Well-Being - Part 2

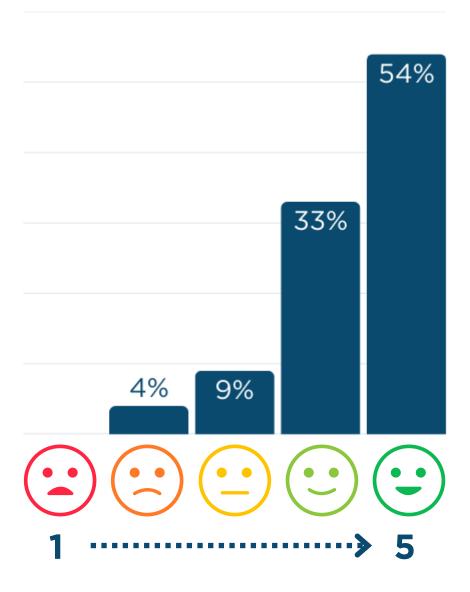
# My Work is Meaningful to Me

Eversight Average: 4.50 Strive Average: 4.14



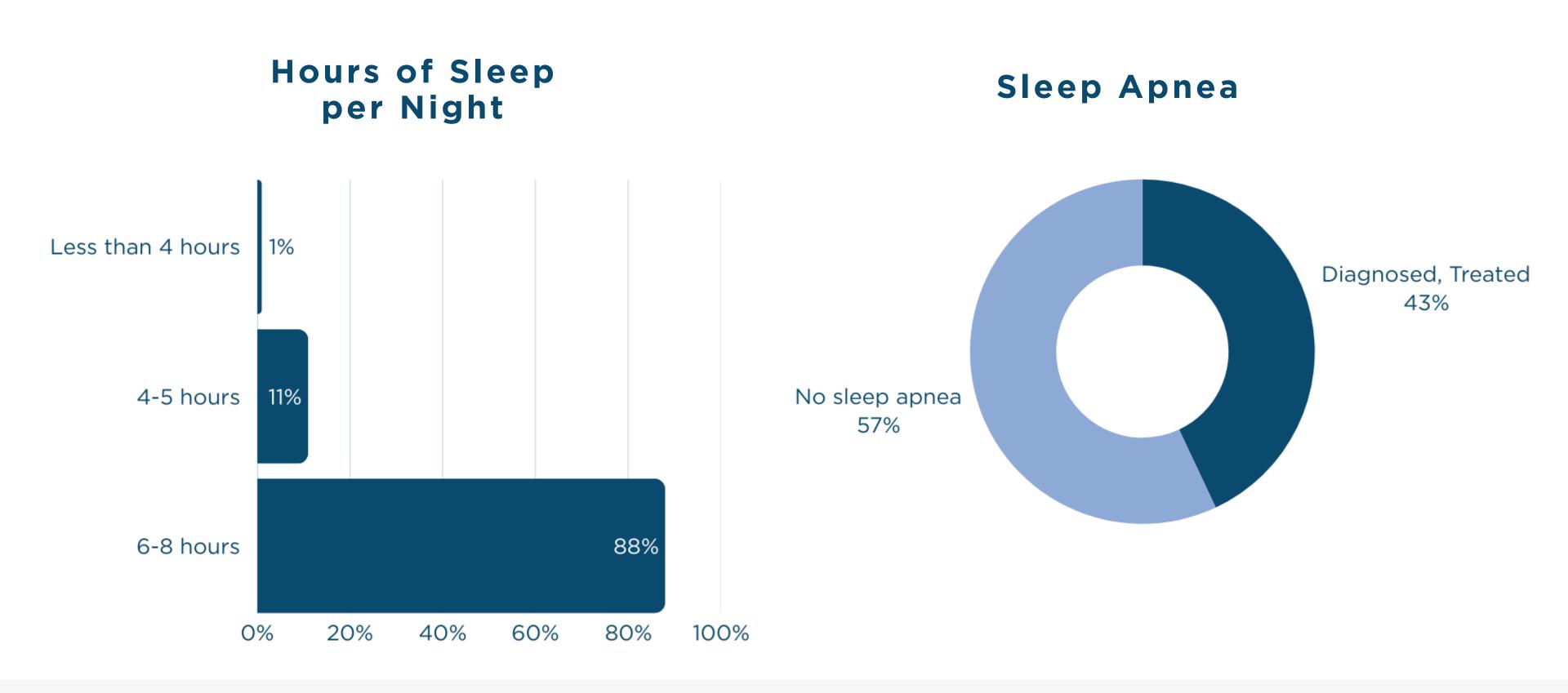
### My Employer Provides Well-Being Tools & Resources

Eversight Average: 4.37
Strive Average: 4.08





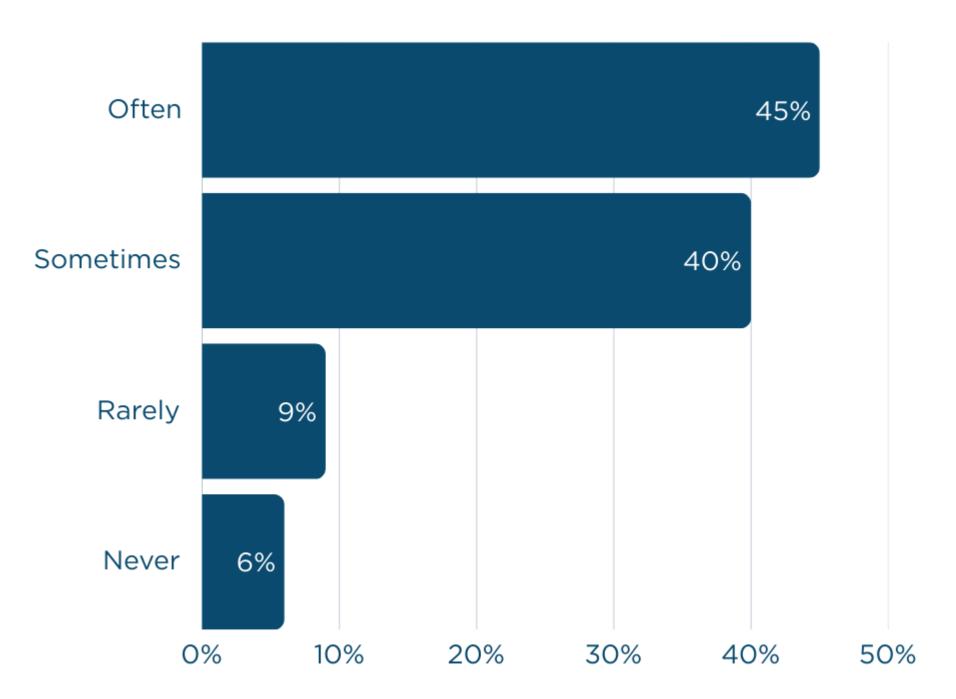
# Sleep Habits

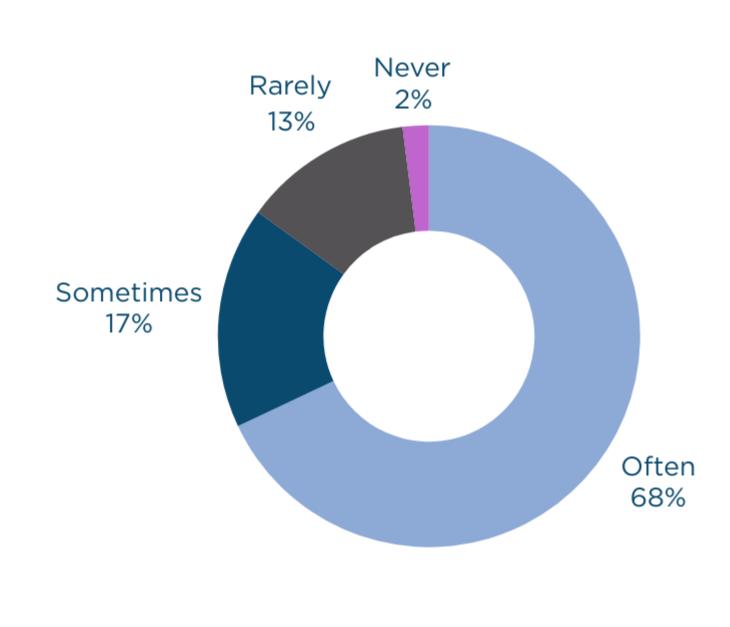




### Nutritional Habits







**Choose Water Over Sugary Beverages** 



# Gamma-Glutamyltransferase (GGT)

### **Breakdown**



#### What is 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.



# Thank you!

Questions?

Wellness Coordinator: Emma Lough

743-929-6587

emma.lough@kapnick.com

