



Forum, 2016

Tying Diabetes Back to Productivity:

Improving employee health can improve the bottom line



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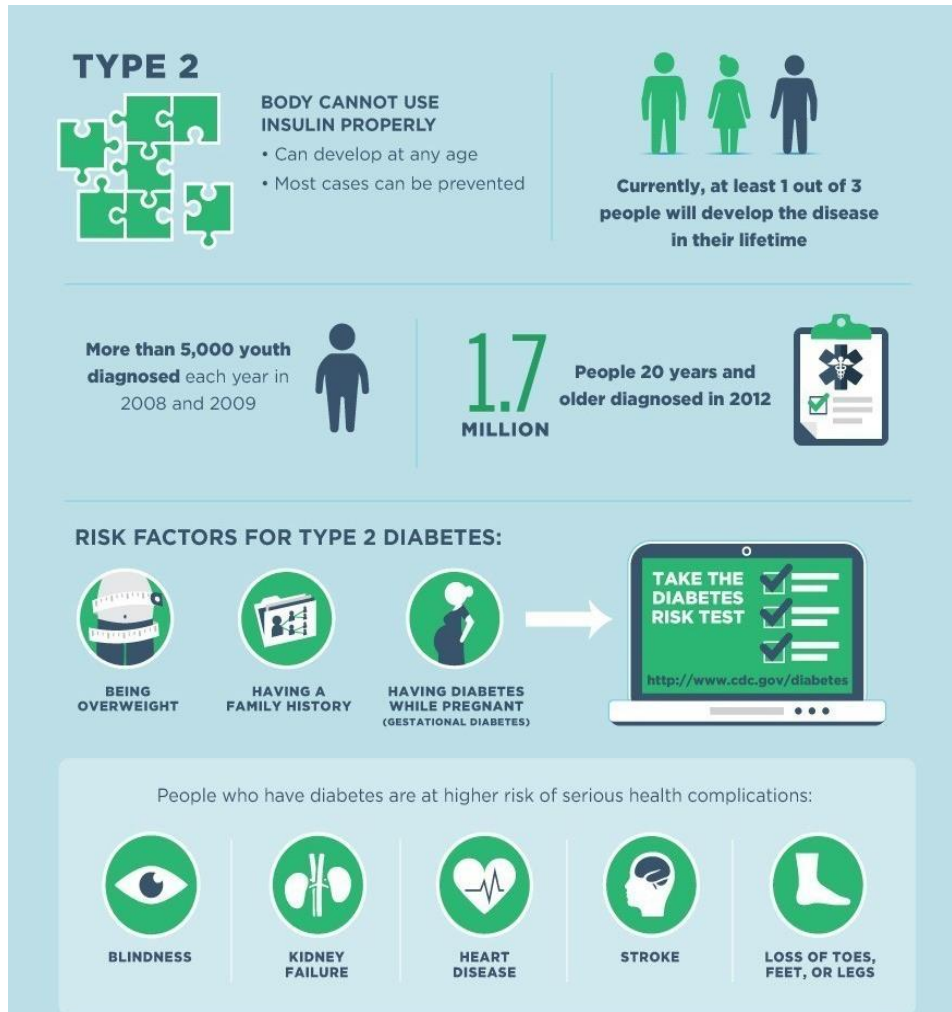
Diabetes is Common



- Silent and Undiagnosed
- Major Disease Risk Factor
- Type 2 is Linked to Obesity
- All Ages, Ethnicities
- Family/Social Determinants

Modified from American Diabetes Association and CDC

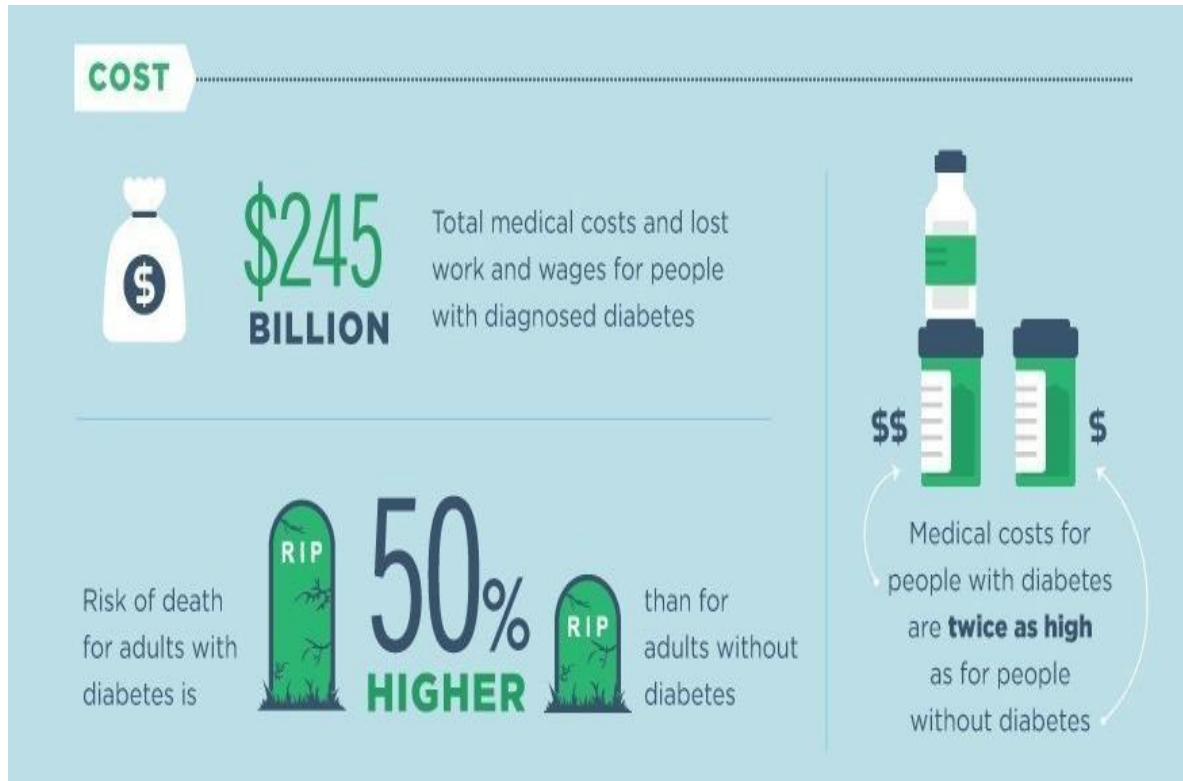
Diabetes Risk Factors



- Genetics of Sugar Control and Obesity
- Lifestyle Factors
- Job-related Factors
 - Energy levels
 - Frequent absence
- Environment/Social Factors
- Depression, Stress, Stigma
- Catastrophic health conditions

Modified from American Diabetes Association and CDC

The Cost of Diabetes



- **Job-related Factors**
 - Energy levels
 - Frequent absence
- **Employer-related Factors**
 - Impacts to Productivity
- **Depression, Stress, Stigma**

Fighting Diabetes: 2016

WHAT CAN YOU DO?

You can **prevent** or **delay** type 2 diabetes



LOSE WEIGHT EAT HEALTHY BE MORE ACTIVE

LEARN MORE AT
www.cdc.gov/diabetes/prevention
OR SPEAK TO YOUR DOCTOR

You can **manage** diabetes



WORK WITH A HEALTH PROFESSIONAL EAT HEALTHY STAY ACTIVE

LEARN MORE AT
www.cdc.gov/diabetes/ndep
OR SPEAK TO YOUR DOCTOR

REFERENCES

Centers for Disease Control and Prevention. National diabetes statistics report: estimates of diabetes and its burden in the United States, 2014. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 2014.

Knowler WC, Barrett-Conner E, Fowler SE, et al; Diabetes Prevention Program Research Group. Reduction in the incidence of type 2 diabetes with lifestyle intervention or metformin. *N Engl J Med* 2002;346:393-403. As cited in March 22, 2013, MMWR.

Tuomilehto J, Lindstrom J, Eriksson J, et al; Finnish Diabetes Prevention Study Group. Prevention of type 2 diabetes mellitus by changes in lifestyle among subjects with impaired glucose tolerance. *N Engl J Med* 2001; 344:1343-1350.

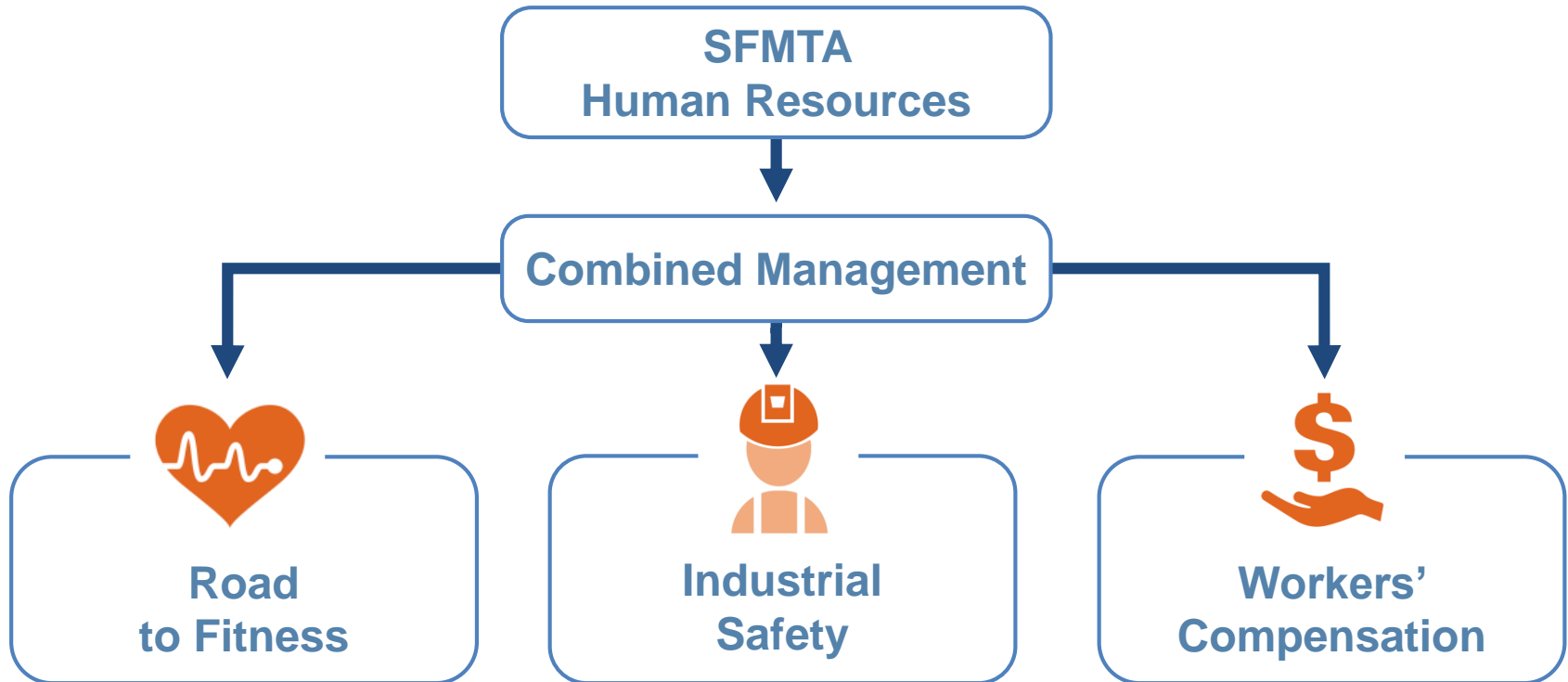
CDC's Division of Diabetes Translation works toward a world free of the devastation of diabetes.

- Diabetes Prevention Trial and “Iterations”
- Employer Programs
- Integration/EMR
- ADA/YMCA-Related Tools
- mHealth/eHealth/Tracking
- Activity and Dietary Policy
- Education

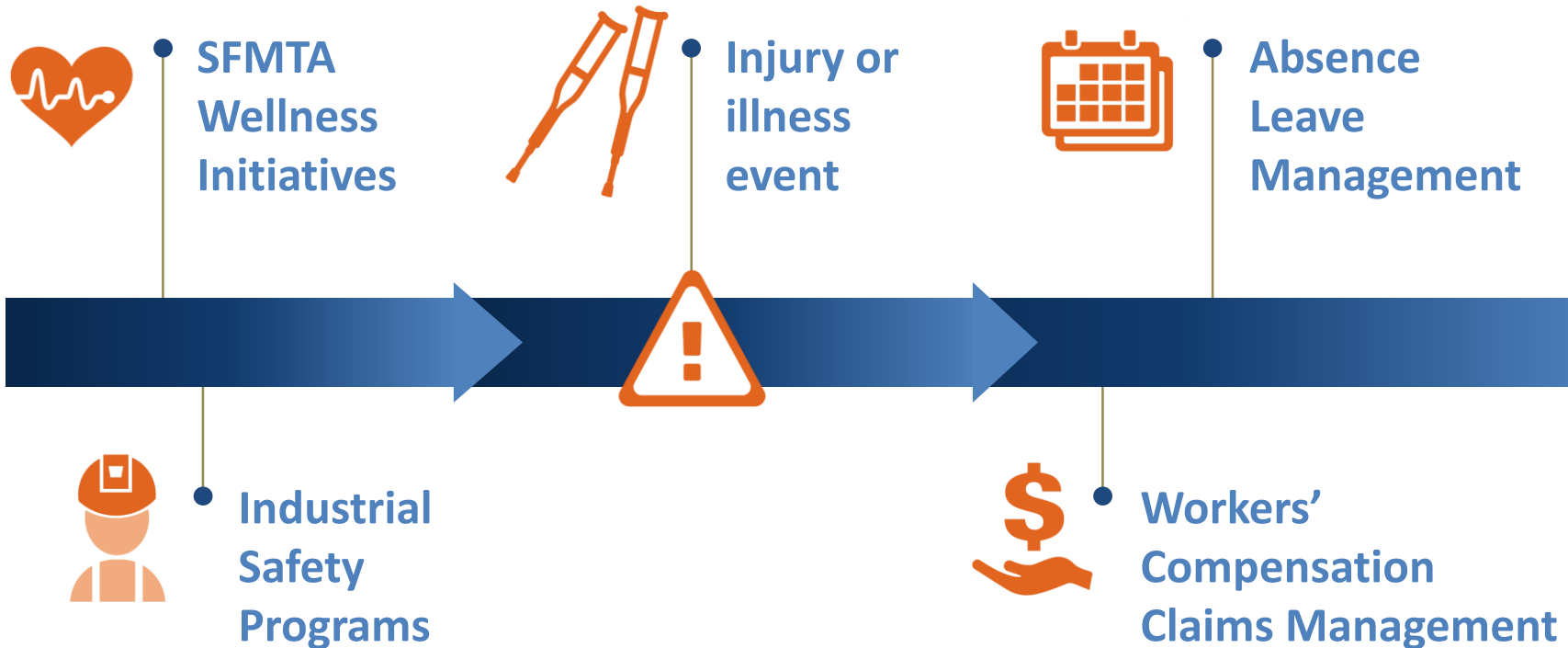
Modified from American Diabetes Association and CDC

Integrated Approach

SFMTA has integrated Road to Fitness with Industrial Safety and Workers' Compensation, resulting in a complimentary approach that places high value on both employee safety and well being, along with a significant benefit for the Agency.



How can a wellness program impact an employment culture?

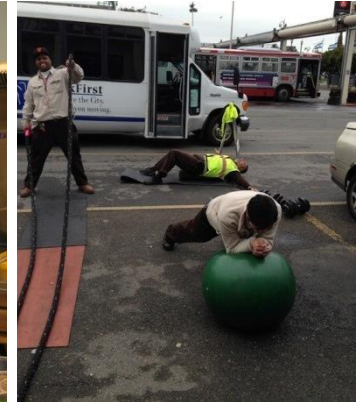


Road to Fitness

improves experience on the front end
and reduces exposure on the back end.

Scope of services provided

- Comprehensive Health Risk Assessments
- Orthopedic assessments
- Glucose and cholesterol screening
- Nutrition counseling
- Weight loss club
- Walking club
- Exercise classes
- Informational Seminars
- Farm fresh cooking demonstrations
- Health fairs
- Worksite exercise centers
- Program monitoring and data management
- Participation incentive program



Mutual Benefits

- Better employee health
- Enhance quality of employee life
- Improve morale
- Reduce chronic health conditions
- Improve attendance
- Increase productivity
- Reduce the frequency and severity of injuries
- Lower healthcare costs



Diabetes impacts the bottom line

\$69B Estimated indirect costs
(disability, work loss, premature death)
attributed to diabetes in the U.S.



Odds of missing at least one day
of work in preceding month were **47%
higher for workers with diabetes**
than for workers with normal fasting
blood glucose



**Median calendar year lost
workdays** per active short-
term disability claim

Type 1	Type 2	Hypoglycemia
27	26.5	32

**Presenteeism
Absence
Disability**
Impacts individual
performance and
team progress

Sources:

\$69B: Centers for Disease Control and Prevention

All others: Integrated Benefits Institute

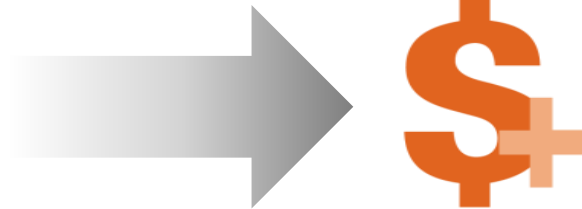
Health care affordability impacts access and adherence to care

44% of privately insured adults with a deductible of \$3,000 or more reported not getting needed care because of **cost** compared with 16 percent of adults who did not have a deductible



Source: The Commonwealth Fund

37% of surveyed employers raised in-network deductibles in response to ACA in 2015—up from 15% in 2013



Source: International Foundation of Employee Benefit Plans



Medical costs for people with diabetes are **twice as high** as for people without diabetes

Source: Centers for Disease Control and Prevention

Leverage sources of truth to inform program creation

- Biometric screenings
- Medical/pharmacy utilization
- Disability claims by diagnosis
- Stop-loss claims
- Absence data
- Industry data
- Utilization data of wellness and related programs to evaluate success





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www.diabetes.org/in-my-community/wellness-lives-here

www.diabetes.ucsf.edu/

www.sunlife/usdiabetes



SFMTA
Municipal
Transportation
Agency



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