







# **EXECUTIVE REVIEW**

# & STRATEGIC PLANNING

04/22/2024





The Future is Riding on AJAX.®

# TABLE OF CONTENTS

### **Section I. Summary**

**Key Findings** 

Participation

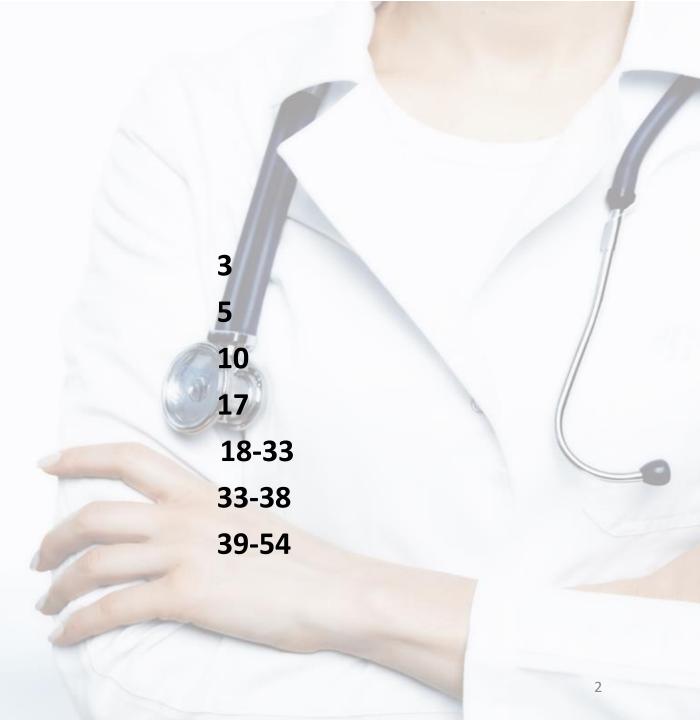
**Biometric Averages** 

**Top Risk Factors** 

**Section II. Claims Analysis** 

**Section III. Goals and Strategies** 

**Section IV. Biometric Risk Breakdown** 







# 2023 KEY FINDINGS

- Average health score (78) remained in low-risk range
  - Average health score for repeat participants: 76
- 73% of screened participants fell into the low to ideal risk range
  - 72% of repeat participants remained in low risk or made a positive risk migration
- 87% of screened participants were repeat participants
- 1 participant quit smoking
  - 7% of participants made a negative risk migration in tobacco
- 91% of the screened population earned the wellness incentive
- 100% of those that enrolled in RAS completed the health coaching program
- Top risk factors are diabetes, blood pressure, and body composition
- 39% of members have a chronic condition & those members make up 89% of the total medical & Rx spend
- 2 of the top 5 chronic conditions have a higher prevalence than benchmark (obesity & sleep apnea)
- Gaps in care metrics for hypertensive & diabetic members are **better than benchmark**; meaning most members needing to take a medication to manage the condition are doing so
- Members who participated in Strive have a higher rate of wellness and office visits compared to those who were eligible but did not participate in Strive
- Members with screenings have an **annual cost approximately \$1,200 more** than eligible members without screenings (when excluding high-cost claimants). This is primarily due to a large number of non-participants not using the health plan
- Members with a health score of 70+ have an annual cost approximately \$1,000 less than members with a score below 70, when excluding high-cost claimants
- Members with a screening in both 2022 & 2023 experienced a **6% decrease in overall costs**, when excluding high-cost claimants. Even with a cost decrease, utilization of hypertension, diabetes & cholesterol medications all increased for the repeat population

### WELLNESS PRESENTATIONS/RECORDINGS

- March Happy, Healthy Heart
- June Stress Busters
- September Nutrition 101
- December Breaking Burnout

### **WELLNESS CHALLENGES**

- April 5th Annual Kapnick Strive Corporate Challenge 6 participants
- August Hydration Station 4 participants
- October No Time Like the Pleasant 7 participants
- December The Beat Goes On 7 participants

### **HEALTH SCREENINGS**

- 3 On-Site Events in October, November, December
- 1 home screening

### **ADDITIONAL WELLNESS EVENTS**

- 12 Strive Monthly Webinars
- 12 Strive Monthly Newsletters
- 4 Meditation Moment Sessions

# 2023 EMPLOYEE EVENTS





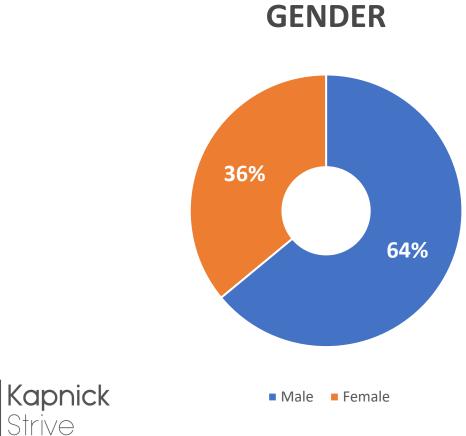
# TOTAL PARTICIPATION

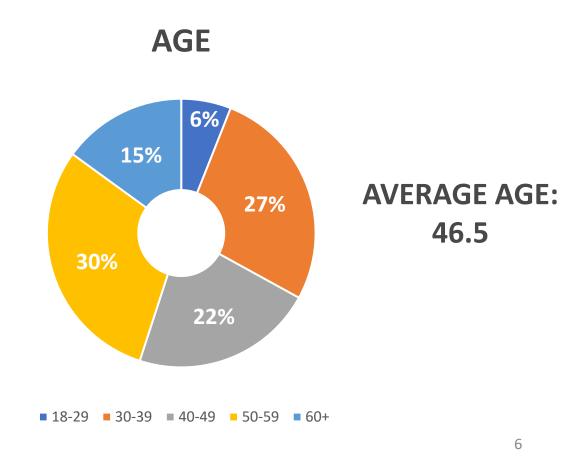
### Repeat participants: 87



YEAR	TOTAL PARTICIPATION	% OF TOTAL ELIGIBLE
2023	100	56%
2022	93	57%
2021	90	66%
2020	105	69%

# 2023 DEMOGRAPHICS

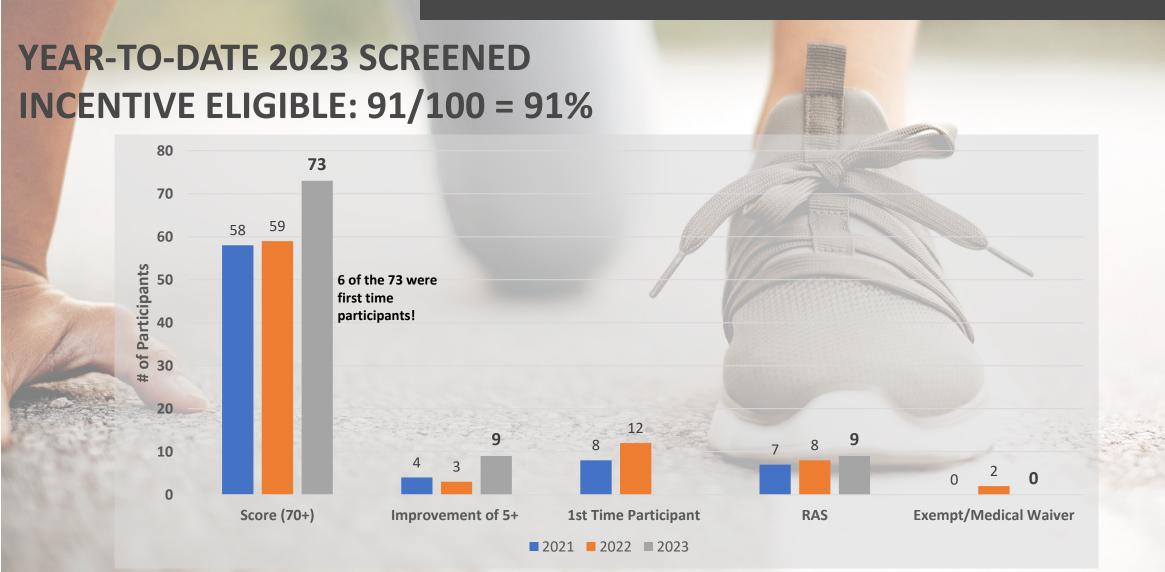








# WELLNESS INCENTIVE BREAKDOWN





### **PROGRAM OUTREACHES**

Qualification Category:	2023	2022
60 & Below	13% of screened population (connected with 34%)	15% (connected with 57%)
<b>RAS</b> Reasonable Alternative Standard	16% of screened population • 53% enrolled • 100% completed	18% (78% completed RAS)
Critical Value	0	0

- RAS qualification decreased 2% from previous year
  - 22% increase in RAS completion from previous year
- Critical values remained at 0 for both years



### **2022 RAS PROGRESS**

"[health coach] encouraged my small adjustments and didn't push for large changes." Participant suffered from back issues and felt limited in the exercise they could do. In addition to RAS, they participated in one of the wellness challenges, they incorporated 10-min walks and a 10-min stretch into mid day routine. They feel less back pain and energy is higher throughout the day. They enjoyed this small change and plans to continue it daily!

"Wellness care is not about today it is about the future and how you wanna live at daily changes needed"

### Of the 2022 RAS participants:

 89% had an increase in health score in 2023 AND satisfied the eligibility criteria to earn the 2024 wellness incentive without RAS

# BIOMETRIC AVERAGES



Biometric	Ideal Range	2023 Strive Benchmark	2023 AVG	2022 AVG	2021 AVG	2020 AVG
Health Score	70 - 100	78	78	<b>76</b>	78	78
вмі	18.5 - 29.9	30	30	29.8	29.6	29.9
Waist/Hip Ratio	<= 0.95	.91	0.91	0.90	0.88	0.91
BP: Systolic	≤121mmHg	119	121	122	121	119
BP: Diastolic	≤81mmHg	76	77	79	77	77
Total Cholesterol	<200mg/dL	190	194	199	202	195
HDL Cholesterol	>=50	55	55	54	55	54
LDL Cholesterol	<=129	110	115	118	120	111
Triglycerides	<150	129	113	130	137	152
Blood Glucose	≤100mg/dL	100	98	97	100	101
Hemoglobin A1C	<5.7%	5.6	5.5	5.6%	5.5%	<b>5.6%</b>



### Ideal = 100-85

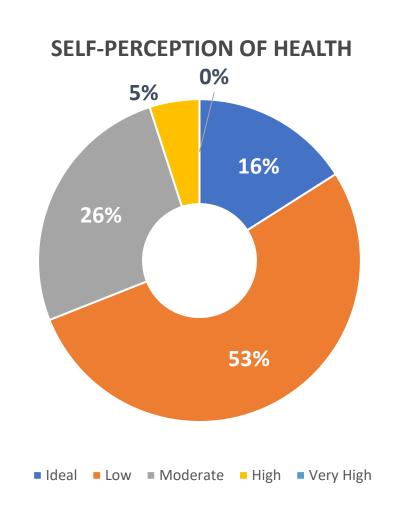
Low Risk = 84-70

Moderate Risk = 69-60

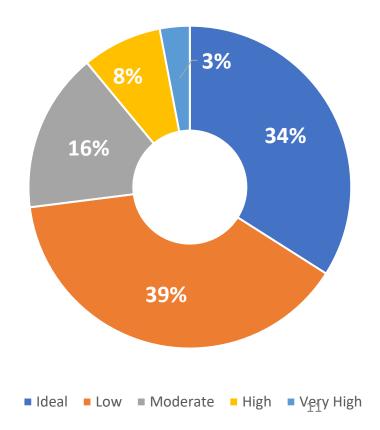
High Risk = 59-50

Very High Risk = 49-0

### SELF-PERCEPTION VS ACTUAL HEALTH

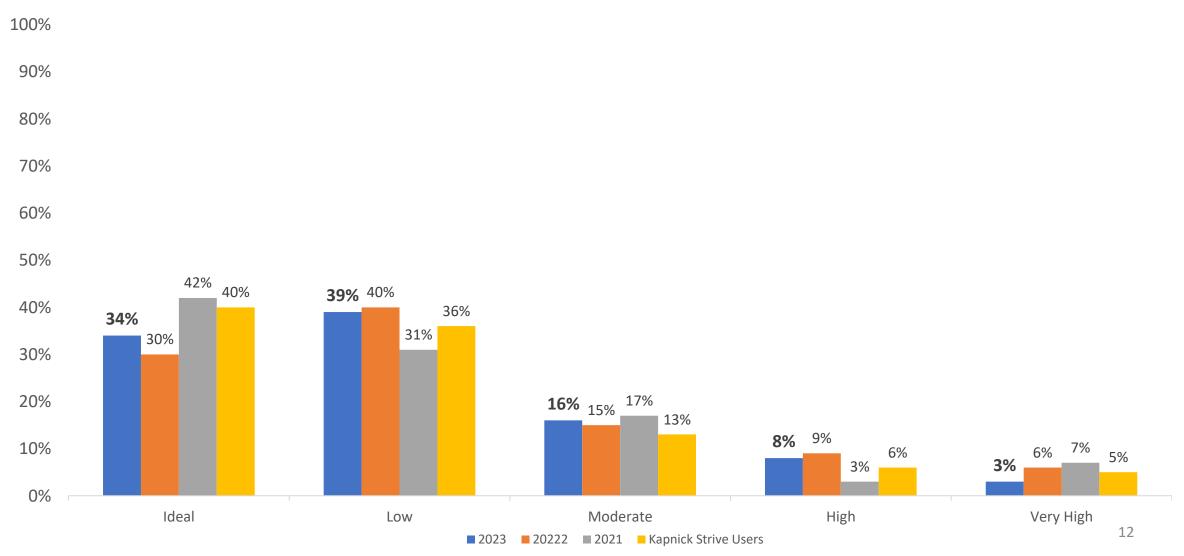


### **ACTUAL HEALTH SCORE**





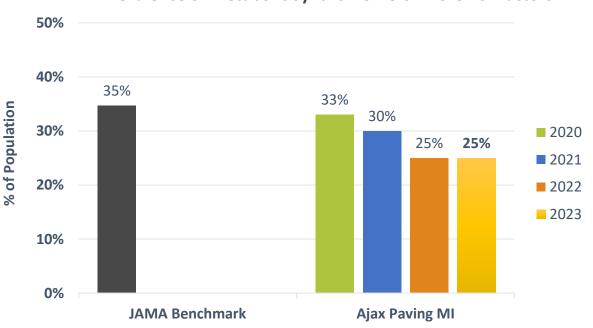
# HEALTH SCORE BENCHMARKING

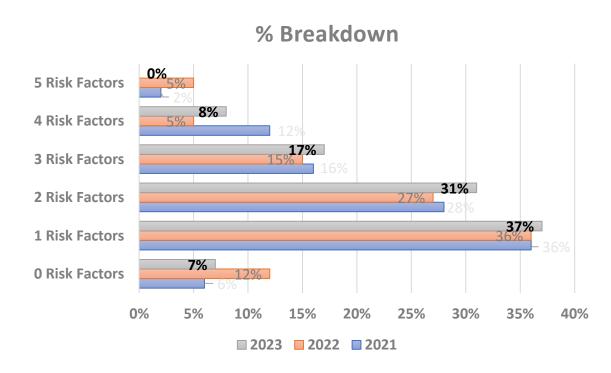




### METABOLIC SYNDROME RISK

### 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



### REPEAT PARTICIPANT RISK CHANGE

Repeat participants: 87

REMAINED IDEAL/LOW
AND/OR MADE
POSITIVE RISK
MIGRATION

9

72%

Remained Ideal/Low: 51

Made a Positive Risk Migration: 12

REMAINED MODERATE OR HIGH/V HIGH



7%

MADE A NEGATIVE RISK MIGRATION



21%

- Ideal/Low to High or V.High: 2
- Ideal/Low to Moderate: 7

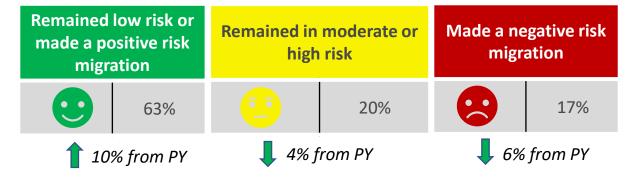


# REPEAT PARTICIPANT - BIOMETRIC RISK CHANGE Heart Health

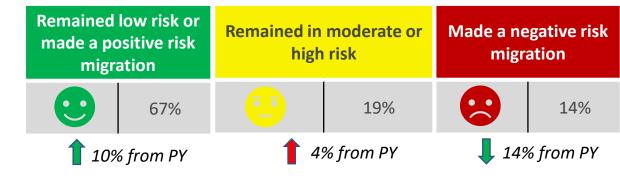
### **Total Cholesterol**

made a po	ncitive rick		Remained in moderate or high risk		gative risk ation
	62%	<u> </u>	20%		18%
<b>J</b> 1%	from PY	<b>1</b> 3%;	from PY	<b>J</b> 2%	from PY

### **Systolic Blood Pressure**



### **Diastolic Blood Pressure**



### What is 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.

**Key:** *PY = Previous Year* 

Positive change



Positive change

Negative change

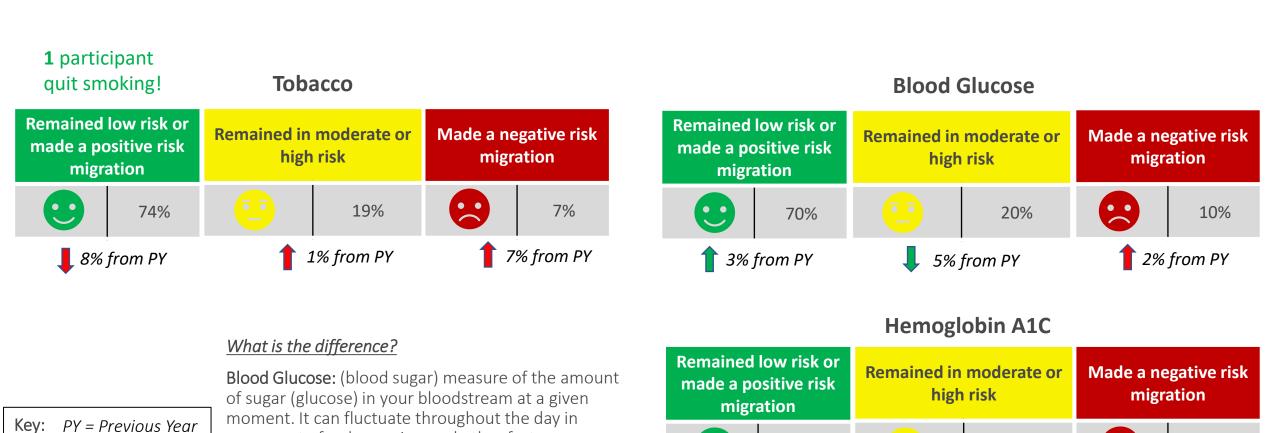
# REPEAT PARTICIPANT - BIOMETRIC RISK CHANGE Tobacco & Diabetes Management

73%

11% from PY

22%

4% from PY



response to food, exercise, and other factors.

diabetes management.

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

16

5%

7% from PY

# TOP RISK FACTORS













# Chronic Conditions & Health Screening Claims Analysis

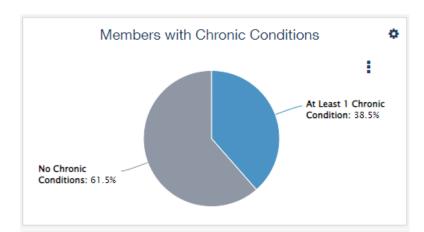


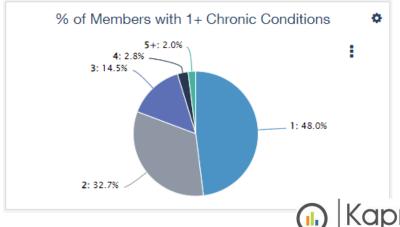


# Chronic Condition Prevalence

- 38.5% (85) of members on Ajax Paving's health plan have at least 1 chronic condition
  - This is **below** the Kapnick book of business benchmark which is 42.0%
- Of the members with a chronic condition, 48.0% (41) have only 1 while 52.0% (44) have more than 1
  - This is favorable compared to benchmark which had 46% with only 1 and 54% with more than 1
- The top 5 chronic conditions are obesity, hypertension, hyperlipidemia, diabetes & sleep apnea
  - Obesity & sleep apnea have a higher prevalence as compared to benchmark
- Compared to benchmark, Ajax Paving had a lower average age & higher member ratio
  - The avg age was 33.7 compared to benchmark at 36.1
  - The member ratio was 2.4 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 2023 on an incurred basis







# **Chronic Condition Cost**

Year	Total Allowed Amount	Total Allowed with Chronic Conditions	Chronic Condition % of Total Cost	Chronic Condition % of Total Cost (Benchmark)
2021	\$1.9M	\$1.6M	85%	73%
2022	\$1.9M	\$1.6M	82%	73%
2023	\$1.3M	\$1.1M	89%	75%



While members with chronic conditions make up 39% of membership, they make up 89% of the total spend in 2023

- All members enrolled in the health plan are included
- Data is from Jan 2021 through Dec 2023 on an incurred basis





# **Chronic Condition PMPM 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)
2021	\$801	\$1,830	\$198	\$772	\$165
2022	\$780	\$1,610	\$236	\$751	\$168
2023	\$487	\$1,119	\$90	\$825	\$179

The PMPM cost of members with chronic conditions is 5.8-11.4x higher than members without chronic conditions

The PMPM cost of members with chronic conditions is 4.5-4.7x higher than members without chronic conditions

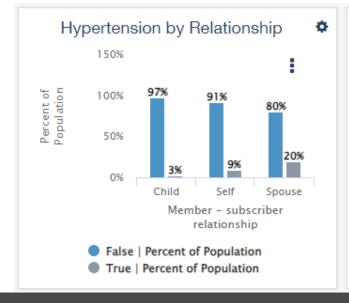
- All members enrolled in the health plan are included
- Data is from Jan 2021 through Dec 2023 on an incurred basis

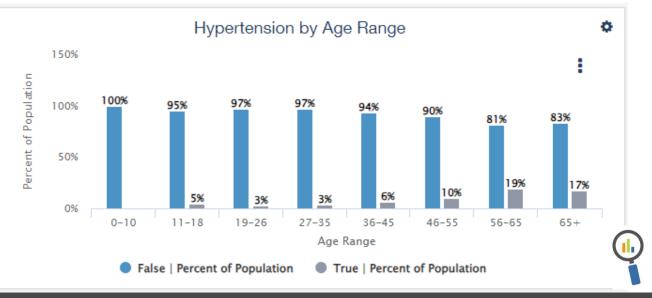




# Hypertension: Demographics

Year	Hypertensive Members (Employees)	Hypertensive Members (Spouses)	Hypertensive Members (Dep CH)	Hypertensive Members (Total)	Hypertensive Members (% of Total Population)
2021	27	9	0	36	17.8%
2022	30	10	1	41	20.0%
2023	33	12	3	48	21.9%





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# Hypertension: Gaps in Care

Year	Total Hypertensive Members  (enrolled full 12 months)	Total Hypertensive Members with No Maintenance Rx	Total Hypertensive Members with No Maintenance Rx Strive Participant	Of the 2023 Strive Participants  High Blood Pressure Stage 2	
	(cinolica fail 12 months)	(enrolled full 12 months)	(in 2023)	(High-Risk)	
2021	16	4 (25%)	3	-	
2022	21	4 (19%)	3	-	
2023	21	1 (5%)	1	0	

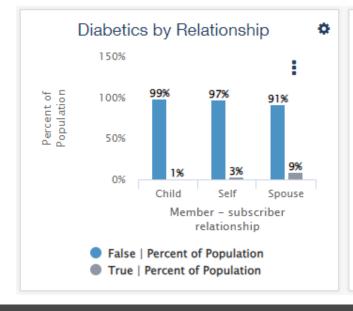
- The "total hypertensive members with no maintenance Rx who participated in Strive in 2023" column totals 4 members
- None of the 4 members have a high-risk biometric result
- Success story
  - 61 y/o employee
  - The member was hypertension Stage 2 in 2022 but improved to Stage 1 in 2023
  - The health score also improved from 40 in 2022 to 52 in 2023
  - The member reviewed their health report & was a RAS participant in 2022

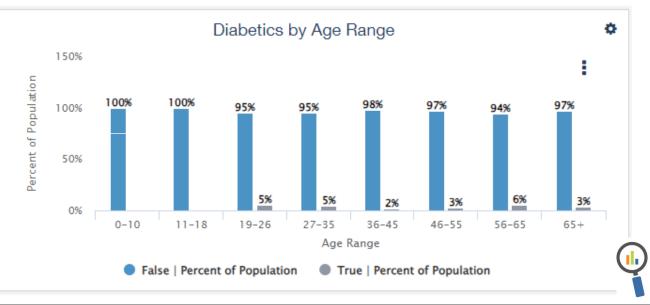




# Diabetes: Demographics

Year	Diabetic Members (Employees)	Diabetic Members (Spouses)	Diabetic Members (Dep CH)	Diabetic Members (Total)	Diabetic Members (% of Total Population)
2021	7	2	0	9	4.4%
2022	10	3	1	14	6.8%
2023	11	4	1	16	7.3%





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# Diabetes: Gaps in Care

Year	Total Diabetic Members	Total Diabetic Members with No Maintenance Rx	Total Diabetic Members with No Maintenance Rx	Of the 2023 Strive Participants
	(enrolled full 12 months)	(enrolled full 12 months)	<b>Strive Participant</b> (in 2023)	Diabetic <b>(High-Risk)</b>
2021	7	0	-	-
2022	6	0	-	-
2023	9	0		

<sup>•</sup> All diabetic members in 2021, 2022 & 2023 had at least 1 diabetic prescription during the year





# **Screening Overview**

Participated in the Health Screening	Total
Enrolled in Health Plan	100
Enrolled all 12 Months	91
Had 0 Claims	15
% Total w/ 0 Claims (Enrolled 12 Months)	16.5%

Did not Participate in the Health Screening	Total
Enrolled in Health Plan	57
Enrolled all 12 Months	33
Had 0 Claims	7
% Total w/ 0 Claims (Enrolled 12 Months)	21.2%

- Of the 15 strive participants with no claims:
  - The average age was 44
  - The average health score was 70
- Of the 76 strive participants with at least 1 claim:
  - The average age was 48
  - The average health score was 79

- Of the 7 non-strive participants with no claims:
  - The average age was 39
- Of the 26 non-strive participants with at least 1 claim:
  - The average age was 51

- Employees & spouse enrolled in the health plan & eligible to participate in health screenings in 2023 were included (dependent children excluded)
- Data is from Jan 2023 through Dec 2023 on an incurred basis





# Wellness/Office Visit

Participated in the Health Screening	Total
Enrolled in Health Plan	100
Enrolled all 12 Months	91
Had a Wellness Visit	50
% with a Wellness Visit (Enrolled 12 Months)	55%
Had an Office Visit	66
% with an Office Visit (Enrolled 12 Months)	73%
Had a Wellness or Office Visit	72
% with a Wellness or Office Visit (Enrolled 12 Months)	79%

Did not Participate in the Health Screening	Total
Enrolled in Health Plan	57
Enrolled all 12 Months	33
Had a Wellness Visit	13
% with a Wellness Visit (Enrolled 12 Months)	39%
Had an Office Visit	22
% with an Office Visit (Enrolled 12 Months)	67%
Had a Wellness or Office Visit	23
% with a Wellness or Office Visit (Enrolled 12 Months)	70%

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

- Employees & spouses enrolled in the health plan & eligible to participate in health screenings in 2023 were included (dependent children excluded)
- Data is from Jan 2023 through Dec 2023 on an incurred basis





# Screenings & Cost

	Members with Screenings					Members with	hout Screenings (EE	s & SPs) 🌼
	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	100	100 \$795,403 \$7,954			1	57	\$240,864	\$4,226
	Members wi	th Screenings (Excl	1 HCC)			No mor	nhars in this group	had
	Member ID (Count Distinct)  Medical/RX Provider Allowed Amount  Allowed per Member						nbers in this group costs over \$100k	IIau
1	99	\$541,384	\$5,469					

- Members with screenings cost approx. \$3,700 more than members without screenings
- When excluding high-cost claimants (HCCs) over \$100k, members with screenings cost approx. \$1,200 more than members without screenings
  - There was 1 member in the screening group with claims over \$100k
  - A 63 y/o spouse with \$254k in allowed claims due lung cancer
  - The member's score was a 92 in both 2022 & 2023
  - Per the Strive health report, the member was a non-smoker from at least 2021-2023
- In the members with screenings group, 31 members or 31% had less than \$500 in claims
- In the members without screenings group, 29 members or 51% had less than \$500 in claims

- Employees & spouses enrolled in the health plan & eligible to participate in health screenings in 2023 were included (dependent children excluded)
- Data is from Jan 2023 through Dec 2023 on an incurred basis





# Cost by Health Score

	Health	Score 70 and Abo	ve		Health	Score 69 and Beld	ow •			
	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	73	\$627,164		\$8,591	1	27	\$168,240	\$6,231		
	Health Score	70 and Above (Exc	ol 1 HCC)	٥		No meml	bers in this group	had		
	Member ID (Count Distinct)	Medical/RX Provider Allowed Amount	Allowed per Member		costs over \$100k					
1	72	\$373,145		\$5,183						

### Score 70+ vs <69

• Members with a health score of 70+ cost approx. \$2,400 more than members with a health score below 70

### Score 70+ vs <69: Excluding 1 HCC over \$100k

• Members with a health score of 70+ cost approx. \$1,000 less than members with a health score below 70

- Employees & spouses enrolled in the health plan & eligible to participate in health screenings in 2023 were included (dependent children excluded)
- Data is from Jan 2023 through Dec 2023 on an incurred basis





	Members with Screenings										
	Year number	number Member ID (Count Distinct) Medical/RX Provider Allowed Amount		Allowed per Member							
1	2022	86	\$681,093	\$7,920							
2	2023	86	\$688,957 \$8,011								
	Memb	ers with Screer	nings (Excl HCC	<b>•</b>							
	Year number	Member ID (Count Distinct)	Medical/RX Provider Allowed Amount	Allowed per Member							
1	2022	85	\$461,653	\$5,431							
2	2023	85	\$434,938	\$5,117							

- Repeat participants experienced a 1.1% increase in costs
- When excluding the HCC over \$100k, repeat participants experienced a 5.8% decrease
  - Members who had a health score increase averaged an 11% decrease
  - Members who had the same health score averaged a 66% decrease
    - Members who scored the same both years averaged a score of 84
    - All 10 members had less than \$5k in costs; 7 had less than \$1k in costs
    - 2 of the 10 members had no costs (scores of 84 & 85)
  - Members who had a health score <u>decrease</u> averaged an 18% increase

### **Assumptions:**

- Employees & spouses enrolled in the health plan & eligible to participate in health screenings in 2023 were included (dependent children excluded)
- Data is from Jan 2022 through Dec 2023 on an incurred basis

# Repeat Participants

	Health Score Increased •										
	Year number	Member ID (Count Distinct)	Medical/RX Provider Allowed Amount	Allowed per Member							
1	2022	48	\$296,804	\$6,183							
2	2023	48	\$264,368	\$5,508							
	Health Score Stayed the Same (Excl HCC)										
	Year number	Member ID (Count Distinct)	Medical/RX Provider Allowed Amount	Allowed per Member							
1	2022	10	\$27,853	\$2,785							
2	2023	10	\$9,401	\$940							
		Health Score D	ecreased)	٥							
	Year number	Allowed per Member									
1	2022	27	\$136,995	\$5,074							
2	2023	27	\$161,169	\$5,969							





# Repeat Participants

	He	alth Score Impi	roved by 15+	٥		Health Score Improved by 5-9					
	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	2022	5	\$50,206	\$10,041		2022	17	\$82,418	\$4,848		
2	2023	5	\$53,438	\$10,688	2	2023	17	\$46,248	\$2,720		
	Hea	alth Score Impro	oved by 10-14	۰	Health Score Improved 1-4						
	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	2022	9	\$31,947	\$3,550	1	2022	17	\$132,233	\$7,778		
2	2023	9	\$43,750	\$4,861	2	2023	17	\$120,933	\$7,114		

• Members who had a health score increase averaged an 11% decrease

- Employees & spouses enrolled in the health plan & eligible to participate in health screenings in 2023 were included (dependent children excluded)
- Data is from Jan 2022 through Dec 2023 on an incurred basis





# Repeat Participants

			Rep	Highest Costing Rx in 2023					0				
	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		Year 2022 2023		2022		
1	2022	\$681,093	\$609,938	\$71,154	1,162	1,357	2,519		Drug Product	Members	Total amount	Members	Total amount
2	2023	\$688,957	\$593,176	\$95,781	1,234	1,445	2,679		Name	Members	paid	Membero	paid
										2	\$16,455	2	\$12,566
			D	L D L' - l' L-				2	Motegrity			1	\$9,627
			кер	eat Participants			٥	3	Eliquis	3	\$5,229	2	\$9,175
		Hypertension	Diabetes	Cholesterol	Hypertension	Diabetes	Cholesterol	4	Januvia	1	\$4,898	1	\$6,993
	Year number	Maintenance RX Claim Count	Maintenance RX Claim Count	Maintenance RX Claim Count	Maintenance RX Amount Paid	Maintenance RX Amount Paid	Maintenance RX Amount Paid	5	Budesonide- Formoterol	2	\$4,311	2	\$5,384
1	2022	112	73	63	\$1,649	\$24,310	\$1,023		Fumarate		Ψ+,511		ψ5,504
2	2023	121	87	88	\$1,773	\$28,704	\$3,564		Total		\$30,894		\$43,745
2	2023	121	87	88	\$1,773	\$28,704	\$3,564		Total		\$30,894		

- Total medical & Rx costs increased \$8k due to Rx costs
- Medical costs decreased \$17k while Rx costs increased \$25k
- · Utilization of hypertension, diabetes & cholesterol medications all increased
- The main cause of the Rx cost increase was due to increased utilization of the following Rx:
  - Eliquis prevents blood clots totaled \$13k in 2023 compared to \$9k in 2022
  - Motegrity treats chronic constipation totaled \$10k in 2023 & not was utilized in 2022 (utilized by a member w/ \$60k in claims)

- Employees & spouses enrolled in the health plan & eligible to participate in health screenings in 2023 were included (dependent children excluded)
- Data is from Jan 2022 through Dec 2023 on an incurred basis











# Goals & Strategies





Participant A boosted their health score by 27 points, shifting from a high-risk status to an ideal one. This remarkable achievement was made possible through a weight loss of approximately 9 lbs, alongside reductions in cholesterol and LDL levels. Furthermore, they saw improvements in GGT and A1C by 0.3% and quit smoking, contributing to their overall health enhancement.

# 2023 STAND-OUT STORIES

Participant B made significant strides, enhancing their health score by 26 points through the loss of over 30 lbs. Additionally, they improved their total cholesterol and triglyceride levels, prompting a transition from high-risk to ideal status.

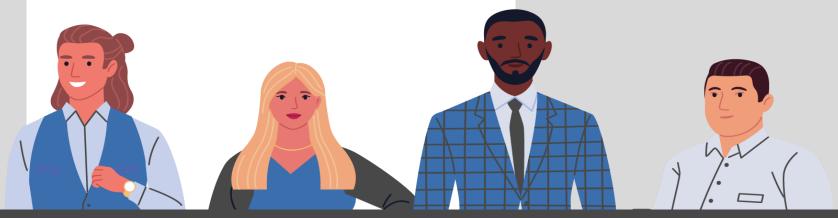
Participant C elevate their health score by 20 points, accomplishing this feat by improving their total cholesterol, HDL, LDL, and GGT levels.

31 repeat participants improved their health score by 5+ or more points

 14 of 31 participants improved 10+ points

1 repeat participants quit smoking!

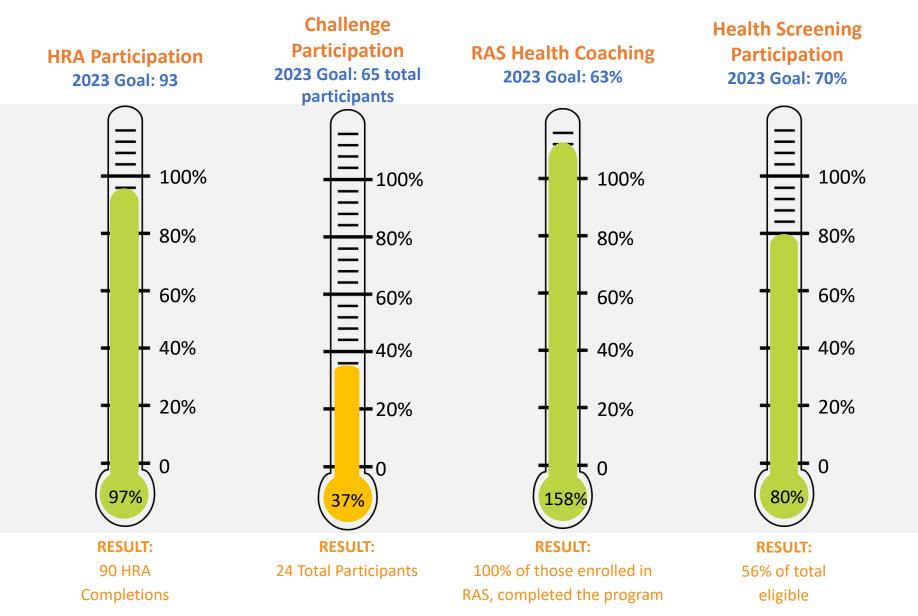




7 PARTICIPANTS RECEIVED A PERFECT HEALTH SCORE OF 100



### **PULSE CHECKS**





### **PULSE CHECKS**



**2024 GOAL:** 65% of total

population

### **HRA Participation**

2024 Goal:

60% of total census

### **RAS Health** Coaching

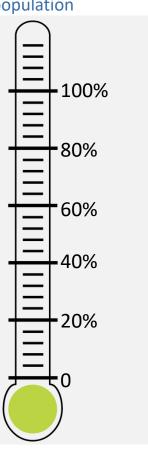
**2024 Goal:** 100% of RAS enrollees complete

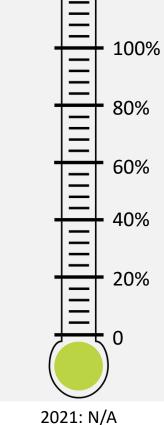
program

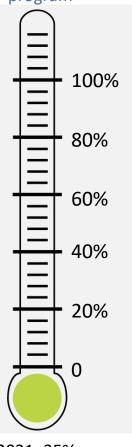


2024 Goal:

60% of total census







100% 80% 60% 40% 20%

2023: 55%

2022: 85 2023:90

2021: 35% 2022: 53% 2023: 100% 2021: 66% 2022: 57% 2023: 56%



# **2024 GOALS AND STRATEGIES**

Goals	Strategies
<ul> <li>Health Screening:</li> <li>Increase health screening participation by 5%</li> <li>Reach 100% of those eligible to enroll in RAS health coaching enrollments &amp; completion</li> </ul>	<ul> <li>Pre- and post-screening webinars</li> <li>Outbound calls to help employees sign up for their screening</li> <li>Post health screening event "next step" email</li> <li>Postcard &amp; Brochure with QR code</li> <li>Add health Hub link to Employee Navigator</li> <li>Continue screenings during October, November, December timeframe</li> </ul>
<ul> <li>Employee Engagement:</li> <li>60% of total census for HRA completion</li> <li>Target Top Health Risks</li> <li>Blood Pressure – 20% on HRA are 'aware' BP</li> <li>Weight Management – 35% on HRA answer 'maintain healthy weight' &amp; 10% on HRA answer 'no exercise'</li> <li>Diabetes - 75% of repeat population categorized as 'remained low or made a positive risk migration' (A1C)</li> </ul>	<ul> <li>AJAX Paving-Focused Monthly Communication</li> <li>Quarterly awareness campaigns for top health risks</li> <li>Continue Quarterly Pulse Checks</li> <li>Incentive to complete HRA &amp; Well-Visit</li> <li>Presentations &amp; Challenges that target top health risks</li> <li>Leadership participation</li> <li>Utilize Tango</li> <li>Well-Being Survey in September</li> </ul>



# 2024 EMPLOYEE EVENTS & OFFERINGS

# WELLNESS PRESENTATIONS/RECORDINGS

March: Aging and Your Health

• April: Bone Health

August: Feeding Your Microbiome

November: Post-Health Screening Info Session

November: Home Remedies

## **CHALLENGES**

• March: Them Bones

• May: 6<sup>th</sup> Annual Strive Corporate Challenge

• July: No Time Like the Pleasant

• September: Save Up!

• November: Maintain Don't Gain

## **HEALTH SCREENINGS**

October - December

# **STRIVE REWARD RAFFLES**

- 6 winners drawn quarterly
- 2 winner drawn annually

## **ADDITIONAL OFFERINGS:**

- 12 Strive Monthly Webinars
- 12 Strive Monthly Newsletters
- 12 Monthly Insiders
- 4 Meditation Moments
- 12 Monthly Observances
- Health Hub
- Strive Library
- Site Contact Website\*









# SIKIVE DIG... RISK ANALYSIS STRIVE 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 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 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.



**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. The CDC estimates that tobacco use costs \$156 billion in lost productivity each year and \$225 billion in healthcare expenditures (CDC, 2020).

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.

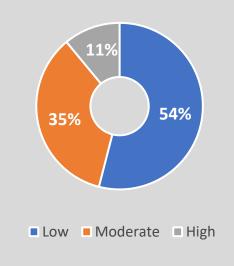
PROSTATE-SPECIFC ANITGEN (PSA)

Elevations in the PSA, or Prostatic-Specific Antigen, can occur from any inflammation of the prostate, including enlargement of the prostate gland, prostatitis or prostate cancer.

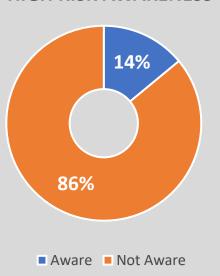


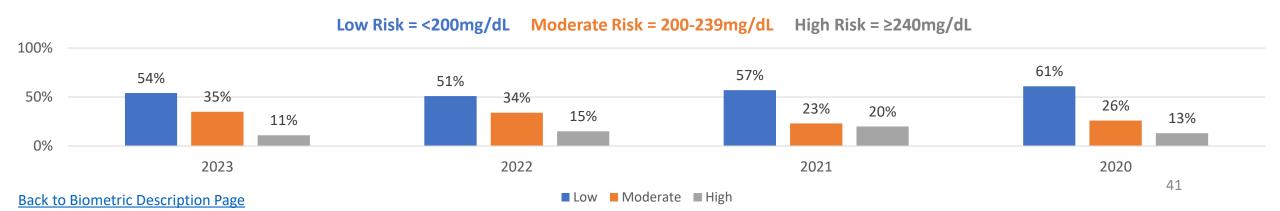


#### **TOTAL CHOLESTEROL BREAKDOWN**



#### **HIGH RISK AWARENESS**

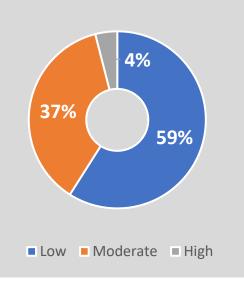








#### SYSTOLIC BREAKDOWN

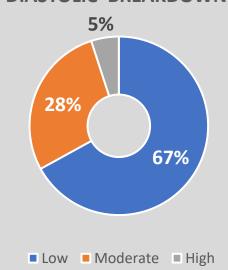


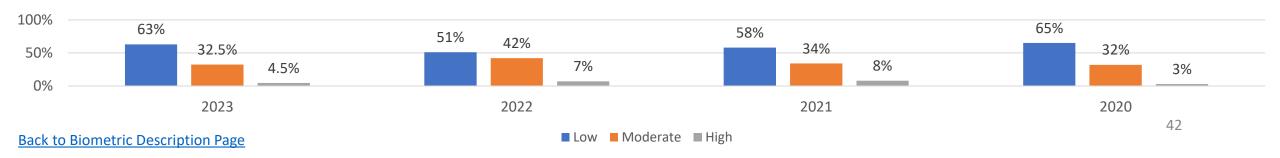
**Systolic blood pressure** (the top number) measures the force of blood against artery walls when the heart contracts.



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

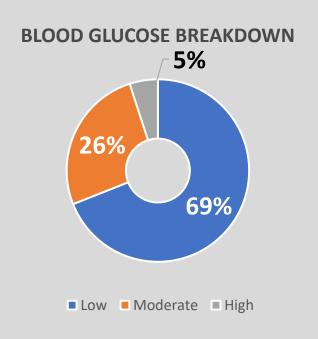
#### **DIASTOLIC BREAKDOWN**

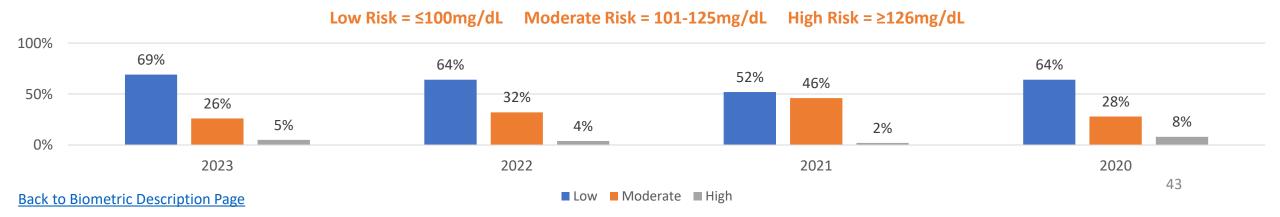






# DIABETES: BLOOD GLUCOSE

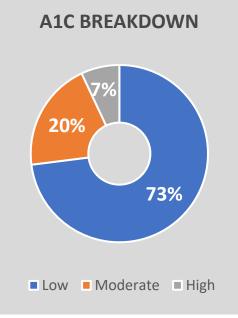


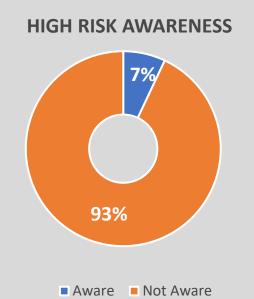


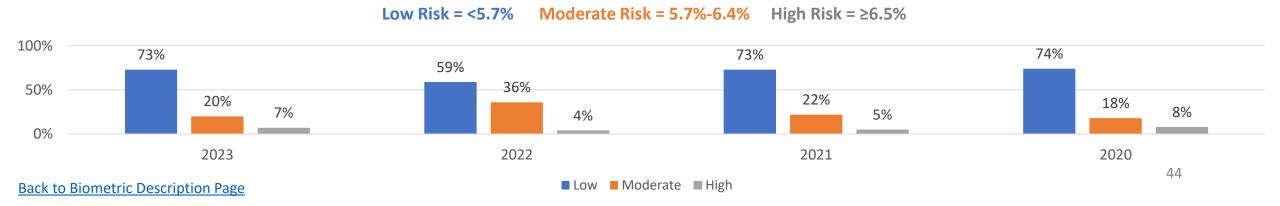




# DIABETES: HEMOGLOBIN A1C











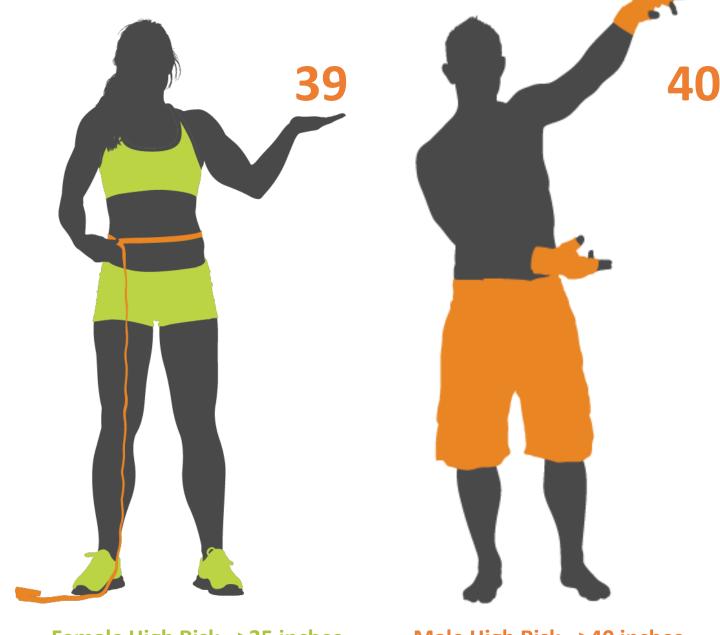


**Low Risk = 18.5-29.9 Moderate Risk = 30-39.9 High Risk = ≥40** 



# **AVERAGE WAIST** CIRCUMFERENCE FOR MEN & WOMEN



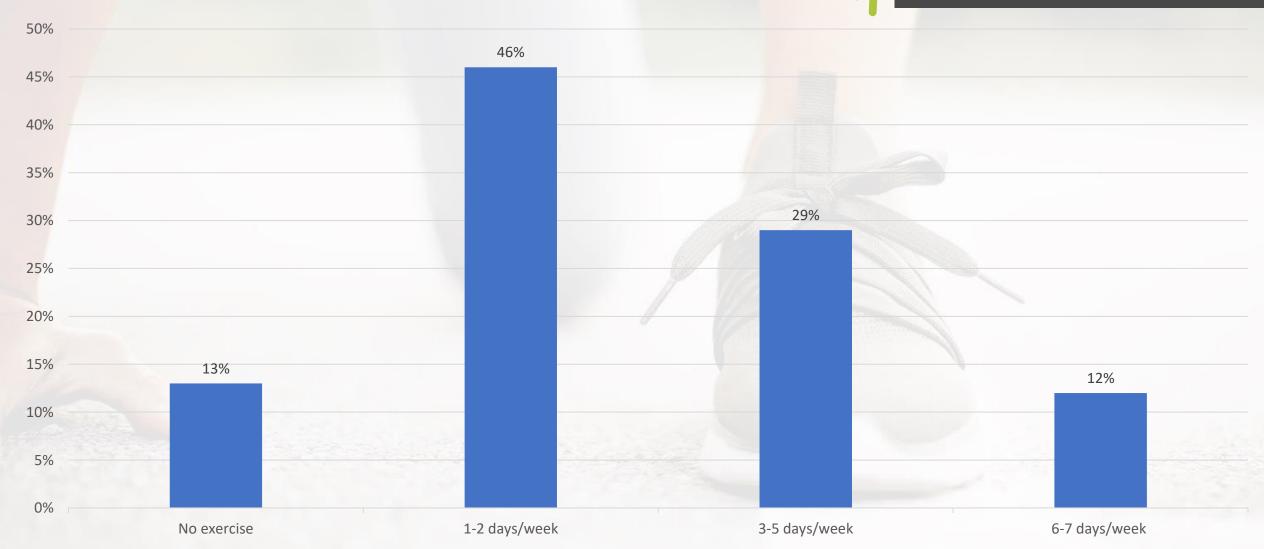


Female High Risk= >35 inches

Male High Risk= >40 inches 46



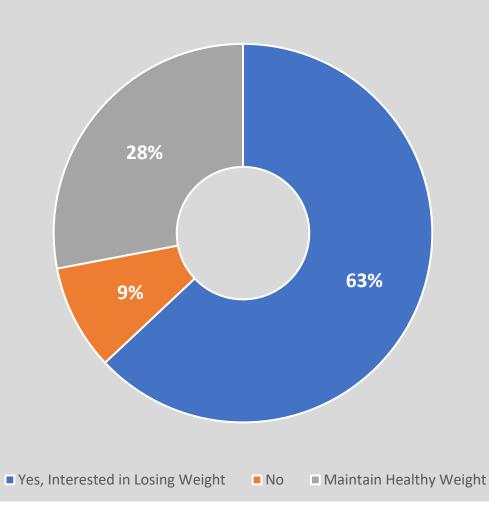








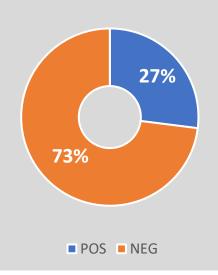
# BODY COMPOSITION: Interest in losing weight



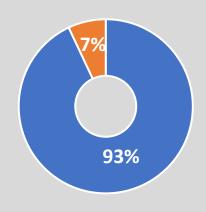




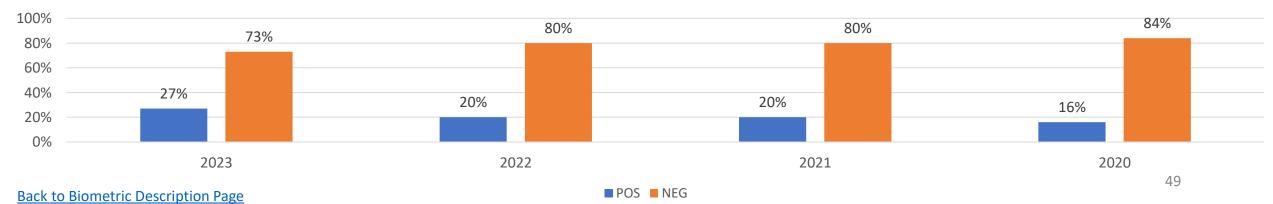
#### **TESTED POSITIVE**



#### **INTERESTED IN QUITTING**



■ Interested in Quitting ■ Not interested





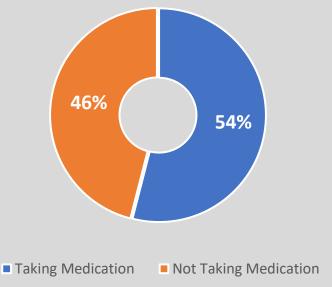


# MENTAL HEALTH & WELL-BEING

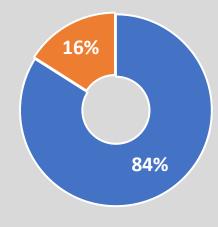
# ANXIETY & DEPRESSION 14% 86% Have Anxiety/Depression

■ Does Not Have Anxiety or Depression

# DIAGNOSED & TAKING MEDICATION FOR ANXIETY/DEPRESSION





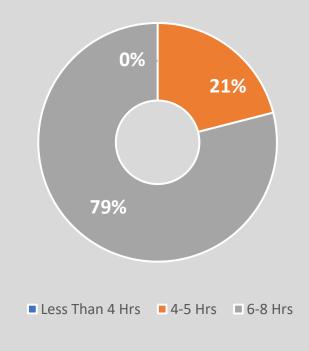


- Work DOES NOT Interfere With Personal Life
- Work DOES Interfere With Personal Life

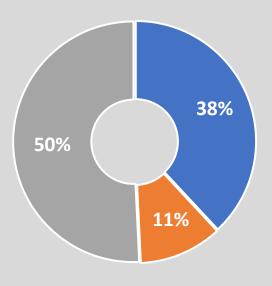




#### **HOURS OF SLEEP PER NIGHT**



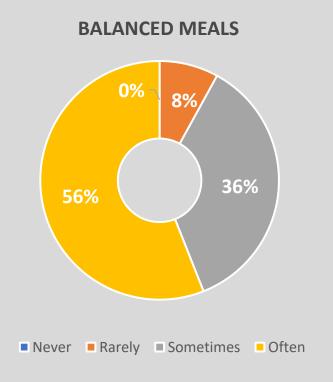
#### **SLEEP APNEA**

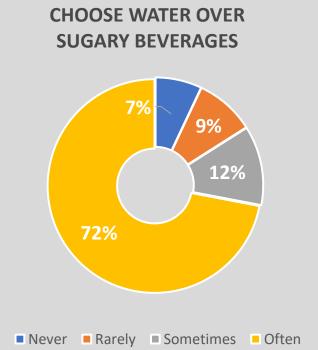


- Diagnosed and on Medication
- Diagnosed and NOT using Meds/Cpap
- No Sleep Apnea





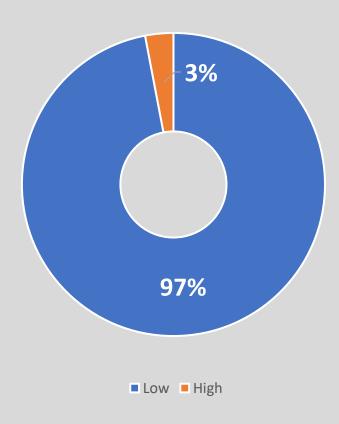






# GAMMA-GLUTAMYLTRANSFERASE (GGT)

#### **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.

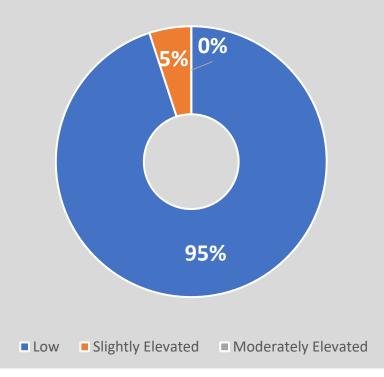
Low Risk = <66 High Risk =  $\ge66$ 

Biometric Descriptions Page



# ADDITIONAL TEST OFFERED

### **PROSTATE SPECIFIC ANTIGEN (PSA)**







Questions?