



Changing Behaviors

Access to Health Info Engages Employees in Managing Health

TOMMY THOMPSON, former U.S. Secretary of Health and Human Services, told a Detroit healthcare symposium that employers need to get more aggressive in their efforts to get their employees to adopt healthier lifestyles if they wish to reduce their healthcare costs dramatically.



According to researchers at Michigan State University, only 3% of American adults have a healthy lifestyle, defined

as following a combination of four modifiable lifestyle characteristics: not smoking, maintaining a healthy weight, eating enough fruits and vegetables, and getting regular physical activity.

That's why some of the nation's largest employers have streamlined access to health information in an effort to engage employees in managing their health. Some companies have set up a single telephone hotline and a single Web portal for all things health-related, from eating a healthy diet to selecting a hospital to enrolling in a disease management program.

Honeywell International is one such company. Via its Health Resource website, Honeywell's health

(Continued on page 2)

Analyzing Data

Technology Helps Employers Define Health-Cost Drivers, Benefit Programs



MORE EMPLOYERS are using technology to analyze their health-cost data and make decisions on which benefit programs to implement. "Employers are really looking at what's driving their healthcare costs," says Michelle Mercer, director of analytical services for the New York-based health insurer HealthNow.

Some employers, however, aren't content to wait for reports from their health plans. They want to query the data any time. For example, Wyndham Hotels & Resorts funnels their medical and prescription drug claims into a data warehouse which helped them get a grip on diseases affecting the company's 10,000 health plan members, according to Dixie Sweeney, vice president of compensation and benefits.

Dividing the employees into six risk categories from zero (healthiest) to five (unhealthiest) and reviewing employee turnover rates within each category helped Wyndham determine the *(Continued on page 2)*

Changing Demographics

Group Legal Plans Join Benefits Mix



CHANGING EMPLOYEE demographics, unifying core and voluntary benefits, and melding financial services into the benefits mix have enhanced the growth of group legal plans. Small businesses especially see them as a boon to enhance their

benefit packages and attractiveness in a very competitive labor environment, according to ARAG's James Kraynik, vice president of business and product development.

Kraynik says that there are a lot of ties between legal plans and other benefit-related services in the marketplace. While they are most commonly used for simple advice and consultation on any personal legal matters, Kraynik says the top five reasons for use of legal plans include wills and estate planning, consumer protection, property transfers, defense of civil claims, and divorce. "People have come to realize that in the course of a year, two or three times or so they may need some advice," says Bill Brooks, Hyatt Legal Plans CEO. "This is one of the key values of being in a legal plan." ■

Changing Behaviors . . .

(Continued from page 1)

information program includes tools and content from the Mayo Clinic and a hospital selection guide from HealthGrades, while a toll-free number connects employees with a nurse coach or "care consultant."

"This was really an employee engagement strategy, not just trying to give them tools and resources," says Brian Marcotte, vice president of compensation and benefits. "It's got to be about how to stay healthy, how to keep weight off, nutritional facts, and stress management."

Notes Helen Darling, president of the National Business Group on Health, a nonprofit organization of some 240 employers formed to find solutions to their rising healthcare bills, "employers involvement with workers' health status is an act of desperation. They're



betting that money spent to promote good health will greatly cut their medical costs."

Consequently, many businesses are turning to health risk assessments as a way to reduce medical expenses and drive positive behavior changes in workers. Health risk assessments, or appraisals, can help employers understand their workforce demographics, set priorities in their health and wellness programs, and gauge employees' receptiveness toward new programs and lifestyle changes. Subsequently, healthier lifestyles could spell lower medical costs for employers.

However, getting the message across will take a continuous commitment to employee communication and the tools that enable action and encourage change. ■

Analyzing Data . . .

(Continued from page 1)

types of disease management programs to implement. "If you don't have that kind of information, you are really flying blind," says Sweeney. "You are just paying claims and not understanding what the drivers are in your plan." Sweeney says the technology has given her a better understanding of the cost flow associated with healthcare claims, including the quarterly effect on reserves.



McDonald's Corp. also uses data mining to pinpoint who among the company's 13,000 health plan participants could most benefit from disease management programs. "What we're trying to do is make sure we have a positive impact on an employee's life in the long haul that

is going to have some positive impact on our costs," says Bob Wittcoff, senior director of employee benefits. ■

Bulletin Briefs

◆ *Free Fiduciary Responsibility & Health Benefit Seminars Available*
The AICPA, state CPA societies, and the US Department of Labor are expanding their nationwide campaign and offering 14 free compliance seminars across the country on fiduciary responsibility and health benefits. Materials and information on the upcoming seminars are available at www.dol.gov/ebsa or call 866.444.3272.

◆ *FACTA 'Disposal Rule' Takes Effect June 1*
The Proper Disposal of Consumer Report Information & Records provision of the Fair & Accurate Credit Transactions Act (FACTA) takes effect June 1. The provision requires virtually every business operating in the United States to securely destroy all documents and materials that contain sensitive consumer information. Last year, nearly 10 million people were victims of identity theft, according to the Federal Trade Commission. With these crimes showing no signs of weakening, FACTA is one of many recent laws focused on protecting consumer and company privacy.

◆ *Curb Benefits Costs with 'Invisible Paychecks'*
A first step in controlling the cost of employee benefits may be to tell employees how much you actually pay to employ them via total compensation statements. Since companies generally spend an additional 30 to 40 percent of an employee's salary on benefits, the statements—whether as simple as a one-page summary or as sophisticated as some websites which feature calculators for projecting future pension payments—give each employee a personalized accounting of how much the company has spent that year on his or her health insurance, 401(k) matching contribution, and other benefits. Publicizing the dollar figure in a statement can also help companies keep valuable employees and recruit others. ■

Voluntary Products to Complement Your Core Package

Find out how Gemini Group can help you implement a voluntary benefits package that will complement your company's core benefits.

Three of the most important objectives for an employer in managing personnel issues are:

- Attracting and retaining loyal workers
- Providing employees choice and security in their benefits package
- Managing the organizations dollars

Voluntary benefits have proven to be important offerings that address each of the three objectives. Selecting the right benefits, communicating them properly and administering them efficiently is the Gemini advantage.

Gemini is licensed with over 20 of the largest voluntary companies in the country thus allowing us to pick the carrier and product to fit your company's needs. We seek to achieve the right balance that ultimately helps your organization better manage costs and attract and retain loyal workers. ■

Do you have part-time or non-eligible employees not covered on your group health plan? Gemini Group, Inc. can help!

Recent changes to Colorado insurance law have made it easier to get these workers health insurance coverage. Gemini Group, Inc. can show you how to best use these changes to your advantage.

Benefits at no cost to the employer- Under the new guidelines, a company can now help workers obtain affordable individual health insurance coverage at no cost to the employer.

Helps eliminate C.O.B.R.A. problems- An employer can now help terminated employees obtain an option to C.O.B.R.A. that usually will cost less and move them off the group plan.

Cover dependants no longer eligible for a group health plan- When a dependant graduates or reaches an age where they are no longer eligible for a group plan, an employer can help by contacting Gemini Group, Inc. to get them covered on an individual health plan. It's easy to apply for individual health coverage at www.geminigrp.com.

Call Gemini Group, Inc. at (303) 757-1234 to find out how our team of consultants can help find exciting new solutions to all your benefit needs. ■

The HRinsider SM bulletin is brought to you each month courtesy of **Gemini Group Inc.**, a UBA member.

For more information, contact us at info@geminigrp.com

Or visit our website:

<http://www.geminigrp.com>

