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In this issue:

- A Headache-Free Day Means Less Productive Costs to Pay
- No Increased Risk of Adverse Cardiovascular Events in Patients who Switched to a High-Deductible Health Plans
- Illness-Related Work Absence Hits All-Time High in April 2020
- Ban on Soda Provides Savings in Health and Productivity Costs
- Workplace Wellness Program Changes Health Beliefs but Not Physical Health
- Productivity Impact of Chronic Constipation Varies by Symptoms

A Headache-Free Day Means Less Productive Costs to Pay *JMCP*

Among adults who experience migraines, each headache-free day (HFD) is associated with increased function and well-being as well as decreased headache-related disability—reducing the number of missed workdays and the number of missed days of household activities by 5%. Indirect costs from lost work productivity were also reduced by 4%. Researchers recommend focusing on interventions to increase the total number of HFDs to limit the burden and cost associated with migraines.

+ Less Headache for Business Performance: Past IBI research reinforces these results: As headache frequency increased, job performance declined and illness-related absenteeism increased. Controlling for headache frequency completely explained the performance gap among employees with and without a history of chronic headaches and explained most of the relationship between migraines and illness-related absences.

No Increased Risk of Adverse Cardiovascular Events in Patients who Switched to a High-Deductible Health Plans JAMA Network Open

According to data from national health insurance claims, individuals with cardiovascular disease risk factors who were switched from a low-deductible (≤\$500) to a high-deductible (≥\$1000) health plan did not experience a cardiovascular outcome (e.g., myocardial infarction or stroke) sooner than those who remained on a low-deductible plan. While total out-of-pocket costs increased for medical and prescriptions for individuals with high-deductible plans, researchers discuss the possibility that little to no costs for prescriptions and preventive services on this plan could have helped in preventing heart attacks or strokes.

+ High business value of preventive screenings: As this research alludes to, preventive screenings can detect illnesses early and help avoid more adverse health events from occurring in the future. IBI will be releasing research soon on the gaps in screenings across several chronic conditions and cancers to reveal where are the biggest opportunities for improvement for employee health and productivity costs. Register for the September 9 webinar at 10 am PT/1 PM ET to learn about the research conducted and hear from employers on what they've learned from their screenings initiatives and what they're doing to address preventive care through the pandemic where access to and usage of screenings has been hindered.

Illness-Related Work Absence Hits All-Time High in April 2020 <u>JAMA Internal Medicine</u>

An analysis of the Bureau of Labor Statistics Current Population Survey reports that more than two million employees were out sick from work in April 2020—twice as many that were out sick in April 2019, and the highest rate ever recorded. This increase was seen in states with and without paid leave laws and did not differ across states with high vs. low per capita cases of COVID-19. Immigrants, employees over the age of 55 and older, and those without a college education were among the groups that had the largest increases in illness-related absences when compared to 2019.

+ There could be multiple reasons for this increase: The findings suggest that either (a) the rate of COVID-19 infections was much higher than testing and hospitalizations revealed, (b) that many people who stayed home from work for

other reasons (such as caring for schoolchildren) attributed their absence to illness, (c) that fear of transmitting COVID-19 encouraged people with any illness symptoms to stay home sick, (d) people were out sick due to anxiety about COVID-19 or (e), some combination of these reasons.

+ Disability leave and family leave trends during COVID-19: A recent analysis of IBI's benchmarking database revealed some interesting trends – including that respiratory, coronavirus, infectious, and "unclassified" disability claims drove a spike in levels in March 2020 yet fell overall in April 2020. The drop in pregnancy and injury leaves in April indicates that this decline could be partially explained by layoffs and furloughs, as well as avoidance of elective care. Stay tuned this Fall for the research publication.

Ban on Soda Provides Savings in Health and Productivity Costs Health Affairs

Researchers created a simulation to predict health and cost outcomes of a sugar sweetened beverage (SSB) workplace sales ban among workers in the healthcare sector in California. They found that an effective SSB ban would save \$308,949 in health care and productivity costs per 10,000 people over ten years, with savings gained mostly from prevention of obesity and dental disease. Lifetime health care cost savings would be \$706,014 per 10,000 people with the highest savings from prevention of obesity, chronic kidney disease, and coronary heart disease.

+ Another drink for moderation: One out of five employees <u>reported</u> binge drinking alcohol, which is defined as five or more drinks for men and four or more for women during one occasion in the past 30 days. Highest rates of binge drinking were found among those in the construction and extraction industry and lowest among community and social service workers. The researchers recommended implementing electronic screening and intervention programs as well as tailoring interventions for occupational sectors to reduce the prevalence of binge drinking.

Workplace Wellness Program Changes Health Beliefs but Not Physical Health

JAMA Internal Medicine

A randomized, control study found that a comprehensive wellness program (including biometric screening and survey, a health risk assessment, and various wellness activities) instituted at a large public university had little to no effect on improving physical health, rates of medical diagnosis, or use of health care

services after two years. It did, however, increase the number of employees reporting that they have a primary care physician as well as improve beliefs about their own health. Participating employees believed they had decreased health risks – indicating that perceptions of and physical results from a wellness program may not align.

+ Do not throw in the towel on physical activity: A literature <u>review</u> on employee physical activity looked at the implications of exercise on job performance, connecting physical (such as improved health and sleep), affective (such as self-esteem), and cognitive (such as memory) resources to increased productivity and decreased absenteeism.

Productivity Impact of Chronic Constipation Varies by Symptoms Clinical and Experimental Gastroenterology

Those suffering from chronic constipation are more likely to have reduced quality of life, increased direct outpatient costs, and more days of disrupted productivity compared to those who do not have this condition. Workplace productivity was also dependent on symptoms – those with abdominal symptoms had less productivity compared to those without abdominal symptoms. Chronic constipation affects nearly one in six Americans, suggesting that more treatment options are necessary.

+ Infectious gastroenteritis also a reminder to wash hands: The annual <u>cost</u> of norovirus outbreaks was \$173.5 million in medical care and productivity losses. The total economic cost for this infectious disease is predicted to be at \$10.6 billion annually – nearly 90% is from productivity loss.



HEALTH AND PRODUCTIVITY AT WORK

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Upcoming Events

August 12-13: <u>Biosimilars: The Next</u> Frontier (Virtual)

August 19: <u>Caring for Employee</u> <u>Caregivers (Webinar)</u>

September 9: <u>Closing the Gap on</u> <u>Preventative Screenings (Webinar)</u>

September 14-18: <u>Health and Productivity Forum (Virtual)</u>

December 1: <u>Data and Analytics</u> Symposium (Philadelphia)