

Why Should Montana Employers Care About Worksite Wellness?

One of the most important assets an organization has is its employees. Healthy employees are more productive and can save money for their employer through lower health insurance premiums and less time away from work due to illness or injury.¹ Employers can help their employees make healthy choices by creating a healthy work environment, implementing health promoting policies, and providing health improvement programs.

This report describes the burden of chronic disease among working Montanans, including the lifestyle choices and healthcare costs associated with these chronic diseases. This report also discusses ways in which employers can help their employees make healthy choices by creating a healthy work environment.

Lifestyle Is Important

Unhealthy lifestyles are responsible for much of the illness, disability, and death related to chronic disease and injury (Table 1).²⁻⁹ The most common lifestyles that increase risk of chronic disease and injury among employed adults in Montana are obesity, lack of physical activity, and tobacco use (Figure 1). The proportion of men and women who reported obesity and lack of physical activity were similar. However, men had significantly higher proportion of current tobacco use than women. Fortunately, these lifestyle choices can be altered to reduce the risk of chronic disease and injury.

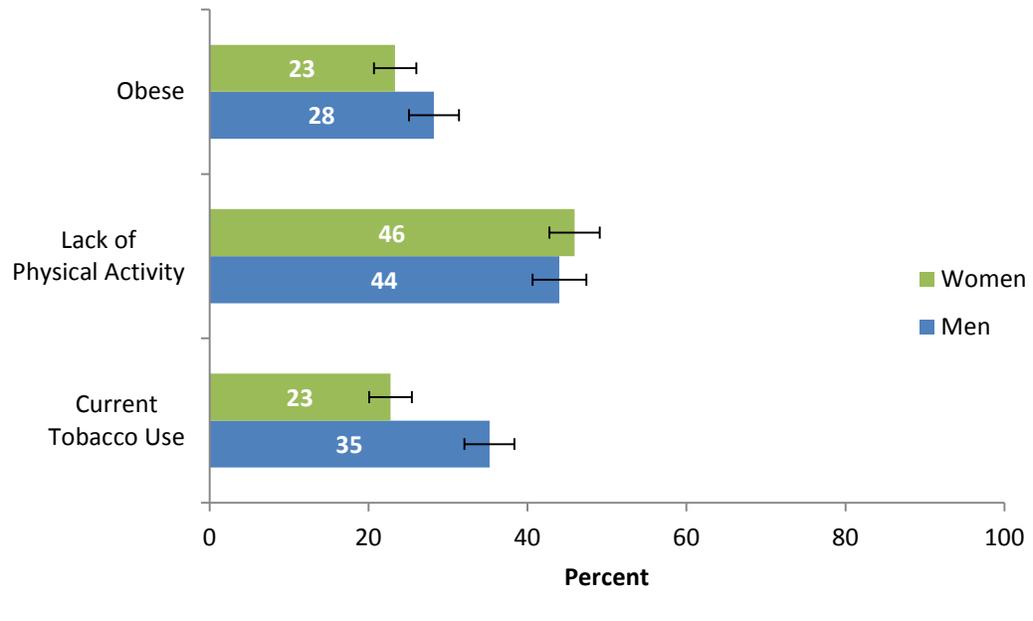
Table 1. Matrix of leading risky lifestyle choices and associated health conditions

	Tobacco Use	Lack of Physical Activity	Obesity
Cardiovascular Disease*	X	X	X
High Cholesterol		X	X
Diabetes	X	X	X
Cancer	X	X	X
COPD, Emphysema	X		
Asthma	X		X
Arthritis		X	X
Unintentional Injury		X	X

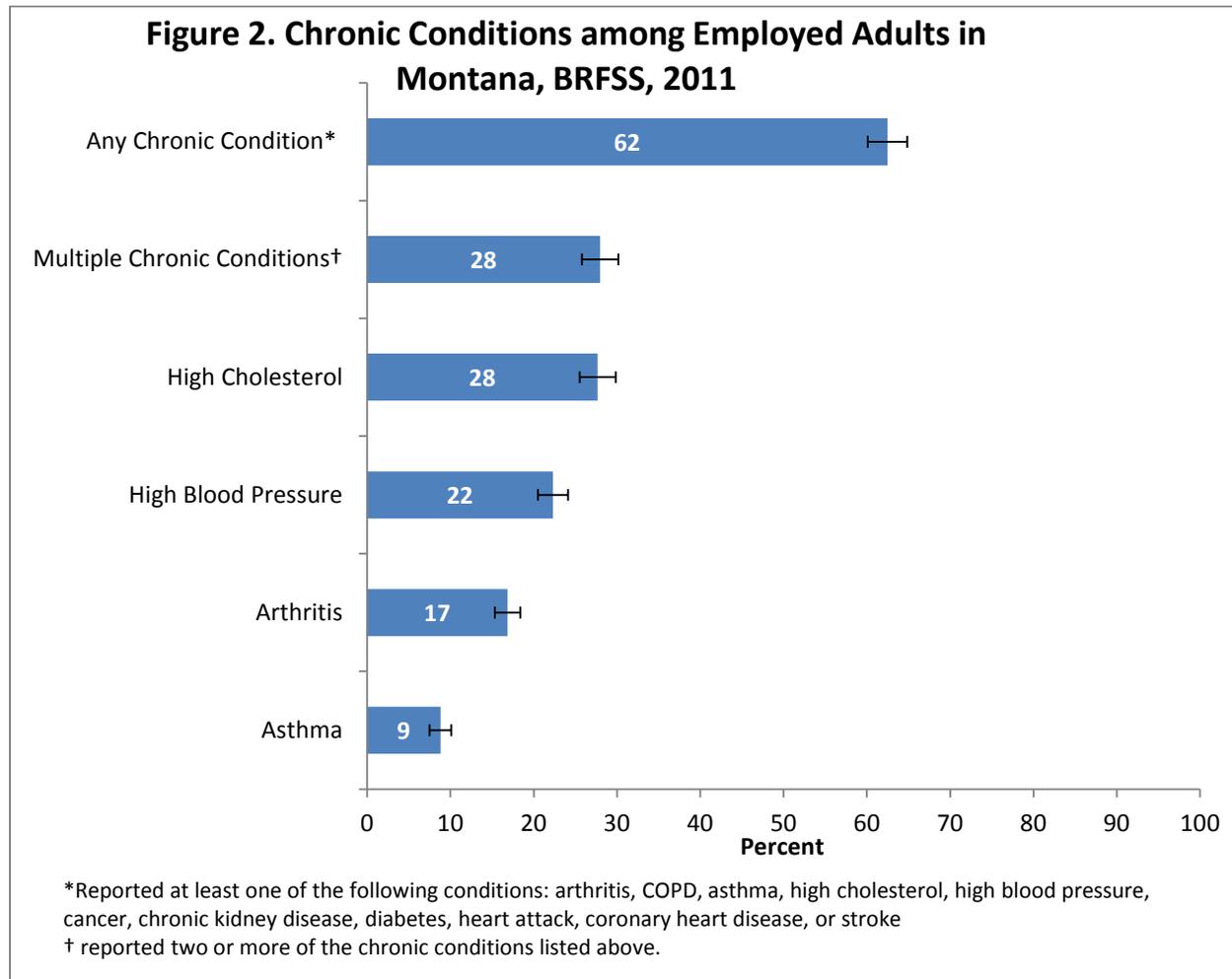
*Cardiovascular diseases include coronary heart disease, heart attack, stroke, and high blood pressure.

- \$361 million are spent on smoking-related medical costs in Montana each year.¹⁰
- 1,400 Montanans die due to tobacco use every year.⁴
- Over \$1.7 billion were spent on obesity-related medical care in Montana in 2010.⁶
- All adults need at least 2 ½ hours of moderate physical activity each week and should do muscle strengthening activities on 2 days each week.¹¹
- Regular physical activity improves:
 - Weight management
 - Cardiovascular health
 - Muscle, bone, and joint health
 - Pain and stiffness associated with arthritis⁷

Figure 1. Prevalence of Unhealthy Lifestyles among Employed Adults in Montana, BRFSS, 2011



Chronic Disease is Common



Chronic diseases are common health problems among employed adults (Figure 2).

- The most common chronic conditions were:
 - High Cholesterol
 - High Blood Pressure
 - Arthritis
 - Asthma
- 6 out of every 10 employed adults reported having at least one chronic condition.
- 3 out of 10 reported having two or more chronic conditions.

Cancer is also a common chronic disease, with over 100 Montanans being diagnosed with cancer every week. Cancer does not just affect the elderly; adults in the workforce are diagnosed with cancer too.

- 43% of new cancer diagnoses in Montana occur among adults of working age (18 to 64 years).
- Female breast cancer, lung cancer, and colorectal cancer account for one-third of the cancers diagnosed among working age adults.

Chronic Disease is Costly

Over 75% of total health care costs in the U.S. are due to chronic diseases.¹² Data from the Montana Association of Health Care Purchasers (MAHCP) indicate that lung, and colorectal cancers were by far the most costly per person (Table 2). While the annual per person cost was less for other chronic conditions, they affect far more people which multiply the costs. For example, the high cost of treating arthritis coupled with the number of working adults who report being diagnosed with arthritis make it the most costly chronic condition for Montanans.

Table 2. Medical and Pharmaceutical Cost* Due to Selected Chronic Conditions, MAHCP, 2012

Chronic Condition	Avg. Annual Cost to Insurance per Person	Avg. Annual Out of Pocket Cost per Person	Est. # of Working Montanans Effected Each Year†	Total Est. Cost to Montanans Each Year
Lung Cancer	\$39,806	\$2,258	200	\$8.4 million
Colorectal Cancer	\$27,213	\$1,177	200	\$5.7 million
Female Breast Cancer	\$8,288	\$608	400	\$3.6 million
Heart Disease	\$7,748	\$644	11,000	\$92.3 million
Arthritis	\$2,462	\$404	57,500	\$164.8 million
Diabetes	\$1,950	\$403	13,200	\$31.1 million
Asthma	\$308	\$121	30,000	\$12.9 million
High Cholesterol	\$287	\$141	67,600	\$28.9 million
Hypertension	\$280	\$228	76,200	\$38.7 million

* Costs are based on de-identified claims data from the members of MAHCP which represent some of Montana's largest employers. Medical claims were included if they had a primary diagnosis for the specified condition and pharmaceutical claims were included if the drug class is used to treat the specified conditions and the member had at least one medical claim with a primary diagnosis for that same condition.

†Cancer incidence data are from the Montana Central Tumor Registry. Prevalence data for all other chronic conditions are from the 2011 Behavioral Risk Factor Surveillance System.

Work-Related Injury and Illness is a problem for Montana Employers

In 2012, Montana employees experienced 15,700 work-related injuries and illness and 4,800 of these resulted in at least one day away from work.¹³ This translates to five cases of work-related injury or illness for every 100 full time workers, more than the national average (3.4 /100). Montana's manufacturing and construction industries had the highest rates of work-related injury and illness (8 / 100) about twice the national average rates in those same industries.¹³ Even the industries with the lowest rates of work-related injury and illness in Montana (Finance and Insurance) had a higher rate than the national average.¹³

Montana State Fund data show that the costs of workers' compensation claims vary. Although many claims cost less than \$800, severe injuries resulting in lifelong disability or death can cost millions of dollars. Among workers' compensation claims that involved no time off work, (accounting for about 75% of claims in Montana) the average cost is \$2,000.

Worksite Wellness Programs Can Make a Difference

Worksite Health Promotion has been proven to have a substantial impact on health care costs, absenteeism, workers compensation costs, and productivity. Montana employers have access to many no to low cost resources through the Montana Worksite Health Promotion Coalition (MWHPC). The

MWHPC was founded in 2003 as a Governor's Council on Worklife Wellness. In following their mission, the MWHPC has developed several resources for Montana employers: 1.) the Excellence in Worksite Health Promotion Awards, 2.) education opportunities and 3.) a website to easily access training and other resources.



The Excellence in Worksite Health Promotion Awards were developed to serve two purposes; to provide a toolkit for employers on how to develop an effective worksite health promotion program and to provide recognition to worksites for their wellness efforts. One example of an award winner is Moody's Market.

Moody's Market achieved a Bronze Excellence in Worksite Health Promotion Award in 2012. As a local grocery store with six locations in northwest Montana, they used innovative, simple, and relatively low-cost ideas to establish a wellness program in 2010. Company offerings have included an Employee Assistance Program, fitness product sale/give-a-ways, a walking club, healthy eating options in the workplace, a health and wellness lending library, subsidized gym memberships for employees and their families, and short-term incentive programs. For example, a "Don't Gain the Weight" challenge; for each month an employee did not gain weight, or if they lost weight, they earned a cash reward.

Implementing a work place wellness program benefits not only the individual employees, the organization has seen many cost benefits as well. In the first two years after establishing their wellness program Moody's had an 80% decrease in worksite accidents and saw their worker compensation score improve, indicating an overall improvement in worksite safety and wellness. The decrease in worksite accidents has created significant savings for the company.

Available Resources

- Montana Worksite Health Promotion Coalition: www.montanaworksitewellness.org
 - Provides Excellence in Worksite Health Promotion Award application and toolkit as well as many other Montana specific resources.
- Montana Public Health and Safety Division: <http://www.dphhs.mt.gov/publichealth>
 - Provides a wide variety of health information on diseases, healthy living, emergency preparedness, injury and violence prevention, and environmental health.
- Chronic Disease Self-Management Workshops: www.dphhs.mt.gov/arthritis/selfmanagement
 - Provides knowledge and skills needed to manage chronic diseases and live a healthier life
- Montana Tobacco Quit Line, 1-800-QUIT-NOW: www.dphhs.mt.gov/mtupp/quitlinefactsheet
 - Provides personalized coaching and free or reduced cost cessation medication for all Montanans who are ready to quit
- Diabetes and Cardiovascular Disease Prevention and Exercise Programs:
 - Provides safe exercise for adults with arthritis to help manage joint pain and stiffness www.dphhs.mt.gov/arthritis/exerciseprograms
 - Provides nutrition and exercise coaching for adults at high risk for type 2 diabetes and cardiovascular disease www.dphhs.mt.gov/publichealth/diabetes/prevention

Methods

This report utilized data from the 2011 Behavioral Risk Factor Surveillance System (BRFSS) and data from the Montana Central Tumor Registry (MCTR) to assess the burden of chronic disease among working adults in Montana. BRFSS is a random digit dialing telephone survey of non-institutionalized adults. The survey asks respondents whether they have been diagnosed with a variety of chronic conditions and about their health related behaviors. The survey also asks about current employment status.

Respondents may select employed for wages, self-employed, out of work, a homemaker, a student, retired, or unable to work. For this analysis only respondents that reported being currently employed for wages were included. The MCTR collects and maintains diagnostic, treatment, and outcome data on all invasive cancers that are diagnosed or treated in Montana. As the registry does not collect employment status, this analysis was isolated to adults of working age; those aged 18 to 64 years.

De-identified health insurance claims data from the Montana Association of Health Care Purchasers (MAHCP) was used to assess the cost of selected chronic diseases. MAHCP is an independent, not-for-profit partnership of public and private employers established to pool their purchasing power. Its members include First Interstate Bank, NorthWestern Energy, The Montana University System, The State of Montana, Montana Unified School Trust, Missoula County, and Montana Bankers Association. Medical claims consisted of both inpatient and outpatient care and include International Classification of Disease, ninth revision (ICD_9) codes for the primary diagnosis, the main reason for care. Pharmacy claims include National Drug Codes (NDC) to identify the specific drug being filled. This analysis included claims for all active employees (not including dependents) living in Montana during the calendar year of 2012. Medical claims were determined to be due to the selected condition if they had a primary diagnosis code matching established ICD-9 lists defining that condition. Pharmaceutical claims were included if the drug class is used to treat the specified conditions and the employee had at least one medical claim with a primary diagnosis for that same condition.

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