Targeting Your Strategy
For Maximum Impact

By: Denise Balch

This May, Connex Health hosted its 8th Annual Employer Forum on workplace health and productivity management with a theme of ‘Targeting Your Strategy for Maximum Impact.’ This year’s events included sessions on the detection and management of chronic diseases, generic drug pricing and pharmacy legislation, biologics and subsequent entry biologics, workplace programs for cancer screening, fatigue, nutrition and weight loss, as well as the relationship between workplace health and human resource policy.

Just as the topics that were presented were diverse, many plan sponsors have undertaken a varied approach to workplace health and wellness. Targeting programs within a cohesive framework, will facilitate a clearly defined strategy. The goals are to deliver messaging, programs and services based on an understanding of the needs, preferences, and willingness to change of the population and measure the results. The purpose is to improve employee health and the workplace culture of the organization, creating a culture of health where healthy management styles and lifestyle practices become the accepted norm. This will result in lower benefit costs and improved productivity. While each program may have specific objectives, the overall goal or purpose of the strategy remains unchanged.

Kenton Needham, founder and president of NeedhamHR who after many years representing a national employer has recently launched services for small- and medium-sized businesses, explored the impact of an engaged employee and the linkage between engagement and a healthy workplace environment. Kenton shared some compelling studies including Dr. Martin Shain’s research that a perception of fairness within the workplace impacts employee health outcomes.

Holistic Model

Kenton also shared his holistic model on employee engagement as well as spoke to the need to create programs that address engagement for each employee. We know from experience that employees must be engaged, or at least have the hope of engagement, in order for them to participate in workplace programs and embrace the organization’s strategy.

Many chronic diseases and lifestyle practices have a significant impact on an employee population at work and at home. Some chronic diseases are overlooked for workplace interventions in light of the more ‘high profile’ diseases such as hypertension, high cholesterol, and diabetes. At this Forum, we focused on the impact and the best practice of disease management for osteoporosis and rheumatoid arthritis, both of which can have a significant impact in the workplace if left undiagnosed and inadequately treated.

One in four women over 50 have osteoporosis in Canada, Dr. Marla Shapiro, associate professor, department of family and community medicine, University of Toronto, said. More shocking is that the incidence of osteoporotic-related fractures in women is significantly higher than the incidence of heart attack, stroke, and breast cancer combined. Dr. Shapiro reviewed the identifiable risk factors, the most easily identified ones include:

❖ age
❖ a fragility fracture after age 40
❖ systemic steroid hormone therapy of more than three months’ duration
❖ a family history of osteoporotic fracture
❖ being a current smoker
❖ Improving employee education can prevent fragility fractures through appropriate lifestyles and treatment of osteoporosis, and is clearly the best way to mitigate the costs of osteoporosis in the workplace.
Patients with complex chronic diseases such as rheumatoid arthritis (RA) are more successful over the long term when diagnosed and treated early. According to Dr. Diane Lacaille, associate professor, division of rheumatology, University of British Columbia and a senior scientist with the Arthritis Research Centre, the benefits of developments in therapies, particularly biologics and disease modifying anti rheumatic drugs (DMARDs), can reduce lost time from work. This is an important consideration when arthritis and musculoskeletal conditions are the leading cause of work disability in North America. Between 32 per cent and 50 per cent of those with a diagnosis of RA will be disabled within 10 years of the onset. Employers are encouraged to have a better understanding of arthritis, promote proper medical care, cover medications, allow time off for appointments, and cover occupational and physical therapy, splints and orthotics to improve function, as well as offering vocational counseling and job accommodations.

Compelling Evidence

The most compelling evidence for the challenges and the benefits of managing RA was presented by a patient who experienced the ravaging effects of this disease for years until she received the second of two biologic therapies which put her into remission. She gave testament to the potential for improved performance and quality of life when RA is properly managed and under control, and when employees with the disease are supported by their employer.

Biologics play an increasing role in managing chronic diseases whether they are relatively common, like rheumatoid arthritis, or one of several orphan diseases. Based on information provided by Philip Schwab, vice-president, industry relations, BIOTECanada, and Daniella Decina, senior manager, regulatory CMC/QA, with Amgen, plan sponsors should be aware of the complex nature of biologic development and production as well as similar, but not identical subsequent entry biologics. Where plan sponsors have traditionally been able to look forward to generic entries into the market to mitigate some of the costs incurred in the early years of new pharmaceutical therapies, there are no such equivalent entries in the biologic market. Subsequent entry biologics may be similar, but they are not identical to biologics and the cost of bringing these products to market will be similar to the original biologic in the class. Plan sponsors should be prepared to address and understand the complex, but highly effective, nature of biologics and subsequent entry biologics. Aligning a wellness strategy to provide early detection and treatment will ensure that patients have the best opportunity to take advantage of the most effective therapy for their stage of disease, remaining as fully functional as possible at work and mitigating disability costs.

As with diseases, workplace programs can address more than the ‘big three,’ and provide significant value to employees. Cancer screening and fatigue programs were two that were presented at the Forum.

Cancer screening in the workplace has typically been perceived as elusive. With the increase in private spend on cancer treatments, and more expected to follow due to an increasing number of oral therapies, playing a more active role in early detection and screening for cancer is in a plan sponsors’ best interests financially. Nicole Robinson and Elizabeth Dulmage, from the Erie St. Clair Regional Cancer Program, have developed a comprehensive workplace program consisting of education on healthy lifestyles and risk factors, a personal assessment, referral to screening, and links to support programs. Results in nine initial workplaces have been promising. Their plan is to release this program to the wider plan sponsor marketplace for delivery and further analysis.

Negative Consequences

While not falling into the category of chronic or acute disease, fatigue can none the less be detrimental to mental and physical performance. Appropriate education and lifestyle practices, particularly for those working shifts or extended work days, can improve performance and reduce negative consequences. The Toronto Police Service has recently worked with Dr. Charles Samuels, medical director with the Centre for Sleep and Human Performance, Calgary, AB, to develop a fatigue management program that will be available to other police services through the Canadian Police Knowledge Network (CPKN). This will allow other police services easier access to this program. Results from the Toronto Police Fatigue Management Program were presented by Catarina Freire, a fitness co-ordinator with the service. The program developed by the service, and whose impact continues to be measured, includes sessions for each member of their service to improve awareness, education, and management of fatigue within the Toronto Police.

Any workplace health strategy is naturally linked to the human resource and benefits strategy within the organization. Patient outcomes are affected by the availability of prescription drug and disability benefits. Dean Miller, chair of the Ontario Pharmacists Association, presented the pharmacy perspective on the chal-
Challenges that are associated with changes to pharmacy compensation under Ontario’s Drug System Reform, the implementation of which has been postponed. Pharmacists can play a critical link in accessing the right prescription drug for a patient and by supporting compliance to the prescribed medication. The proposed changes to generic pricing and pharmacy compensation in Ontario will not only affect the province’s drug benefit, but it will also affect private plan sponsors. They must be aware that the benefits under their current drug plan will be affected when this legislation becomes effective and are encouraged to work with pharmacy, their consultant, pharmacy benefits manager, and insurance partners to develop plan provisions that provide a pharmacy compensation model that will facilitate optimal patient outcomes at a cost that is both reasonable and transparent.

Delegates had the opportunity to develop a better understanding of the issues presented during the 2010 Forum and we hope they will apply some of the information provided to them to target their employee health and benefits strategy for maximum value and improved employee health outcomes and performance.

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