

Advancing Arthritis Public Health Priorities through National Organizations TA/Peer Sharing Webinar Series December 05, 2023 @ 2:00 p.m. ET

Making the Business Case for AAEBIs

Employers are in a unique position to create work environments where health and safety is valued, promoted, and supported. This webinar provides an interactive discussion around making the business case to employers for evidence-based interventions, physical activity, and self-management programs.

Webinar Notes and Resources

- Materials available on the Action on Arthritis website
- Meeting <u>recording</u>

Participants

- 36 total participants
 - 11 states (IA, MI, MN, MT, NH, OK, OR, PA, UT, VA, WV)
 - 6 national organizations (CDC, NACDD, NRPA, OAAA, SOPHE, Sound Generations)

Presenters

- Elizabeth Fallon, MPH, PhD., CHES, CDC Epidemiologist
- Jason Lang, MPH, MS, CDC Team Lead for Workplace Health Program
- Kim Pullman, RD, LN, Wellness Program Manager, Healthcare and Benefits Division, Montana
- Felix Johnson, MPH, CHES, Wellness Supervisor, Office of Health Benefits, Virginia

Steps to Making the Business Case for AAEBIs – Employers

- 1. Identify and know your audience.
 - Consider working with senior leadership, middle management, and line level employees to ensure that the solution meets the needs of all employees.
- 2. Raise awareness of the need
 - Identify risks and cost drivers among employee population.
 - Understand the demographics of the workforce.
 - Collect and leverage employee feedback using focus groups, needs and interest surveys, and other feedback mechanisms.
 - Leverage the CDC 6|18 initiative <u>customizable slide deck</u> to market chronic diseases to employers.
- 3. Describe the problem and the costs associated with arthritis and musculoskeletal diseases.
 - Understand the public health case for arthritis.
 - Leverage the <u>OAAA Action Brief</u> focused on the business community.
 - Communicate the <u>burden of musculoskeletal diseases</u>.
- 4. Describe the solution and how to get it.
 - Promote <u>AAEBIs</u> and other evidence-based interventions.

- Document the cost of the solution and the value that it brings to the organization and the employees.
- 5. Show the value in investing in the solution.
 - Calculate the Return on investment (ROI). ROI is calculated by dividing the net savings by program costs.
 - Document the Value on investment (VOI). VOI is calculated by understanding the assets that contribute to an organizations performance. Examples include attracting quality employees, developing and retaining top talent, building a strong and resilient business, giving back to the community, and becoming more profitable. VOI can be calculated by understanding impact on absenteeism, presenteeism, employee morale, employee turnover, employee retention, employee engagement, job satisfaction, and employee productivity.
 - Calculate cost-benefit analysis, cost-effectiveness analysis, costeffectiveness, cost savings, and cost avoidance. These concepts can help employers and payers analyze the costs of covering AAEBIs against the benefits gained such as lowered medical costs, increased quality of life, and reduced absenteeism.
- 6. Communicate key messages targeted to each audience.

Questions

- Q: What can employers do to encourage physical activity and self-management strategies among employees?
- A: Employers should make physical activity part of the workplace culture and talk about it regularly. Additionally, they should use a diverse set of strategies to increase access and opportunities for employees to be physically activity on or off the clock. Examples include stretch huddles, walking and talking meetings, onsite walking trails with maps, onsite gyms, paid time and or flexible schedules to engage in physical activity, benefits that encourage active transportation, incentives to encourage participation in physical activity and self-management programs and programs to encourage self-management and physical activity.
 - View the <u>CDC Workplace Health ScoreCard</u> for evidence-based programs, policies, and practices.
 - OAAA has a detailed list for the PA and Self-Management <u>AAEBIs</u> that can be a great resource.
 - ACL has a <u>spreadsheet</u> of approved programs posted online that includes many of the AAEBIs.
- Q: How does physical activity impact job performance?
- A: If physical activity is part of doing the job it can impact things such as fatigue, stamina, flexibility, and strength. Lack of physical activity can place individuals at higher risk of injury and musculoskeletal disorders. Increased physical activity impacts focus, concentration, energy, resilience, mood, and improves quality of life.
- Q: Where can states find local business influencers and champions?
- A: Below are examples of local business influencers and champions to work with to promote AAEBIs as part of employer benefits.
 - CDC Work@Health trainers.
 - <u>NIOSH Total Worker Health Graduate Training, Certification Programs and</u> <u>Degree Programs</u>.

- Professional Organizations -
 - Health Enhancement Resource Organization (HERO).
 - Society for Resource Management (SHRM).
 - National Alliance for Healthcare Purchasers Coalition.
 - State business health coalitions.
- Q: What factors do you consider when deciding which benefits and programs you provide to employees?
- A: From Montana -
 - We have mission and vision statements for both the State of Montana Benefit Plan and the Live Life Well Wellness Program. Both overarching goals are considered when making benefit decisions.
 - The Wellness Program's mission statement is, "The State of Montana's Live Life Well Program mission is to promote healthy lifestyle choices and improve the health, well-being and quality of life of our employees, legislators, retirees and their families."
 - The State Plan's mission is to administer competitive, quality, and comprehensive benefits that provide health, safety and financial protection for state employees, retirees, and their families in a cost-effective manner.
 - As a State-funded plan, managing the financial aspect of any benefit or program is always very important. Just as important though is identifying areas of need for our members, where the plan can address existing needs and proactively encourage our members to take responsibility for their health. We also prioritize partnerships with other organizations doing similar work and with similar goals.
- A: From Virginia -
 - We start by analyzing the cost drivers and doing an inventory of the resources that are already available to address them, including partnerships. Then we consider the cost and sustainability, as one of our goals is to never remove nor reduce benefits once we implement them.
- Q: Where do you turn for evidence regarding effective, reliable, scalable, and sustainable evidence-based programs?
- A: From Montana
 - We have multiple partners that help us with this task, including, but not limited to our administrators, our consultants, our partners at the State of Montana, and multiple subject matter experts including the staff at DPHHS.
- A: From Virginia
 - We lean on vetted public sources, such as NIH, CDC, DHHS, as well as the knowledge and research of our team of 10 Wellness Consultants- all of whom have credentials and expertise in varying areas of health and wellness.
- Q: What recommendations do you have for states and community-based organizations that are looking to work with employers to include evidence-based interventions in benefit plans?
- A: From Montana -
 - Start developing relationships with employers and network with the people and organizations you want to work with. This works best when it comes from a genuine interest in what the employer is trying to do, and support for that goal.
 - It is critical to be able to offer the evidence to support the interventions. All employers work within a limited budget especially for what is often perceived

as "extras." Proof of efficacy and relative affordability is key to getting in the door.

- Consider offering services during a trial period at no cost to the employer. Additionally, include personal stories from participants to support the intervention you are proposing.
- A: From Virginia
 - Being able to make the business case is critical. While we in the wellness field know the value of these interventions for many different conditions, funds are limited and leadership needs to see the value on investment. Depending on the employer, the primary metric is often dollars saved.

Additional Resources

- <u>Success story</u> highlighting Montana and their WWE efforts with employers
- <u>MMWR article</u> highlighting Montana and WWE
- NACDD conducted a <u>TA webinar</u> focused on public and private partnerships to engage employers.

NACDD TA Offerings

- Workgroup Calls The Arthritis Council oversees the formation of topic specific workgroups to provide opportunities for peer-to-peer learning and sharing.
 - Partnerships and Strategies to Sustain and Disseminate AAEBIs (Strategy 1) Workgroup <u>Register</u> or visit the Arthritis Council <u>webpage</u> for additional information.
 - Healthcare Providers Counseling About Physical Activity and Referrals to AAEBIs (Strategy 2) Workgroup – <u>Register</u> or visit the Arthritis Council <u>webpage</u> for additional information.
- **Monthly Arthritis Program Sharing and Networking Webinars** The Arthritis Council provides input on the monthly arthritis program sharing and networking calls. These calls provide an opportunity for recipients and partners to share experiences, lessons learned, and best practices, all while networking and leveraging partnerships. <u>Register</u> and visit <u>Action on Arthritis</u> for updated information including dates and times.

Other Information

• The **2023 Arthritis Recipient Meeting** tools and resources are posted online and are available by <u>visiting Action on Arthritis</u>.

Evaluation

- Poll Question: I gained skills related to my organization's ability to make the business case for AAEBIs.
 - 100% Strongly Agree or Agree
- Poll Question: Please provide additional information on the specific skills that you gained because of attending todays webinar. (Select multiple options)
 - 75% New Ideas/ways of thinking about my programs current approach to increase arthritis public health strategies
 - $_{\circ}$ 69% Knowledge about tools that can be used to advance our work.
 - $_{\circ}$ $\,$ 19% New partners to engage with to address arthritis.
 - 44% Strategies to sustain arthritis efforts.