Opportunities to ‘Nudge’ Employees Towards Better Health and Wellness

Mel Barsky
President & COO
INTERxVENT Canada
May 7, 2014
1. Drivers of Participation
2. Engagement
3. Health Stratification / Targeted Interventions
4. e-Health Tools
5. Coaching
6. Referrals to Allied Healthcare Professionals
7. Online Challenges / Health Themed Events
8. Social Networking
9. Mobile Apps
10. Personalized Healthcare
11. Incentives
12. Reporting
13. Case Study
14. Scientific Research / ROI / Program Effectiveness
Background

- Programs originally based on research available in the early 1990s, especially the Stanford Coronary Risk Intervention Project (SCRIP).
- After completion of original research study in Dallas, TX, INTERVENT was founded in July 1997 by Dr. Neil Gordon.
- Since 1997, implemented INTERVENT’s evidence-based, technology-enabled, outcomes-oriented, comprehensive lifestyle management and chronic disease risk reduction programs.
- Over 2 million participants and approximately 100 published scientific abstracts/manuscripts documenting the programs' efficacy & outcomes.
MILT, YOU HAVE A WIFE AND KIDS. HOW DO YOU FIND TIME TO DO EVERYTHING YOU NEED TO DO?

I HAD TO GIVE UP A FEW THINGS, SUCH AS EXERCISING AND EATING HEALTHY FOOD.

THAT SOUNDS DANGEROUS.

NAH. THE KIDS ARE TRAINED TO USE THE DEFIBRIL-LATOR.
Participation Drivers

Program Support Components

- Special Internal Communications
- Vendor Communications
- Incentives Structure
- Incentives Value
- Employer Champion

Employer Support Level

Participation

Low

High

Low

High

INTERVENT Canada
"I took an online HRA and found out that, in addition to diabetes, I had other risk factors that could benefit from lifestyle changes."

"Shortly after taking the HRA, INTERVENT called about their lifestyle management programs. They let me know it was part of my benefits and asked if I would consider enrolling."

"After they explained the process, I decided to sign up for into my first health coach session. They also encouraged me to go online and review my Welcome Kit before the first call."

"On my first session I met my health coach, Julie. Not only did she educate me about my risk factors, she explained simple ways I could improve my health."

"Julie took the time to get to know me and my ‘wellness vision,’ and see how open I was to changing my lifestyle. I told her my picture of health was playing golf until I was 90."

"We spent the next few months working on my Action Plan – starting with exercise and moving on to other positive lifestyle changes – and tracking my progress online."

"After working with Julie for 3 months or so, she and I agreed that I’d reached many of the goals we set. I was amazed how much better I already felt."

"Julie calls me regularly to check in. If I’ve let my healthy habits slip, she helps me get back on track. I’m now ready to make the hardest change – quitting smoking."

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Wellness Platform Key Elements

Risk Assessment
- Population Engagement
- Health Risk Assessment
- Integrated Labs/Biometrics
- Stratification

Intervention Options
- Self-help Intervention
- Health Coach Assisted Intervention

Management Areas
- Nutrition
- Weight Management
- Physical Activity
- Stress Management
- Tobacco Cessation
- Diabetes
- Medication Management
- Depression
- Sleep Management

Evaluation and Follow-up
Numerous Program Modules

Better health for life™
intervent.ca
Dramatically reduce your risk of heart disease through weight loss, regular exercise, changes in your diet and the elimination of risk-related habits such as smoking by joining an INTERVENT health-improvement program today.

For more than a decade, INTERVENT has guided thousands of people like you to good health. Nearly 100 North American hospitals and corporations trust INTERVENT’s scientifically proven programs to improve health and prevent disease.

Now you can access these programs from the comfort of your home.

Developed by world leaders in preventative health and supported by more than 10 years of research, INTERVENT’s effective programs provide you with everything you need to begin your journey to better health.

Your incredible prize may start with INTERVENT’s Prep program. With your doctor’s approval, pick up a batch of PREP exercises to begin your journey to better health for life.
Employee Engagement

Southlake Regional Health Centre is pleased to offer you a:

Complimentary personal health risk assessment and online lifestyle & health management programs.

Visit www.intervent.ca/southlake
Passcode: health

TELUS Health Solutions, in partnership with INTERVENT, is proud to offer you a complementary health risk assessment with on-line self-managed health & wellness programs.

Based on the results of your personal health assessment, INTERVENT will create a customized plan for identifying any health risks and will offer a self-managed program including a goals and action plan for your health.

Congratulations on taking this important step toward a lifetime of better health!

Complete your private, confidential and secure INTERVENT health risk assessment online at www.intervent.ca/TELUSskins Passcode for TELUS VIP's: health
Employee Engagement

"Take control of your health"

Learn how INTERVENT helps you achieve long-term health success and reduce your risk of disease.

"I lost 100 pounds in about 10 months. I never felt hungry or burned out. I am 57 years old and have done the wrong thing with my weight for almost all of my life. INTERVENT empowers you with knowledge."

—INTERVENT participant John Chaney

"INTERVENT has turned my life around. Step by step and with the wonderful and dedicated help of my mentor, I am succeeding! My regular physician says that at this time I am healthier and weigh less than I ever have during the last 12 years of visits to his office!"

—INTERVENT participant Carmen Vardich

*Take the next steps*

If you answer yes to any of the questions on the reverse, you should complete a detailed health risk assessment and participate in an INTERVENT health-improvement program. Here's how to get started:

*Step one:*
Know your numbers

Ask your doctor for the following, or request an in-home visit from Gamma/OptimaCare Medical Laboratories:

- Total cholesterol
- HDL cholesterol
- LDL cholesterol
- Glucose
- Triglycerides
- HbA1C if you have diabetes
- Blood pressure
- Height
- Weight
- Waist circumference

*Step two:*
Complete an INTERVENT health risk assessment

Read through this brochure to learn more on:

Visit intervent.ca or Call 1-888-RX-6-SUCCESS (774-7622)
INTERVERVENT

*Experience INTERvENT

INTERVERVENT is a comprehensive scientifically proven system that helps you improve your diet, enjoy more exercise, lose weight, reduce stress and, if necessary, quit smoking. The patients and employees of nearly 350 North American hospitals and corporations trust INTERvENT to improve health and prevent disease. Now you can use INTERvENT to improve your health from the comfort of your home.

*Change your life

Unlike other programs, INTERvENT doesn't promise quick fixes followed by risky retreats. Research shows that personalized, step-by-step programs providing accurate information, behavior modification tools and one-on-one support best help people make comfortable changes that last a lifetime. But such programs often cost thousands of dollars. INTERvENT is affordable.

*Look and feel your best!

INTERvENT uses a scientifically proven model to help you make gradual health improvements that last a lifetime. Here’s how you progress to success.

1. Understand your risks

First, you complete a detailed INTERvENT Health Risk Assessment. This provides you with a summary of your health risks, which you can share through a special report created for you by your physician. Unlike other health risk assessments, INTERvENT also uses your results to generate a personalized action plan.

2. Improve your health

When you’re ready to act, you can follow an INTERvENT Self-Help Program or work with a professional health mentor to create a more detailed health analysis. Your plan then helps you achieve your goals.

3. Maintain your results

INTERvENT helps prevent relapse and ensure your long-term health. Following your program, you can continue to use INTERvENT information and tips to sustain your health success.

*Get proven results in just 12 weeks

Studies show that INTERvENT can help people achieve their health goals in just three months. These include improvements in the following areas.

- **Proportion of patients achieving goal levels of INTERvENT health indicators:**
  - 54.4%
  - 67%
  - 39%
  - 11%

*Sign up for success

INTERVERVENT is an affordable lifestyle improvement program that empowers you to make lasting lifestyle changes that improve your long-term health.

While similar programs involving diabetics and patients were cost $500 or more, thousands of dollars, INTERVENTS costs just a few dollars a day—and all INTERVENT programs qualify for standard dental medical expense and tax-advantaged Health Spending Accounts and some Private Insurance Plans.


*Are you at risk?

Since 2004, the Canadian Cardiac Society has recommended that anyone at risk of heart disease complete a detailed health assessment. Complete the short questionnaire to see if you’re at risk.

Yes: No: Are you a man 40 or older or a woman 50 or over?

Yes: No: Have you had an immediate relative had a heart attack or stroke prior to age 65?

Yes: No: Are you a smoker?

Yes: No: Are you overweight or do you eat high-fat foods three or more times per week?

Yes: No: Do you exercise lower than three times per week?

Yes: No: Have you been diagnosed with diabetes, high cholesterol or high blood pressure?

* Get started today!

Visit www.INTERVENT.ca or call 1-888-84-SUCCESS (786-7722) to begin your journey to better health.
Use videos & webinars to educate employees to the features & benefits of an employee wellness program.
“I’m willing to make some changes in my lifestyle, as long as I don’t have to do anything different.”
Enhanced Two-level HRA Stratification
Target Interventions Where Employees & Company Will Maximize Return

1st Level of Stratification (Industry Standard**)
- Lower Risk: 0-2 Risk Factors
  - 59%
- Moderate Risk: 3-4 Risk Factors
  - 32%
- Higher Risk: 5+ Risk Factors
  - 9%

2nd Level of Stratification (INTERVENT)
- Lower Risk
  - 35%
- Moderate Risk
  - 30%
- Higher Risk
  - 35%

*Based on 14,630 HRAs
**Based on Research from the University of Michigan Health Management Research Center

better health for life™
Self-Help Programs

Programs to help you help yourself

These versions of our lifestyle management program are designed especially for people who desire to manage their own program. An advantage of a self-help program is that you can work at your own pace. You will participate via the Internet, so you will have the convenience of completing assessments and accessing and printing materials at times that work for you.

Our most popular and successful lifestyle management program is delivered by specially trained health professionals, called health coaches. Because our self-help programs use the same high quality educational materials as our coaching program, you will see references to health coaches throughout your reports and materials. While these references won’t apply to you, they emphasize the benefit of having the expertise of the health coach to guide and support you. We encourage you to think seriously about enrolling in our lifestyle health coaching program. Click here to learn more about our coached programs.

To learn more about what’s included in the self-help programs and how they work, click on the topics below.

- Get Fit
- Nutrition
- Weight Management
- Stress Management
- Quit Smoking
- Tobacco Free

Frequently Asked Questions

Have more questions? Click here for answers to some of the most frequently asked questions about our self-help programs.

Educational Resources

We provide a variety of scientifically-based educational materials and tools to help participants make meaningful lifestyle changes one step at a time. Click here to learn more about our educational resources.
Before Your Next Session

In the time between your sessions with your health coach, do the following:

- Be sure to read and complete this educational kit.
- Use this kit to record your work.
- Have this kit with you for your next session.

Check Yourself

Complete the statements to be sure you understand the key concepts in this kit.

1. Many ... before people develop type 2 diabetes, most of them develop pre-diabetes.

2. Pre-diabetes is defined as a fasting blood glucose level that is higher than normal, ... mmol/L or higher, but not yet high enough to be diagnosed as diabetes, ... mmol/L or higher.

3. From the moment a person develops pre-diabetes, his or her risk of developing damage to the ... starts to increase.

4. If pre-diabetes develops, it is critical to get blood glucose values within the ... range as soon as possible.

5. If you have an abnormal glucose test, the test must be ... on a different day to confirm a diagnosis of pre-diabetes or diabetes.

6. If you are diagnosed with pre-diabetes, you will need to be re-tested for diabetes every ... .

7. People with diabetes who also have the metabolic syndrome are at the greatest risk for serious ... of diabetes and coronary heart disease, stroke, some types of cancer and other serious conditions.

8. ... , especially losing weight if you are overweight and exercising regularly, is the foundation of preventing pre-diabetes and diabetes.

9. Weight loss of ... percent of current body weight and a minimum of ... minutes per week of moderate- to vigorous-intensity aerobic physical activity, such as brisk walking, are recommended.

10. For people at very high risk of developing diabetes, ... diabetes medications may also be recommended. This drug that is recommended to prevent diabetes is metformin.

11. In clinical trials, metformin was most effective in people with BMI's of ... or higher and those under the age of ...

12. If you are significantly overweight and have not been able to achieve your weight loss goal by eating fewer calories and increasing your physical activity, weight loss medication or even ... may be recommended by your doctor or health care provider.
Health Coaching Programs

Achieve better health for life

No matter what your goals are - losing weight, exercising more, quitting smoking, reducing your risk for a chronic medical condition, living healthier with a chronic medical condition - our lifestyle health coaching program can benefit you. You’ll be paired with a health professional who’ll work with you through confidential, over-the-phone sessions to give support, encouragement and expert guidance.

Our caring, dedicated health coaches will help you make the changes that are important to you at this time. To begin, you’ll define your wellness vision - the health and lifestyle you desire for the future. Your coach will work with you to get where you want to be. Our coaches listen to your needs, preferences and circumstances and help you develop a plan that is individualized for you. Your coach will hold you accountable for your actions and support you every step of the way to better health for life.

Have more questions? Click below to learn more about our lifestyle health coaching program.

- In what ways is this lifestyle health coaching program different from others?
- How much time is required to participate?
- As a participant, what do I have to do?
- What are the qualifications of the coaches?
- Are evaluations included?

Educational Resources

We provide a variety of scientifically-based educational materials and tools to help participants make meaningful lifestyle changes one step at a time. Click here to learn more about our educational resources.
## Coaching Methodology

### Coaching Philosophy
- Incorporates multiple behaviour-change techniques: e.g., *stages of change, motivational interviewing, single concept learning theory*
- Educational kits, nutrition and exercise diaries and on-line materials support the foundation for behavioural change
- Comprehensive goals and action plan linked to health risk factors

### Emotional Support
- Dedicated health coaches assigned to participants; pull in specialists as needed
- Wellness Vision
- Focus is on the individual

### Interventions
- Evidence-based medicine approach/physician integration
- Formal, structured, systematic approach
- Nature and intensity of intervention individualized based on multiple factors, including risk status and readiness to change

### Progress Tracking
- System supports tracking of qualitative and quantitative results
- Follow-up reports utilized during the program allow the participant to track their progress along the way

### Quality
- Quality audits help ensure delivery of a high-quality program
- Calls tracked and recorded
Consent to have EAP provider make an outbound call

NOTE

You may benefit from the services of your Employee Assistance Provider (EAP). If you would like to receive a call from your EAP to outline the support available, please click here to provide your consent for INTERxVENT to share your contact information with your EAP.

Remember: The services of your EAP are strictly confidential and meet the privacy and security standards set by your employer.
Referrals to Allied Healthcare Providers: Pharmacists / Diabetes Educators

Referral to Pharma
Certified Diabetes Educator

According to your responses in the Health Risk Assessment, you may have an opportunity to participate in a voluntary program for individuals with Diabetes. It will enable you to access and work with the support of a dedicated Certified Diabetic Educator (CDE). The Diabetes Management Program is being offered at no cost to you, by Pharmacist 3 times at a location convenient to your work or home. Your personal health information will be held in confidence and only used by the Pharmacist and support staff, to provide services to you under the program. If you choose to participate, you will be asked to fill out additional questionnaires at the beginning and end of the Program. Upon full completion of the questionnaires and Program, you will receive a gift card from in the amount of $150.

Would you be interested in and consent to INTERxVENT providing your name and contact information and, if applicable, blood results, to a Health Coordinator at who will in turn contact you to further explain the program and setup a first appointment?

No Thank You  Yes Please
Referrals to Allied Healthcare Providers: Inclusion of Physician

Welcome, Demotest

My Doctor's Summary

Welcome To Your Health Risk Assessment (HRA) Report:

My DOCTOR'S SUMMARY

INTERvent CANADA encourages you to take responsibility for your lifestyle and your health. However, please note that your INTERvent CANADA Health Risk Assessment (HRA) report is intended to supplement, but not replace, your usual medical care. Your doctor remains responsible for your medical care. See your personal doctor for all medical tests and treatment. You should also arrange for your preventive care through your doctor. Always follow your doctor's recommendations. Please provide this INTERvent CANADA HRA Doctor's Summary to your family physician.

Name: Mr Demotest Demotest
Date of Birth: 1966/05/15
Address: 123 Anywhere Street, Regina SK S4S 0L2 CA
Date of Completion of HRA: 2012/10/01

Personal Medical Conditions and Risk Factors:

Your personal health-related risk factors include each of the below factors with a red "X" (X) alongside it (factors with a ✓ do not appear to be applicable to you; factors that could not be adequately assessed due to incomplete data are identified with a “?”). Your personal risk factors are addressed in more detail in your HRA Report.

- Known cardiovascular disease
- Family history of cardiovascular disease
- High blood pressure (hypertension)
- Prehypertension
- High cholesterol or triglycerides
- Overweight or obesity
- Diabetes
- Prediabetes
- Other major risk factor(s) for diabetes
- Metabolic syndrome
- Cancer (personal history)
- Family history of cancer
- Tobacco use
- Physical inactivity
- High fat and/or cholesterol and/or refined carbs and/or sugar diet
- Excessive stress
- Excessive alcohol consumption
- Depression, anxiety or other mental health issues
- Arthritis
- Asthma or other breathing problems
- Chronic bronchitis or emphysema
- Low back pain/back injury
- Chronic pain (that limits your ability to participate in regular physical activity)
- Physical limitations (that limit your ability to participate in regular physical activity)
- Ulcer/heartburn/acid reflux
- Osteoporosis
- Sleep apnea or symptoms compatible with a sleep disorder
- Chronic kidney disease
Partnering with C-CHANGE to ensure concordance with Canadian guidelines

Referrals to Allied Healthcare Providers: Inclusion of Physician

**Measurements**

<table>
<thead>
<tr>
<th></th>
<th>Results</th>
<th>Goals</th>
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<tbody>
<tr>
<td>Weight (kg)</td>
<td>102.3</td>
<td>≤72.3</td>
</tr>
<tr>
<td>Height (cms)</td>
<td>170.2</td>
<td>N/A</td>
</tr>
<tr>
<td>Waist measurement (cms)</td>
<td>91.4</td>
<td>&lt;101.6</td>
</tr>
<tr>
<td>Body mass index (BMI;kg/m²)</td>
<td>35.3</td>
<td>&lt;25.0</td>
</tr>
<tr>
<td>Systolic blood pressure (mmHg)</td>
<td>118</td>
<td>&lt;130</td>
</tr>
<tr>
<td>Diastolic blood pressure (mmHg)</td>
<td>76</td>
<td>&lt;80</td>
</tr>
<tr>
<td>Total cholesterol (mmol/L)</td>
<td>5.8</td>
<td>&lt;5.2</td>
</tr>
<tr>
<td>Triglycerides, fasting (mmol/L)</td>
<td>2.4</td>
<td>&lt;1.7</td>
</tr>
<tr>
<td>LDL cholesterol, fasting (mmol/L)</td>
<td>4.4</td>
<td>&lt;2.0</td>
</tr>
<tr>
<td>HDL cholesterol (mmol/L)</td>
<td>1.1</td>
<td>≥1.0</td>
</tr>
<tr>
<td>Glucose, fasting (mmol/L)</td>
<td>8.8</td>
<td>&lt;6.7</td>
</tr>
<tr>
<td>Hemoglobin A1c (%)</td>
<td>7.2</td>
<td>&lt;7.0</td>
</tr>
<tr>
<td>Framingham 10-year CHD risk score (%)</td>
<td>25</td>
<td>≤7</td>
</tr>
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</table>

**Doctor Referrals:**

In addition to the lifestyle-related recommendations in your INTERxVENT CANADA HRA report, please discuss the following with your personal doctor.

- Obtain clearance from your doctor before participating in any INTERxVENT CANADA exercise program.

Your LDL ('bad') cholesterol is above 2.0 mmol/L. Please schedule an appointment with your doctor to discuss whether medication is/ medication changes are needed for this (as recommended by the Canadian Cardiovascular Society in the October 2009 issue of the Canadian Journal of Cardiology; Can J Cardiol 2009;25(10):S57-79).

Your total cholesterol-to-HDL ratio is above 3.9. Please schedule an appointment with your doctor to discuss whether medication is/medication changes are needed for this (as recommended by the Canadian Cardiovascular Society in the October 2009 issue of the Canadian Journal of Cardiology; Can J Cardiol 2009;25(10):S57-79).

Re-check your fasting blood glucose ('sugar') level after participating in INTERxVENT or a similar lifestyle management program for 12 weeks. If your fasting blood glucose is still greater than 6.9 mmol/L, you should then schedule an appointment with your doctor to discuss this (as recommended by the Canadian Diabetes Association Clinical Practice Guidelines Expert Committee in the September 2008 issue of the Canadian Journal of Diabetes. Can J Diabetes. 2008;32(suppl 1):S1-S201).

Re-check your hemoglobin A1c after participating in INTERxVENT or a similar lifestyle management program for 12 weeks. If your hemoglobin A1c is still above 6.9%, you should schedule an appointment with your doctor to discuss this (as recommended by the Canadian Diabetes Association Clinical Practice Guidelines Expert Committee in the September 2008 issue of the Canadian Journal of Diabetes. Can J Diabetes. 2008;32(suppl 1):S1-S201).
Employee program 2010 to present. 2013 program referrals: Short Health Questionnaire (SQ) identifying people interested in weight management programs; flu shot; and MedsCheck / Diabetes Meds-Check medication.

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
</tr>
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<tbody>
<tr>
<td>SQ’s Started</td>
<td>1155</td>
</tr>
<tr>
<td>SQ’s Completed</td>
<td>1102 (95%)</td>
</tr>
<tr>
<td>Med Review Requested</td>
<td>282 (25%)</td>
</tr>
<tr>
<td>Flu Shot Requested</td>
<td>356 (32%)</td>
</tr>
<tr>
<td>Scientific Weight Management Program Requested</td>
<td>94 (8%)</td>
</tr>
</tbody>
</table>
TOMORROW IS THE MANDATORY MEETING ON EMPLOYEE HEALTH AND WELL-BEING.

THE MEETING STARTS AT 6 A.M., SO IT WILL INTERFERE WITH YOUR SLEEP AND NOT YOUR WORK.

DOESN'T THAT SEND A MESSAGE THAT WORK IS MORE IMPORTANT THAN HEALTH?

I HOPE SO. THAT'S THE THEME OF THE MEETING.

HEALTHY EMPLOYEES ARE UNPRODUCTIVE.

THEY'RE ALWAYS EXERCISING OR EATING FRUIT WHEN THEY SHOULD BE WORKING.

WE PREFER EMPLOYEES WHO WORK HARD AND DIE BEFORE THEIR PENSIONS START PAYING OUT.

SUDDENLY I FEEL SICK.

RIGHT ON SCHEDULE!
Corporate branding / themes can be employed
Online Health Themed Events

Movember; Heart Health Month; Mental Health Awareness Month…

Building a Better You!
February is Heart Health Month

Your Road to Wellness continues! As February is Heart Health Month, we encourage everyone to love their hearts by learning and preventing heart-specific diseases through the Heart and Stroke Foundation’s interactive e-health tools.

Be sure to complete the information below to be eligible to earn valuable incentive points towards cash gift cards!

Be ‘Mind Full’…your mental health matters!

“The Power of Choice – For Your Well-Being” encourages all teammates mental well-being by bringing awareness into their lives through an interactive e-health tools/videos from the Canadian Mental Health Manulife Financial and Shepell-fgl.

Be sure to complete the below information to be eligible to earn valuable $150 Health Care Spending Account (HCSA) dollars!

Better health for life.™
INTERxVENT Food Tracker Pro
(offered to all eligible employees) includes:

- Fast food entry – copying foods from other days
- Recipe editor
- Customizes target macronutrient ratios, selecting up to 45 nutrients for tracking
- Bar Code Scan for easy entry of food items
- Custom Meal Plans – ie. incorporating Blue Menu food items
Resting Metabolic Rate: varies by individual

Michael's Metabolism
3980-4640 Kcal/day

Sunshine's Metabolism
1910-2250 Kcal/day

Participants breath into the RMR machine for 10 minutes.

Right-click [HERE](#) to watch full video
DIFFICULTY LOSING WEIGHT
Difficulty lowering body mass when following a low-calorie treatment.

<table>
<thead>
<tr>
<th>GENE</th>
<th>VARIANT</th>
<th>TYPE</th>
</tr>
</thead>
<tbody>
<tr>
<td>PPARG</td>
<td>CC GA</td>
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</tr>
<tr>
<td>PLIN</td>
<td>CC GG</td>
<td>Alternative</td>
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Your genetic predisposition is: The same as that of the general population.

WEIGHT MAINTENANCE

<table>
<thead>
<tr>
<th>GENE</th>
<th>VARIANT</th>
<th>TYPE</th>
</tr>
</thead>
<tbody>
<tr>
<td>FTO</td>
<td>TT TT</td>
<td>Normal</td>
</tr>
</tbody>
</table>

Your genetic predisposition is: The same as that of the general population.
DO YOU OR A LOVED ONE SUFFER FROM:
- Gas, bloating or abdominal pain?
- Itchy skin?
- Chronic pain or headache?
- Chronic fatigue?

If you do, you may have a food sensitivity or intolerance.

Food sensitivities or intolerances affect many people and can develop at any time during one's life. Unlike food allergies, symptoms may be delayed for hours, or days, or even months after consumption, making it difficult to diagnose.

This is where Gamma-Dynacare's Food Intolerance Test can help.

Our test, which measures over 220 specific foods, uses the newest technology for food intolerance testing called Genarray: microarray, which results in better sensitivity and accuracy than other tests.

Our new report contains easy to follow information and tools on how you can manage your food intolerances.

Talk to your healthcare provider about getting tested today!

HOW TO GET THE TEST
Talk to your healthcare provider about getting the food Intolerance test today!

You can choose from 2 test panels:
- Food Intolerance Test (120+ food panel) - $250.00
- Food Intolerance Test (220+ food panel) - $325.00

Make sure you specify which test panel you want – 120+ or 220+ foods – to ensure that you get the correct test done.

You do not need to fast, nor should you change your diet prior to getting the test.

This test may be covered by some private insurance health plans.

For more information, go to www.gamma-dynacare.com.

www.gamma-dynacare.com
Congratulations on your participation in your corporate health & wellness program. Your points will earn you gift cards.

<table>
<thead>
<tr>
<th>Incentive</th>
<th>Description</th>
<th>Score</th>
<th>Achieved</th>
</tr>
</thead>
<tbody>
<tr>
<td>HRA Completed</td>
<td>Incentive for completing your Health Risk Assessment</td>
<td>100 - Points</td>
<td></td>
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<tr>
<td>Biometric Data Loaded</td>
<td>Incentive for attending a Biometric Screening clinic / entering your blood &amp; biometric data</td>
<td>50 - Points</td>
<td></td>
</tr>
<tr>
<td><strong>Self Managed Program Completed</strong></td>
<td><strong>Incentive for completing an INTERxVENT health program</strong></td>
<td></td>
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<tr>
<td>Coached Program Completed</td>
<td>Incentive for completing an INTERxVENT health program</td>
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</tr>
<tr>
<td>Health Consult Completed</td>
<td>Incentive for Completing a Health Consult with an INTERxVENT Health Coach</td>
<td>50 - Points</td>
<td></td>
</tr>
<tr>
<td>Health Challenge</td>
<td>Incentive for completing a Fitbug Health Challenge.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Quarterly Health Event #1</td>
<td>Incentive for participating in the Movember Health Event</td>
<td>5 - Points</td>
<td></td>
</tr>
<tr>
<td>Quarterly Health Event #2</td>
<td>Incentive for participating in the Heart Health Month Event</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Follow-Up Completed</td>
<td>Incentive for completing the Follow Up Survey at the end of your Self-Managed or Coached program</td>
<td>50 - Points</td>
<td></td>
</tr>
</tbody>
</table>

**Total Points Awarded:** 255
What “incenting” employers offer to employees

“Which of the following incentives do you use to encourage DM or wellness participation?”

<table>
<thead>
<tr>
<th>Incentive</th>
<th>Large: 1,000 or more employees</th>
<th>Medium: 250 to 999 employees</th>
<th>Small: Fewer than 250 employees</th>
<th>Average across all employers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash Incentive (e.g., a reward for completing an HRA)</td>
<td>41%</td>
<td>35%</td>
<td>30%</td>
<td>36%</td>
</tr>
<tr>
<td>Cost reimbursement (e.g., for gym membership or nutritional services)</td>
<td>27%</td>
<td>32%</td>
<td>38%</td>
<td>31%</td>
</tr>
<tr>
<td>Raffle prize</td>
<td>24%</td>
<td>23%</td>
<td>42%</td>
<td>28%</td>
</tr>
<tr>
<td>Reduction in employee health-benefit contribution</td>
<td>19%</td>
<td>30%</td>
<td>30%</td>
<td>27%</td>
</tr>
<tr>
<td>Gift certificate</td>
<td>16%</td>
<td>27%</td>
<td>22%</td>
<td>22%</td>
</tr>
<tr>
<td>Other</td>
<td>12%</td>
<td>12%</td>
<td>10%</td>
<td>10%</td>
</tr>
<tr>
<td>Paid time-off</td>
<td>4%</td>
<td>5%</td>
<td>10%</td>
<td>6%</td>
</tr>
</tbody>
</table>

Base: 305 US benefits executives who offer disease management and/or wellness programs and offer incentives for employee adoption of those programs

Source: The Employee Benefit News/Forrester Research 2007 Benefits Decisions' Impact Study
Don’t employers know that incentives work?

Higher incentives create higher participation:
- $500
- $250
- $100
- $75
- $50
- $25
- $0

Incentive Value

Participation %

Source: Deloitte Center for Health Solutions, 2005
INTERVENT programs have been used for 17 years and over 2 million participants.

Recent Canadian Enterprise Clients:

**Client A**: Percent Initiated HRA = 80.3%  
(SSO) Percent Completion of HRA = 94.5%

**Client B**: Percent Initiated HRA = 74.2%  
Percent Completion of HRA = 91.6%

Recent Global Account:

**Client C**: Number of HRA’s Initiated = 19,194  
Percent Completion of HRA = 98.3%

We have a **86%** satisfaction rate across our book of business.
INDIVIDUAL PARTICIPANT REPORTS

- Summary Reports (in real-time)
- Detailed Reports (in real-time)

PHYSICIAN SUMMARY REPORTS

- Includes recommendations based on C-CHANGE guidelines (in real-time)

EMPLOYER AGGREGATE REPORTS

- HRA Completion Rate (in real-time)
- Health Risk Assessment Report
- Baseline and Follow-Up Evaluation
- Business Health Culture Index (Stress & Satisfaction Offset Score)
- Satisfaction Surveys
### Measuring Satisfaction

#### Organizational Culture

<table>
<thead>
<tr>
<th>Control</th>
<th>Agree Strongly</th>
<th>Agree</th>
<th>Not Sure</th>
<th>Disagree</th>
<th>Disagree Strongly</th>
<th>SCORE</th>
</tr>
</thead>
<tbody>
<tr>
<td>I am satisfied with the amount of involvement I have in decisions that affect my work.</td>
<td>+1</td>
<td>+1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>Add the first and second scores ...</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Reward</th>
<th>Agree Strongly</th>
<th>Agree</th>
<th>Not Sure</th>
<th>Disagree</th>
<th>Disagree Strongly</th>
<th>SCORE</th>
</tr>
</thead>
<tbody>
<tr>
<td>I feel I am rewarded (in terms of praise and recognition) for the level of effort I put out for my job.</td>
<td>+1</td>
<td>+1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Demand</th>
<th>Agree Strongly</th>
<th>Agree</th>
<th>Not Sure</th>
<th>Disagree</th>
<th>Disagree Strongly</th>
<th>SCORE</th>
</tr>
</thead>
<tbody>
<tr>
<td>In the last 5 months, too much time pressure at work has caused me worry, “nerves“ or stress.</td>
<td>-1</td>
<td>-1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>subtract the third score ...</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Effort</th>
<th>Agree Strongly</th>
<th>Agree</th>
<th>Not Sure</th>
<th>Disagree</th>
<th>Disagree Strongly</th>
<th>SCORE</th>
</tr>
</thead>
<tbody>
<tr>
<td>In the last 5 months, I have experienced worry, “nerves“ or stress from mental fatigue at work.</td>
<td>-1</td>
<td>-1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>subtract the fourth score ...</td>
</tr>
</tbody>
</table>
HEALTH PROBLEMS AND ABSENTEEISM ARE A HUGE COST TO THIS BUSINESS.

SO?

SO GIVE ME A RAISE, OR I'LL EAT UNHEALTHY FOOD AND AVOID ALL FORMS OF EXERCISE.

YOU ALREADY DO THOSE THINGS.

HOW COULD YOU POSSIBLY KNOW THAT?
## Case Study – Pharma Company
### 2013 vs 2010 Cohort

<table>
<thead>
<tr>
<th>Group / Sub-set</th>
<th>% Risk Reduction *</th>
<th>Annual Productivity Savings ** (per person)</th>
</tr>
</thead>
<tbody>
<tr>
<td>577 Total Participants: HRA only; Self-Help &amp; Coached</td>
<td>13.0%</td>
<td>$198.96</td>
</tr>
<tr>
<td>405 Participants: HRA only</td>
<td>7.8%</td>
<td>$101.62</td>
</tr>
<tr>
<td>49 Participants: Coached</td>
<td>23.1%</td>
<td>$552.55</td>
</tr>
</tbody>
</table>

Total Annual Productivity (Presenteeism) Savings = $114,800

* Based upon 9 risk factors
** Based upon Burton, et al, JOEM • Volume 48, Number 3, March 2006 [2012 USD used in productivity calculation]
<table>
<thead>
<tr>
<th>Group / Subset in Same Cohort</th>
<th>ROI (productivity)</th>
<th>Net Productivity Savings / Person *</th>
</tr>
</thead>
<tbody>
<tr>
<td>577 Total Participants: HRA only; Self-Help &amp; Coached</td>
<td>3.06</td>
<td>$24.17</td>
</tr>
<tr>
<td>405 Participants: HRA only</td>
<td>2.15</td>
<td>$6.88</td>
</tr>
<tr>
<td>49 Participants: Coached</td>
<td>1.45</td>
<td>$171.55</td>
</tr>
</tbody>
</table>

- Net productivity savings per person = Savings per person after individual program cost
- Based upon Burton, et al, JOEM • Volume 48, Number 3, March 2006 [2012 USD used in productivity calculation]
Extrapolated to 120,000 employees (INTERxVENT’s largest corporate customer)

<table>
<thead>
<tr>
<th>Group / Subset in Same Cohort</th>
<th>ROI (productivity)</th>
<th>Net Annual Savings / Person</th>
<th>Total Projected Annual Savings</th>
</tr>
</thead>
<tbody>
<tr>
<td>60,000 Total Participants: HRA only; Self-Help &amp; Coached (50%)</td>
<td>3.06</td>
<td>$24.17</td>
<td>$1,450,200</td>
</tr>
<tr>
<td>54,000 Participants: HRA only (45%)</td>
<td>2.15</td>
<td>$6.88</td>
<td>$371,520</td>
</tr>
<tr>
<td>6,000 Participants: Coached (5% highest risk)</td>
<td>1.45</td>
<td>$171.55</td>
<td>$1,029,300</td>
</tr>
</tbody>
</table>

* Based upon previous slide ROI, Savings / Person
** Based upon Burton, et al, JOEM • Volume 48, Number 3, March 2006 [2012 USD used in productivity calculation]
Meta-evaluation of 62 economic return on investment studies of multi-component worksite wellness/health promotion

- Average duration of follow-up = 3.83 years
- Number of study subjects = 546,971
- Key findings:
  - % Change in sick leave absenteeism = -25.1%
  - % Change in health costs = -24.5%
  - % Change in workers’ compensation costs = -40.4%
  - % Change in disability management costs = -24.2%
  - Cost:Benefit Ratio = 1:5.56 (i.e., ROI = 556%)

Chapman LS. Am J Health Promo 2012; 26: TAHP-1-TAHP-12
We’ve Come a Long Way
We’ve Come a Long Way
We Can Reverse the Trend

Go Habs Go!!!
Appendix

Program Effectiveness
Scientific Efficacy
& ROI
Program Effectiveness: Scientific Evidence

Over 100 Published Scientific Manuscripts/Abstracts From National and International Scientific Meetings

Key Scientific Manuscripts Include:

• Comparison of single versus multiple lifestyle interventions: Are the antihypertensive effects of exercise training and diet-induced weight loss additive?  *Am J Cardiol* 1997;79:763-767


• Effectiveness of 3 models for comprehensive cardiovascular disease risk reduction.  *Am J Cardiol* 2002;89:1263-1268

• Effectiveness of therapeutic lifestyle changes in patients with hypertension, hyperlipidemia, and/or hyperglycemia.  *Am J Cardiol* 2004; 94: 1558-1561

• Effect of comprehensive therapeutic lifestyle changes on pre-hypertension.  *Am J Cardiol* 2008; 102; 1677-1680

• Health-risk appraisal with or without disease management for worksite cardiovascular risk reduction.  *J Cardiovascular Nursing* 2008; 23: 513-518

• Rationale, design, and implementation of aggressive risk factor management in the SAMMPRIS trial.  *Circ Cardiovasc Qual Outcomes* 2012; 5: e51-e60

For the complete listing of Scientific Abstracts, go to: www.intervent.ca/binder
Percent change in 10-year Framingham CHD Risk Score in higher-risk employees

Source: Published in *Journal of Cardiovascular Nursing*, November 2008
Risk Intervention Level transitions for participants completing the Lifestyle coaching program (N = 3,537 employees)

**NOTE**: 91.7% of participants who entered the program as low risk remained low risk after the program end. 23.8% remained at a moderate risk, and 12.5% remained high risk.
Program Effectiveness: Scientific Validation

Percentage of participants who achieved goal levels in classic CVD risk factors without medications within three months of initiating the program

Source: Published in *American Journal of Cardiology*, December 2004
State of Oklahoma Pilot: Average Health Care Claims Per Employee

$2.30 savings for every $1 spent

Notes: INTERVENT Program was implemented in January 2003. Participants enrolled in the INTERVENT Program in 2003 and completed a full year of service and evaluations. Analysis performed, in part, by Milliman Consultants and Actuaries.
**US Steel Co.**

### Table 5 – Average Annual Cost Comparison

<table>
<thead>
<tr>
<th>Timeframe</th>
<th>Average Annual Cost</th>
<th>Normative Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>November 2004 – November 2005</td>
<td>$5647</td>
<td>$8227</td>
</tr>
<tr>
<td>November 2005 – November 2006</td>
<td>$5182</td>
<td>$8707</td>
</tr>
<tr>
<td>November 2006 – November 2007</td>
<td>$5704</td>
<td>$9151</td>
</tr>
</tbody>
</table>

**Graph 3: Average Annual Cost Comparison**

- Steel Average Annual Cost
- Normative Cost

Plan Year:
- Nov 2004-Nov 2005
- Nov 2005-Nov 2006
- Nov 2006-Nov 2007
138.4 minutes per week gain in exercise among sedentary employees

35.7% improved medication compliance

ROI\textsubscript{presenteeism} $4.42$ for every $1$ spent
Program Effectiveness: Outcomes

19% reduction in cardiovascular risk

Toronto Rehabilitation Institute
AACVPR 2008 Annual Meeting: Effect of a Lifestyle Health Coaching Program on Multiple Cardiovascular Disease Risk Factors in Participants with Classes I, II and III Obesity (n = 3,613)

<table>
<thead>
<tr>
<th></th>
<th>Class I Obesity (BMI 30-34.9 kg/m²) (n=1,933)</th>
<th>Class II Obesity (BMI 35.0-39.9 kg/m²) (n=820)</th>
<th>Class III Obesity (BMI &gt;39.9 kg/m²) (n=860)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age (years)</td>
<td>54 ± 12</td>
<td>52 ± 11</td>
<td>50 ± 11</td>
</tr>
<tr>
<td>Men (%)</td>
<td>711 (37%)</td>
<td>200 (24%)</td>
<td>144 (17%)</td>
</tr>
<tr>
<td>Women (%)</td>
<td>1222 (63%)</td>
<td>620 (76%)</td>
<td>716 (83%)</td>
</tr>
<tr>
<td>BMI (kg/m²)</td>
<td>31.8 ± 1.1</td>
<td>36.9 ± 1.1</td>
<td>45.9 ± 6.0</td>
</tr>
<tr>
<td>Weight (lbs)</td>
<td>200.7 ± 24.6</td>
<td>227.2 ± 25.7</td>
<td>279.8 ± 46.1</td>
</tr>
<tr>
<td>Waist Circumference (inches)</td>
<td>39.0 ± 3.6</td>
<td>42.5 ± 4.3</td>
<td>48.2 ± 5.7</td>
</tr>
</tbody>
</table>
Change in Weight and Body Mass Index (BMI) After 1 Year of Intervention (n = 3,613)

All within group changes were statistically significant, p < 0.05
p < 0.05 for: Class III vs. Class II for Weight, BMI; Class III vs. Class I for Weight, BMI; Class II vs. Class I for Weight, BMI
Changes in Clinical Outcome Measures After 1 Year of Intervention (n = 3,613)

Class I (BMI = 30-34.9 kg/m²)  Class II (BMI = 35-39.9 kg/m²)  Class III (BMI > 39.9 kg/m²)

All within group changes were statistically significant, p < 0.05

- For Systolic BP, Diastolic BP, LDL Cholesterol, HDL Cholesterol, Triglycerides, and Fasting Glucose, the changes for Class III compared to Class II and Class I were statistically significant, p < 0.05.
Changes in Framingham 10-year Coronary Heart Disease Risk Score After 1 Year of Intervention: INTERxVENT Participants with a Baseline Score ≥10% (n=7,281) (Presented at the 2009 ACSM Annual Meeting)

All within group changes were statistically significant, p <0.05
Differences among groups were not statistically significant
Metabolic Syndrome Study
(Presented at the ACSM Annual Meeting, June 2010)

Effect of One Year of Lifestyle Health Coaching in Participants With Metabolic Syndrome (n=1,887)

- 3 or more risk factors: -30.9%
- 3 risk factors: -22.1%
- 4 risk factors: -40.2%
- 5 risk factors: -46.0%
Effect of One Year of Lifestyle Health Coaching in Participants With Metabolic Syndrome (n=1,887; +Ve = Risk Factor Positive or Present)

- Waist + Ve: -33.5%
- BP + Ve: -39.3%
- HDL + Ve: -30.0%
- Triglycerides + Ve: -31.9%
- Glucose + Ve: -27.7%
Drug use among INTERVENT compliers*

*No statistically significant differences between baseline vs. follow-up rates. Follow-up assessed at 12 weeks
Gordon NF; Am J Cardiol 2002; 89:1263-68