

# RESEARCH REVIEW

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## **Telemedicine Visits May Lead to Increased Follow-Up Care and Downstream Costs**

[Health Affairs](#)

The use of telemedicine was rising prior to the pandemic and has grown exponentially since. This study shows while a virtual visit may yield immediate savings by diverting health care from higher-cost settings, these savings could be offset by the increases in follow-up care and ultimately higher episode costs. Patients who initially used telemedicine visits for acute respiratory infections were nearly two times more likely to have a subsequent office visit, urgent care visit, or repeat telemedicine visit than the in-person group.

However, those patients who initially had a telemedicine visit were slightly less likely to go to an emergency department for follow-up care. This study provides additional information for stakeholders to consider when weighing the costs and benefits of telehealth policies.

**+ StayTuned:** IBI's [2021 research agenda](#) also includes an investigation into the value of telehealth and other digital health solutions. Findings are expected to be released later this year.

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## **New Study Quantifies COVID-19 Cancer Screening Deficit in the United States**

[JAMA](#)

An analysis of single-payer administrative claims data from Medicare Advantage and commercial health plans covering approximately 60 million people found that screening rates for breast, colorectal, and prostate cancers were lower in March through May 2020 than either 2018 or 2019, with the lowest rates occurring in April 2020. Although rates returned to pre-pandemic levels in June and July 2020, they did not make up for the cumulative deficit of 9.4 million missed screenings in the spring. Screening rates varied by geography, and while the lowest screening rates prior to the pandemic were among those of lower socio-economic status, the largest decline after the pandemic was among those of higher socio-economic status. Screening rates also decreased with older age and among those who did not utilize telehealth services. Encouraging employees who missed their screenings at the height of the pandemic to be screened can help identify cancer when it is more easily treated, providing faster recovery from illness leave.

### **+ Safeguarding Health and Productivity through Preventive Care:**

IBI's [study on preventive screenings](#) found that employees who take leave for cancer at a younger age take less time off from work than those who enter the disability system at a later age. IBI Researcher Erin Peterson, MPH shared how employers can address cancer and its [productivity impacts](#) in a recent article published in BenefitsPRO.

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## **Migraine-Related Productivity Costs is Double or More the**

## **Costs of Other Headache Types**

[The Journal of Headache and Pain](#)

To quantify work productivity loss and presenteeism resulting from migraine, the World Health Organization supported research of 2,458 IT company employees in Japan. Findings showed that 17% of the respondents had migraine diagnoses and those with migraine took more than twice the number of days off per month and reported about twice the number of days of reduced productivity than those with other types of headache. The calculated cost of absence due to migraines was \$238 per person, nearly two to three times higher than other headache types (\$84 for those with tension type headaches or \$123 for other headaches). Presenteeism costs were even higher for migraines (\$375) compared to tension type headaches (\$71) and other headaches (\$191).

**+ How Do Migraines Impact Health and Productivity in the U.S?:** A 1,000-person firm could lose more than \$80,000 annually to migraine-related health costs and lost work time, according to IBI's [Health and Productivity Impact of Chronic Conditions Series](#).

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## **Night and Irregular Shiftwork Has Negative Impacts on Health**

[JOEM](#)

Approximately one in five workers in industrialized countries perform shiftwork. This study examined the adverse health effects of night and irregular work shifts of 6,250 US employees and found that a non-daytime schedule is potentially detrimental to health and an irregular schedule is even more so. Through a better understanding of the dynamics and challenges non-standard shift employees face, employers can implement preventive measures and interventions to maintain productivity and worker health.

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## **Health Care Costs Triple with a Tenosynovial Giant Cell Tumor Diagnosis**

[JOEM](#)

Claims data of US employees was analyzed to assess cost burden and productivity loss related to employees with Tenosynovial Giant Cell Tumors (TGCT), a condition causing joint damage and functional impairment. Comparing 1,395 individuals with TGCT to 13,950 of those without, researchers found the total healthcare costs for the TGTC group were three times higher (\$15,382 versus \$5,137), and total associated work loss costs were more than doubled (\$4,775 and \$1,890, respectively).

## **Inflammatory Bowel Disease-Related Productivity Costs Reach Over \$1,500 per Employee**

[Scandinavian Journal of Gastroenterology](#)

Inflammatory bowel-disease (IBD) consists of two chronic disorders: Crohn's disease and ulcerative colitis. While there are medical and surgical options for treatment and management, there is currently no cure. Researchers quantified the economic burden of IBD using data collected from 320 employed Finnish patients with the disease and found that annual costs of presenteeism and absenteeism per patient were \$775 (644 euros) and \$892 (741 euros), respectively. In addition, they found that women with IBD had higher presenteeism and absenteeism costs than men, but only among blue collar workers.



### **HEALTH AND PRODUCTIVITY AT WORK**

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### **Upcoming Events**

**June 23, 2021: PBGH/IBI Virtual Event - [Information or Overload? Meaningful Employer Data](#)**

**October 5-6, 2021: IBI/Conference Board Annual Forum- [Health and Productivity Forum](#)**