



HEALTHY@HARRIS
Caring for ourselves so we can care for others

Healthy@Harris Employee Wellness Program

Year-End Report

Program Year:

September 2021 - August 2022

(Rewards effective 3/1/23)

HARRISHEALTH
SYSTEM

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Executive Summary

Executive Summary

- **Wellness Program Engagement:**

- The total Wellness Premium Reward Population includes regular, full-time and part-time employees on the medical plan (7,621) and spouses (1,456) on the medical plan with a hire or coverage date from September 1, 2021 – April 30, 2022
 - 80.08% of employees and covered spouses earned Premium Rewards; 77.63% earned full reward and 2.45% earned partial reward. Overall we had a 1.92% lower than the previous program year
 - 79.19% of Premium Reward participants earned Bronze level Rewards, 5.41% earned Gold and 15.41% earned Platinum Rewards
- The total eligible Wellness Reward Population includes all regular, full-time and part-time employees, on and off of the medical plan, (8,284) and spouses on the medical plan (1,456) with a hire or coverage date from September 1, 2021 – April 30, 2022
 - 73.11% of all employees and spouses met full completion requirements and 26.89% were incomplete
 - 79.20% of participants earned Bronze level Rewards, 5.42% earned Gold and 15.38% earned Platinum Rewards
- Achieved 395,502 Wellness Program Units of Service (UOS)/Engagement
- 78.48% of all employees (regardless of medical plan status) and covered spouses completed ≥ 1 program or activity. This includes all full-time, part-time and temporary employees and Spouses
- 95.55% of all eligible medical plan participants completed ≥ 1 program or activity
- Provided 23,353 programs and activities for participants during the program year
- 47.42% of all Wellness Participants completed 9 or more activities during the current program year. This includes all employees and spouses regardless of medical plan status.
- Participants completed an average of 32 wellness activities per person
- 84% of Premium Reward eligible participants completed the annual health assessment; 78.69% of all eligible participants completed a Health Assessment

- **Preventive Care Utilization:**

- Overall preventive screenings utilization increased by 47% over the prior program year (some screenings do not need to be done yearly)
 - Increased overall employee compliance by 14% and spouse preventive care utilization by 33%
 - Mammograms increased overall by 2%
 - Colorectal Screenings increased by 23%
 - Prostate Screenings increased by 1%

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Executive Summary

- **Preventive Care Utilization Continued:**
 - Annual physicals increased by 26%
 - Cervical Cancer screenings decreased by 5%
 - Overall, preventive care utilization for employees and spouses was 84.53%, an decrease of 4.72% over the prior program year
 - 87.2% of Premium Reward eligible participants completed an annual physical; 81.89% of all eligible wellness participants completed an Annual Physical
 - Achieved 30.7% compliance with annual Dental exam for active employees and spouses; an increase of 0.7%
 - Achieved 37.8% compliance with annual Vision exam for active employees and spouses; an decrease of 1%

- **Population Health:**
 - Prospective Risk Scores increased by .25 for Employees and by .30 for spouses
 - Prevalence of Hypertension increased by 1.3% and the costs associated with people with Hypertension increased by 2.3% over the prior program year
 - Prevalence of Diabetes increased by 6.9% but the costs associated with people with Diabetes decreased by 8.4% over the prior program year
 - Prevalence of Hyperlipidemia increased by 6.8% but costs associated with people with Hyperlipidemia decreased by 4.7% over the prior program year
 - 11% (409 people) of total population meet Metabolic Syndrome criteria (3 out of 5 risk factors); a 3% increase from prior year
 - The average cost of a member with Metabolic Syndrome (Med & Rx) is \$6,849 per year, versus \$4,528 per year for a member without Metabolic Syndrome.
 - Potential cost avoidance = \$949,407 (409 * \$2,321)
 - 71% of respondents remained in the same risk category year over year or decreased risk count
 - The majority of total population health risks in biometric and lifestyle measures (at risk and high risk across 12 metrics) increased during the program year.
 - Decreased prevalence of stress by 1.1%
 - No change in the prevalence of Triglycerides
 - Decreased prevalence of tobacco use by 0.3%

Executive Summary

- **Culture and Environment:**

- 87.57% of employees believe that Harris Health System cares about their health and well-being, a 2.15% decrease from the prior year
- 84.67% of employees believe there is a culture of health and wellness within Harris Health System, a 4.08% decrease from the prior program year.
- 73.02% of employees report that their managers support their participation in the wellness program, a 1.05% decrease from the prior program year.
- 76.02% of employees report that the managers in their department care about the health and well-being of employees, a 3.18% decrease from the prior program year.

- **Wellness Program Satisfaction:**

- 85.77% of employees are satisfied with the Wellness Program, a 3.39% decrease from the prior program year.
- 79.09% of employees reported that the wellness program has helped them improve their overall health, an decrease of 0.98%.
- 81.01% of employees reported that the wellness program has helped them feel more confident about making decisions about their health, a 1.06% decrease from the prior program year.
- 82.12% has helped me increase my readiness to make positive health behavior changes, a 2.18% decrease from the prior program year.
- 81.28% of employees reported that they have made at least one significant health behavior changes since participating in the wellness program, a 0.81% decrease from the prior program year.
- 77.88% of employees reported that the wellness program has led to improved quality of life for me and/or my family, a .03% decrease from the prior program year.
- 85.64% of employees reported that the wellness program is a valuable part of my employee benefits, a 1.45% decrease from the prior program year.
- 82.89% of participants reported that they have gained knowledge and/or skills from the wellness program that they use in everyday life, a .92% decrease from the prior program year.

Executive Summary

- **Livongo Diabetes Management Program:**
 - **Engagement:**
 - Achieved 55% participation in Livongo Diabetes Management Program during the program year compared to Livongo’s BOB of 36%
 - 56% of Members engaged in both the Livongo Diabetes Management Program and Hypertension Management Program
 - **Costs:**
 - Diabetics Participating in Livongo cost 22% less than non-participants; a difference of \$305 PMPM; a total difference of \$4,062,600 per year
 - Participants engaged in Livongo have decreased their costs by 2% (\$22 PPPM); \$264 PMPM; totaling \$293,040. This includes all costs.
 - **Decrease ER visits and complications associated with Diabetes:**
 - On average, diabetics participating in Livongo are 1.3x less likely to have an ER visit.
 - On average, Diabetics participating in Livongo are 2.5x less likely to have inpatient days compared to non-participants.
 - **Clinical Results:**
 - Prospective risk score is .22 greater in Livongo Participants versus non-participants; opportunity for impact
 - Livongo participants are achieving clinical compliance. Greatest opportunity is with annual dilated eye exams (70%). Annual Exams: Foot exam (88%), HbA1c (98%), Lipid profile (97%), LDL-C (97%) and preventive visit (95%).
 - Livongo participants are achieving higher clinical compliance with HEDIS measures and the Diabetes Standards of Care than non-participants
 - 41.6% of Livongo participants are in good diabetic control (<7%); a 2.9% decrease from the prior program year
 - 39.9% of Livongo participants are in moderate diabetic control (7%-9%); a 3.6% increase over the prior program year
 - 18.5% of Livongo participants are in in poor diabetic control (≥9%); a 0.7% decrease over the prior program year
 - The average HbA1c of all participants in Livongo increased by .02.
 - The average HbA1c for participants with an average HbA1c ≥ 9 decreased by .06. Reductions are correlated to cost savings and reduced health risks
 - Harris Health members experienced a **1.5% decrease in eHbA1c** from the self reported values at registration
 - Livongo participants had a 10.5% improvement in their biometric clinical risks
 - **Medication Adherence:**
 - Livongo participants have a significantly higher medication adherence (PDC > 80%) of 93.3% compared to non-participants 77.3% Livongo Hypertension participants have a significantly higher medication adherence (PDC > 80%) of 89.3% compared to non-participants 79.6%

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Executive Summary

- **Livongo Diabetes Management Program Continued:**
 - **Empowerment & Satisfaction:**
 - Livongo participants have a Net Promoter Score (NPS) of +77 compared to NPS of 68 for Livongo’s BOB and a NPS of 12 for health plans. This demonstrates that HHS participants recommend Livongo and are satisfied with the program.
 - 87.4% of members feel more empowered in their diabetes management
 - 55% of Livongo members feel less distress in their chronic disease management; a 19% improvement over the prior year
 - **Achieve ROI & VOI (Value on Investment):**
 - Pooled ROI for medical and Rx cost is:
 - Year 1: 1.2x ROI \$38 PMPM
 - Year 2: 1.9x ROI \$58 PMPM
 - Year 3: 2.1x ROI \$65 PMPM
 - Year 4: 4.3x ROI \$135 PMPM
 - Year 5: 1.4x ROI; \$69 PMPM; a total savings of \$862, 776

- **Livongo Hypertension Management Program:**
 - **Engagement:**
 - 49% participants with Hypertension engaged in Livongo during the program year; a 4% increase from the prior program year
 - 56% of Members engaged in both the Livongo Diabetes Management Program and Hypertension Management Program
 - **Costs:**
 - Livongo HTN participants cost 6% less than non participants; a difference of \$249 PMPM; a total difference of \$5,575,608 per year
 - **Decrease ER visits and complications associated with Hypertension:**
 - On average, Hypertension members not participating in Livongo are 1.4x less likely to have an ER visit.
 - On average, Hypertension members participating in Livongo are 1.6x less likely to have inpatient days compared to non-participants.

(Results continued on next page)

Executive Summary

- **Livongo Hypertension Management Program Continued:**
 - **Clinical Results:**
 - Prospective risk score is .04 higher in Livongo Hypertension Management Participants versus non-participants.
 - Members saw an reduction of 6.4 mmHg reduction in systolic blood pressure and 4.5 mmHG in diastolic blood pressure, resulting in risk reduction of coronary heart disease events and stroke
 - 78% of Livongo participants maintained or improved blood pressure control
 - Participants averaged 22 blood pressure checks per month
 - 72% of participants are uncontrolled at baseline and 28% were controlled
 - 86% completed the 'Drive-to-5' to establish checking patterns in the first 30-days to develop initial personalized interventions
 - Livongo Hypertension participants are meeting quality metrics 20% more than non-participants; a 2% increase over the prior year
 - Livongo Hypertension participants are achieving quality metrics. 82.8% are on an antihypertensive medication; 97.3% had a Lipid profile, 36.7% have a Hypertension diagnosis and prescribed statin and gaps in prescription refills, 98.2% had an annual serum creatinine test and 95% had a preventive visit.
 - Participants achieved the following clinical measures: LDL < 100 (41.4%); Total Cholesterol < 200 (66.3%); HDL < 50 for Females (30.8%); HDL < 40 for Males (28.6%); Triglycerides < 150 (80.3%); Glucose < 100 (57.6%); Blood Pressure < 120/80 (20.4%); Waist Circumference < 35 inches for women (31.1%) & Men (50.3%); Physical Activity < 150 min./week (66.1%) and 0 times/week (8.5%); Tobacco Use (3.6%); Nutrition At Risk 1-2 servings/day (45.7%) & High Risk (3.4%); and Stress At Risk (30.8%) & High Risk (9.8%).
 - Achieved positive risk shift in participants; Achieved 32.7% controlled versus 27.5% at baseline. Achieved 35.5% in Stage 1 HTN compared to 33% at baseline. Achieved 31.8% in Stage 2 HTN compared to 39.5% at baseline.
 - **Empowerment & Satisfaction:**
 - Livongo participants have a Net Promoter Score (NPS) of +77 compared to NPS of 66 for Livongo's BOB and a NPS of 12 for health plans. Netflix NPS is 68. This demonstrates that HHS participants recommend Livongo and are satisfied with the program.
 - **Medication Adherence:**
 - Livongo Hypertension participants have a significantly higher medication adherence (PDC > 80%) is 89.3% compared to non-participants 79.6%

Executive Summary

- **Livongo Hypertension Management Program Continued:**

- **ROI & VOI (Value on Investment):**

- Pooled ROI for medical and Rx cost:
 - Year 1: 1.3x ROI \$25 PMPM
 - Year 2: 2.0x ROI \$40 PMPM
 - Year 3: 3.0 x ROI \$60 PMPM
 - Year 4: 2.2x ROI; \$45 PMPM; a total savings of \$860,760

- **Livongo Diabetes Prevention Program (DPP):**

- **Engagement:**

- Achieved 31% engagement out of those eligible during the program year, an 12% increase over the prior program year.
 - 83% of participants utilized their connected scale
 - 79% completed self-guided activities
 - 25% completed digital coaching, 5-day challenges and action plans
 - 5% completed expert coaching sessions
 - Members engaged with the prediabetes management program an average of 18 times per month
 - 50% of Members engaged in both the Livongo Diabetes Prevention Program and the Hypertension Management Program
 - Net promoter score of +77; positive testimonials

- **Pre-Diabetes Prevalence:**

- 32.2% of our population (with available glucose and/or HbA1c data and no diabetes diagnosis) has Pre-Diabetes, a increase of 4.2% over prior program year
 - 85.1% of participants with Pre-Diabetes have a BMI of ≥ 25 , a 1.2% decrease from prior program year*
 - 54.6% of participants with Pre-Diabetes have a high waist circumference, a 1.7% decrease from prior program yea Potentially undiagnosed diabetics increased by 1.0% (88 people)*
 - *The number of pre-diabetic members with reportable BMI and waist circumference data in Alliant Analytics doubled compared to the prior program year, which explains the conflicting # and % trends

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Executive Summary

- **Livongo Diabetes Prevention Program (DPP) continued:**
 - **Clinical Results:**
 - 60.8% of participants lost weight
 - 35.9% of DPP participants have Hypertension, a decrease of 1.9% from the prior program year.
 - 21.3% of DPP participants have morbid obesity, a decrease of 0.1% from the prior program year
 - 28.4% of DPP participants have Hyperlipidemia, an increase of 9.4% over the prior program year
 - The employee engaged in the Livongo DPP program have a prospective risk score of 1.85
 - The spouses engaged in the Livongo DPP program have a prospective risk score of 1.71
 - 27.8% of participants lost greater than 10% of their weight at 6 months
 - 15.7% lost between 7-10% weight loss at 6 months
 - 8.1% lost between 5-7% weight loss at 6 months
 - 16.1% lost between 3-5% weight loss at 6 months
 - 32.3% lost less than 3% at 6 months
 - Achieved a risk shift increase of 8.1% into the healthy BMI <25
 - Achieved a risk shift of 4.5% into the overweight BMI 25-29.9
 - Achieved a risk shift of 0.4% into the Obese 1 BMI 30-34.9
 - Achieved a risk shift of 0.9% into the Obese 2 BMI 35-39.9
 - Achieved a risk shift decrease of 13% from the Obese 3 BMI >=40
 - 85.1% of participants with Pre-Diabetes have a BMI of ≥25, a 1.2% decrease from prior program year
 - 54.6% of participants with Pre-Diabetes have a high waist circumference, a 1.7% decrease from prior program year
 - **Claims Costs**
 - The average medical claims cost per DPP participant is \$159.57 PMPM, an increase of 11.6% (\$16 PMPM)
 - **Decrease ER visits and complications associated with Pre-Diabetes:**
 - The average number of ER visits/1,000 for DPP participants is 330.99, an increase of 6.3% (19.64 visits/1,000 members)
 - The average number of Inpatient Days/1,000 for DPP participants is 205.14, a decrease of 8.2% (18.27 days/1,000 members).

Executive Summary

- **Employee Wellness Goal Completion**

- Out of 18 total Employee Wellness Goals set for the 2021-2022 Program Year:
 - 9 goals were achieved at the “superior level”; 50% of goals
 - 4 goals were achieved at the “target level”; 22.2% of goals
 - 3 goals were achieved at the “threshold level”; 16.7% of goals
 - 2 goals were achieved at the “below threshold level”; 11.1% of goals

- **Fitbit Program**

- 2,153 Active participants during the 2021-2022 program year
- 30.1% reached 10,000 steps per day
- 1.5% of participants are very active; a 0.2% increase over the prior program year
- 33.4% of participants are active; a 0.5% increase over the prior program year
- 49.7% of participants are lightly active; a 0.2% decrease over the prior program year
- 15.5% of participants are sedentary; a 0.4% decrease over the prior program year
- 5.6% achieved $\geq 15,000$ steps per day
- 24.4% $> 10,000$ steps per day
- 58.1% achieved $\geq 5,000$ steps per day; an a 2.1% increase over the prior program year
- 11.8% achieved $< 5,000$ steps per day
- Participants had a total of 3,956,291,210 steps or 1,679,512.28 miles
- Participants had an average of 8,663.08 steps or 3.67 miles
- Participants averaged 30.59 active minutes per day
- Ben Taub had the most steps (1,397,707,899 steps) followed by ACS (805,632,615 steps), Administration (784,518,515 steps), LBJ (670,205,634 steps), CHC (155,790,230 steps), Telecommute (116,310,940 steps), Quentin Mease (16,494,085 steps) and Harris County Sheriff’s Office (9,631,292 steps) .

Executive Summary

• Medal Level Analysis

- 80.08% of Premium Reward-Eligible participants earned premium rewards; 77.63% earned full reward; 2.45% earned partial reward.
 - 79.2% of participants achieved Bronze Level; an increase of 15.82% increase from the prior program year
 - 5.42% of participants achieved Gold Level, an increase of 1.24% over the prior program year
 - 15.38% of participants achieved Platinum Level, an increase of 2.68% over the prior program year
- 73.11% of all Program-Eligible participants earned Wellness Rewards (Regular, full-time and part-time employees (on and off of the medical plan) and spouses on the medical plan)
 - 79.19% of participants achieved Bronze Level
 - 5.41% of participants achieved Gold Level
 - 15.41% of participants achieved Platinum Level
- A total of 2,793 gift cards were awarded totaling \$198,025
- Platinum Level had the lowest average PMPM spend followed by Gold and then Bronze level
- Medal level Award earners had significantly higher health engagement rates, preventive care utilization and better Gaps in Care compliance than non-earners
- 71% of incentive eligible members who completed the health risk assessment in 2020-2021 and the 2021-2022 program years had a reduction in risk count or remained stable in risk count
- Members who did not earn an award had a higher proportion of high risk members (5+ risks) compared to reward tier earners; ACS (84.78%) had the largest percentage of Premium Rewards Program /Medal Level Status completions followed by Quentin Mease (83.33%), Admin (78.97%), Telecommute (76.77%), Ben Taub (73.33%), LBJ (72.95%). and CHC (69.73%)

• Employee Assistance Program

- 26.94 % Annualized impact rate of total serviced including member portal visits
- 7.15% total Annualized rate for Count of all EAP files
- 1,154 total participants in live EAP webinars during the 2021-2022 program year; an average of 175 people per webinar
- 4,018 total participants in EAP eLearning webinars during the 2021-2022 program year; an average of 105 people per webinar
- Counseling, was the top service type followed by Legal, financial, Work/Life services and Life Coaching.

Executive Summary

- **Behavioral Health (Cigna)**

- 17% of the population has a behavioral health diagnosis (including that which is managed by non-BH providers); these members drive 35% of plan spend
- Average number of behavioral health claimants increased 9.4% (total # of claimants =1,411)
- Members with a behavioral health diagnosis have 1.8x higher medical (PMPM) than members without a behavioral health diagnosis
- 76% of members with depression have >= 1 other comorbidity (weight is comorbidity in 80% of individuals)

- **Awards & Accolades:**

- Achieved the Platinum Gold Well Workplace Award from WELCOA in 2020 and again in 2023
- Achieved the Gold Level Workplace Health Achievement Award from the American Heart Association in 2017, 2018, 2019, 2020 and 2021.
- #1 Healthiest Employer Award in Texas in the 5,000-9,999 company Category in 2022, up from #6 in 2021
 - #1 in Houston in 2019 and #4 in 2018.
- Top 100 Healthiest Workplaces in America #1 in 2022, #45 in 2021, #6 in 2020, #2 in 2019 and #64 in 2018
- Cigna Healthy Workforce Designation Gold Level 2022; Received the Cigna Well-Being Award for Outstanding Culture of Well-Being in 2017-2021
- Achieved re-accreditation of the CEO Cancer Gold Standard 2012-2022
- Certificate of Excellence from Go Healthy Houston; Healthy At Work in 2017



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Executive Summary

- **Plan Costs:**
 - Active population medical trend plan spend increased 1.7% from \$529PMPM in prior program year to \$539 PMPM in the current period ending 8/2022.
 - Non-catastrophic spend increased 7.3% PMPM from \$388 to \$409 PMPM
 - Catastrophic claim spend decreased 12.5% PMPM from \$142 to \$130 PMPM
- **Program Enhancements For 2021-2022 Premium Rewards Program Year (September 2021-August 2022)**
 - Added non-medical plan participants to the Wellness Rewards Program. Non-medical plan participants are now able to complete the program requirements and earn Amazon eGift cards.
 - Expanded virtual programs, workshops, classes and healthy knowledge seminars to make programs and services more accessible.
 - Created 4 new wellness class series
 - Implemented 1 Fitbit Challenge and 1 HES Challenge
 - Continued with the Rx copay and deductible waiver for diabetes medications and supplies including insulin for individuals actively engaged in Livongo Diabetes Management Program. Brand medications are covered for medications in which no generic equivalents are available.
 - Continued with Rx copay and deductible waiver for generic Rx, brand Rx in which there are no generic equivalents are available, and supplies for individuals actively engaged in Livongo Hypertension Management Program
 - Expanded eLearning opportunities to enhance access to education for employees and spouses. Saba allows for an enhanced and aligned experience for both employees and spouses to participate in a mobile friendly, internet based application available from anywhere. Added all workshops, classes, healthy knowledge seminars and webinars to eLearning for easy accessibility.
 - Continued with tiered status rewards via Amazon eGift Cards to drive enhanced engagement in wellness and prevention beyond achievement of Wellness Rewards. Medical participants can earn \$1,200 in premium rewards and up to \$150 in Amazon eGift cards and Non-Medical participants can earn up to \$175 in Amazon eGift cards
 - Continued with discounts and subsidy on Fitbits to encourage physical activity and reduce risks Continued with tiered status rewards via Amazon eGift Cards to drive enhanced engagement in wellness and prevention beyond achievement of Wellness Rewards
 - Drive engagement in EAP to assist in mental and emotional well-being
 - Expanded onsite presence at clinics and offsite locations

Vision, Mission and Goal

Mission, Vision and Goal

- **Vision Statement:**

To Empower a corporate culture of health that inspires individuals to live with high energy, good health and passion for life.

- **Mission Statement:**

To maximize business performance by helping employees and their families live healthier, more fulfilling lives and empowering them with knowledge, skills and opportunities to achieve their personal health and wellness goals.

- **Goal:**

To be an industry leader in population health and productivity management among public academic healthcare systems.

2021-2022 Wellness Program Goals & Results

2021-2022 Wellness Goals

2021-2022 Wellness Program Goals (Program Year September 2021-August 2022)					
Indicators	Goal	Baseline Metric	Target Metric	Outcome	Trend
		2020-2021	2020-2021	2022-2023	
Leading indicator	Achieve 86% completion of the Health Assessment.	90.43%	Threshold: ≥ 84%	84.00%	↓ 6.43%
			Target: ≥86%		
			Superior: ≥ 88%		
Leading indicator	Achieve 80% EE and Spouse completion of a Annual Physical with Lab Values.	96.34%	Threshold: ≥ 70%	87.20%	↓ 9.14%
			Target: ≥80%		
			Superior: ≥ 82%		
Lagging Indicator	Maintain or Improve the Risk Stratification of the Cohort population.	71.00%	Threshold: < 65%	71.00%	→
			Target: ≥ 70%		
			Superior: ≥ 71%		
Leading indicator	Improve the average preventive care utilization of employees and spouses by 1%	89.25%	Threshold: ≥ 65%	84.53%	↓ 4.72%
			Target: ≥ 73%		
			Superior: ≥ 75%		
Leading indicator	Decrease the prevalence & distribution of pre-diabetes by 1%	28.00%	Threshold: ≥ 28%	32.20%	↑ 4.2%
			Target: ≤ 27%		
			Superior: < 26%		
Treatment & Intervention Indicators	Have 80% of participants earn the Wellness Premium Reward	82.02%	Threshold: ≥ 70%	80.08%	↓ 1.94%
			Target: ≥ 80%		
			Superior: ≥ 82%		
Treatment & Intervention Indicators	Achieve 83% employee satisfaction with wellness program.	89.16%	Threshold: ≥ 60%	85.77%	↓ 3.39%
			Target: ≥ 83%		
			Superior: ≥ 85%		
Treatment & Intervention Indicators	Have 85% of employees agree that Harris Health cares about its employees.	89.72%	Threshold: ≥ 80%	87.57%	↓ 2.15%
			Target: ≥ 85%		
			Superior: ≥ 86%		
Treatment & Intervention Indicators	Have 85% of employees agree that there is a culture of health at Harris Health.	88.75%	Threshold: ≥ 75%	84.67%	↓ 4.08%
			Target: ≥ 85%		
			Superior: ≥ 86%		

Key:			
Below Threshold	Threshold	Target	Superior

2021-2022 Wellness Goals

2021-2022 Wellness Program Goals (Program Year September 2021-August 2022)					
Indicators	Goal	Baseline Metric	Target Metric	Outcome	Trend
		2020-2021	2020-2021	2022-2023	
Treatment & Intervention Indicators	Have 55% of Diabetics engaged in Livongo.	55.00%	Threshold: ≥ 44% Target: ≥ 55% Superior: ≥ 56%	55.00%	→
Treatment & Intervention Indicators	Have 45% of people with Hypertension enrolled in the Livongo Hypertension Management Program.	45.00%	Threshold: ≥ 20% Target: ≥ 45% Superior: ≥ 50%	49.00%	↓ 4.00%
Treatment & Intervention Indicators	Have 20% of pre-diabetics enrolled in the Livongo Diabetes Prevention Program.	19.00%	Threshold: ≥ 18% Target: ≥ 20% Superior: ≥ 22%	31.00%	↑ 12%
Treatment & Intervention Indicators	Increase participation in Employee Wellness Programs by 2%	409,529	Threshold: ≥ 409,529 UOS Target: ≥ 417,719 UOS Superior: > 421,815 UOS	395,502	↓ 14,027
Lagging Indicator	Achieve a 1% reduction in the percentage of people who have an undesirable waist circumference.	38.00%	Threshold: > 38% Target: ≤ 37% Superior: ≤ 36%	46.00%	↑ 8.0%
Lagging Indicator	Achieve a 1% reduction in the percentage of people have "at risk" or "high" blood pressure.	34.00%	Threshold: ≤ 38% Target: ≤ 35% Superior: ≤ 34%	33.00%	↓ 1.0%
Lagging Indicator	Achieve a 1% reduction in the percentage of people that are "at risk" or "high" risk for physical activity.	72.40%	Threshold: < 73% Target: ≤ 71% Superior: ≤ 70%	73.20%	↑ 0.8%
Lagging Indicator	Achieve a 1% reduction in the percentage of people that are "at risk" or "high" risk for glucose.	25.50%	Threshold: < 26% Target: ≤ 24.5% Superior: ≤ 23.5%	27.00%	↑ 1.5%
Lagging Indicator	Achieve 4 Industry award(s) for a quality health promotion program.	6 Recognitions/Awards	Threshold: Achieve 3 Awards Target: Achieve 4 Awards Superior: Achieve ≥ 5 Awards	7 Recognitions/Awards	↑ 1

Key:

Below Threshold	Threshold	Target	Superior
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Employee Wellness Team

Employee Wellness Team

Team Member	Credentials	Years of Experience	Department	Job Title	Office	Roles/ Responsibilities	Email
Michele Hunnicutt	MSHP, CHES, CWWPC, CWCC	27	Employee Wellness; HR	Director, Employee Wellness & EAP	346-426-0437	Director, strategic & Operational Planning, implementation, Evaluation	Michele.Hunnicutt@harrishealth.org
Ellen Ogedegbe	M.Ed., CHES, CWC, CBES	11	Employee Wellness; HR	Employee Wellness Coordinator	346-426-0235	Health Educator, Wellness Coordinator, Health Coach, Communications, Fitbit Lactation Room, Program & Event & Choose Healthier program Coordinator	Ellen.Ogedegbe@harrishealth.org
Alexis Williams	MS, CHES	3	Employee Wellness; HR	Employee Wellness Coordinator	346-426-1181	Health Educator, Wellness Coordinator, Group Exercise & Recreational Sports Coordinator, Program & Event Coordinator	Alexis.Williams6@harrishealth.org
Courtney Karam	MPH, CHES	8	Employee Wellness; HR	Senior Employee Wellness Coordinator	346-426-0238	Health Educator, Wellness Coordinator, Wellness Champ Coordinator, Communications & Database administrator	Courtney.Karam@harrishealth.org
Leah Campbell	MA	16	Employee Wellness; HR-Cigna Dedicated Employee	Client Engagement Manager	713-566-6320	Health Educator, Wellness Program & Event Coordinator, Cigna team and service coordinator	Leah.Campbell@cigna.com
Latecia Murphy	MEd, RN, BSN, CHES	23	Employee Wellness; HR-Cigna Onsite Employee	Cigna Onsite RN Health Coach	713-873-6407	Onsite and telephonic health coaching, biometric screenings, health education, Wellness Program & Event Coordinator	Latecia.Murphy@harrishealth.org ;
Crystal Cunningham		12	Employee Wellness; HR-Cigna Dedicated Employee	Cigna Client Service Partner	713-566-4391	Customer Service, Claims and Wellness Assistance, Benefit & Wellness Advocate, Wellness Data entry	harrishealth@cigna.com

Our Strategy

Our Strategy

- Keep healthy people healthy
- Stop people from getting worse
 - Reduce risks and manage chronic conditions
- Improve organizational and individual health and well-being
 - Reduce medical trend
 - Attract and retain talent
 - Increase productivity and performance

A Look At Harris Health System

A Look At Harris Health System

- **Demographics:**

– Employees:	9,925	
• Full time:	8,865	89.3%
• Part time:	159	1.6%
• Supplemental:	901	9.1%

- **Gender:**

– Female	7,373	74.3%
– Male	2,550	25.7%
– Unanswered	2	<1%
– Average Age:	43	

- **Ethnicity:**

– Black or African American	4,207	42.4%
– Hispanic/Latino	2,760	27.8%
– Asian/Asian American	1,775	17.9%
– White	1,170	11.8%
– American Indian/Alaska Native	13	<1%

- **Medical Plan Status:**

• All Employees Enrolled:	9,901
• Employees Only Enrolled:	4,724
• Active Spouses:	1,755
• Employee + Child:	2,212
• Family:	1,210

- **Average Hourly Rate (Salaried and Hourly Combined):**

• FT/PT:	\$37.90
• Supplemental:	\$34.26
• All Active (FT/PT/Sup):	\$37.56

- **Turnover (Regular HHS Employees Only):**

• 2018:	14.32%
• 2019 :	15.67%
• 2020:	14.08%
• 2021:	18.39%
• 2022:	19.40%

Employee Wellness Programs & Resources Overview

Programs & Resources

- ❑ **Get Fit**
 - Group Fitness Classes
 - Recreational Sports & Events
 - Gym Discounts
 - Cigna online, telephonic and in-person wellness coaching
 - Wellness Challenges
 - Cigna Apps and Activities
 - Cigna Active & Fit Direct-fitness, gym, class & program discounts
 - Fitbit Device Subsidy
 - Fitbit Dashboard
 - Special Events: Texas MS 150, American Heart Walk, HESS Houston Corporate 5k, Field Day, Texas Med Center Run, Poker Walks, Get Your Rear in Gear, March For Babies and many more
- ❑ **Eat Well**
 - Wondr Health™
 - Choose Healthier
 - Healthy Cooking Classes
 - Cigna Nutrition coaching
 - Eat Better Online Coaching Program
- ❑ **Staying Healthy**
 - Wellness Challenges
 - Healthy Knowledge Seminars
 - Employee Wellness Workshops
 - Healthy cooking classes
 - Online health assessments
 - Cigna online, telephonic and in-person wellness coaching
 - Newsletters and outreach
 - Special events
 - “Explore and Learn” booths
 - MyCigna.com
 - Well Powered Living Class Series (1.0, 2.0, 3.0, 4.0)
 - Livongo Diabetes Prevention Program
 - Ergonomics 101 Class Series & ergonomic assessments
- ❑ **Growing Your Family**
 - Healthy Living: Pregnancy & Beyond
 - Cigna “Healthy Pregnancy, Healthy Baby”
 - Onsite Lactation Rooms
- ❑ **Losing Weight**
 - Wondr Health™
 - HealthyWage Team Challenge
 - Cigna weight management coaching
 - “Maintain Don’t Gain” challenge
- ❑ **Quitting Tobacco**
 - Smoking Cessation Challenge
 - Cigna Tobacco Cessation Coaching (online & telephonic)
 - Great American Smokeout
- ❑ **Relieving Stress & Building Resiliency**
 - Cigna online, telephonic and in-person wellness coaching
 - EAP
 - Healthy Knowledge Seminars and Workshops
 - Relaxathon
- ❑ **Managing Health Conditions**
 - Cigna online, telephonic and in-person chronic condition coaching
 - Diabetes, Asthma, COPD, Heart Disease, Heart Failure
 - Livongo Diabetes Management Program
 - Livongo Hypertension Management Program
 - Wondr Health™ (Pre-Diabetes and Metabolic Syndrome)
 - Special events
 - Nutrition Counseling for participants with Diabetes and/or Hypertension
 - HbA1c testing for Diabetics
 - Free medications for participants in the Livongo Diabetes Management Program & Livongo Hypertension Management Program who meet monthly testing requirements
- ❑ **Rewards**
 - Premium Rewards Program
 - Amazon eGiftcards for status level achievement
 - Harris Health Rewards for Wellness Champions

Employee Wellness Engagement

Wellness Program Summary

84%

Of Premium Reward-eligible participants completed a Health Assessment

78.69% of all eligible participants completed a Health Assessment

87.2%

Of Premium Reward-eligible participants completed an Annual Physical

81.89% of all eligible participants completed an Annual Physical

80.08% *

Of Employees & Spouses Earned Premium Rewards

(77.63% earned full reward; 2.45% earned partial reward.)

71%

Of eligible participants reduced risks or remained in the same risk category

*Includes full program-year participants September 2021 – August 2022.

Wellness Rewards Program

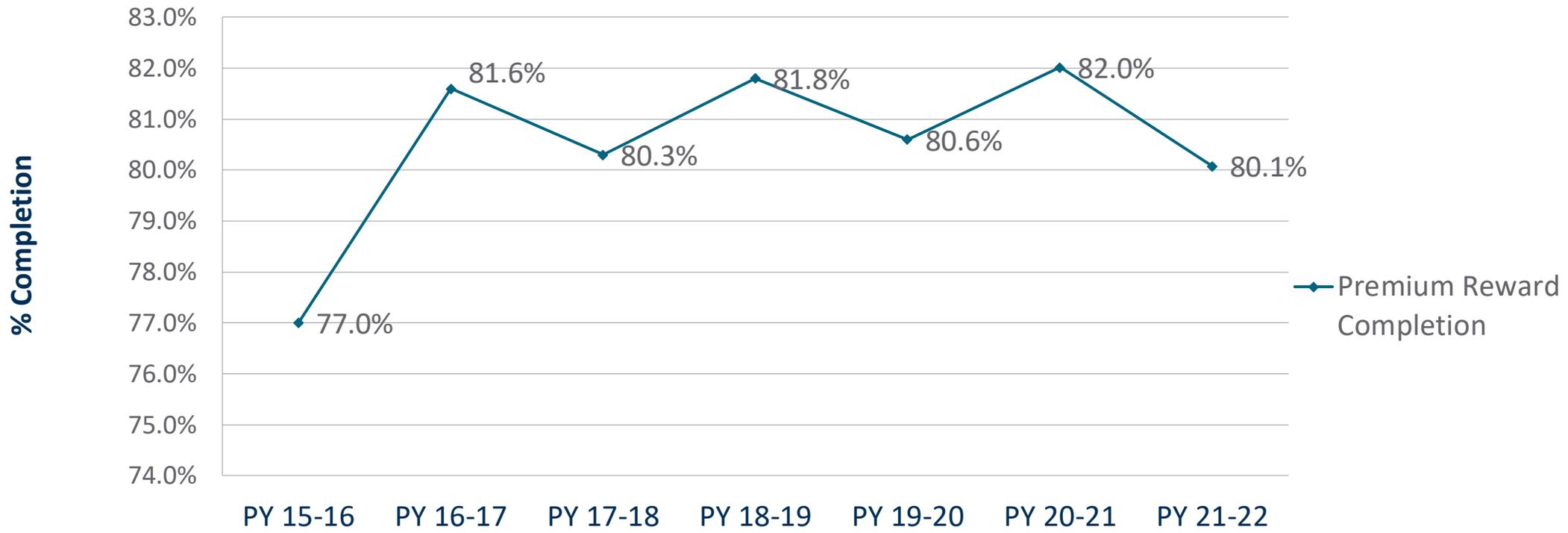
2021-2022 Wellness Rewards Program

Level of Engagement	September 2021-August 2022 Wellness Rewards Program	
	Premium Reward-Eligible Participants Employees & Covered spouses 9/1/21-8/31/22	All Wellness Program-Eligible Participants All FT & PT employees on and off of the medical plan and spouses on the medical plan 9/1/21-8/31/22
Full Engagement -For Premium Rewards-Both Employee and covered spouse completed the Annual Physical with Lab Work, Health Assessment, & earned 1,000 points -For All Wellness Program Participants-Meet completion requirements including Annual Physical with Lab Work, Health Assessment, & earned 1,000 points	77.63%*	73.11%
Partial Engagement (Only one person completed the Annual Physical with Lab Work, Health Assessment, & earned 1,000 points)	2.45%*	N/A (everyone is counted as individuals so either they are complete or incomplete)
No Wellness (Employee and/or Employee and covered spouse did not complete all requirements)	19.92%	26.89%

- The total Wellness Premium Reward Population includes regular, full-time and part-time employees on the medical plan (7,621) and spouses (1,456) on the medical plan with a hire or coverage date from September 1, 2021 – April 30, 2022
 - 80.08% of employees and covered spouses earned Premium Rewards; 77.63% earned full reward and 2.45% earned partial reward.
 - 79.19% of participants earned Bronze level Rewards, 5.41% earned Gold and 15.41% earned Platinum Rewards
- The total eligible Wellness Reward Population includes all regular, full-time and part-time employees, on and off of the medical plan, (8,284) and spouses on the medical plan (1,456) with a hire or coverage date from September 1, 2021 – April 30, 2022
 - 73.11% of all employees and spouses met full completion requirements and 26.89% were incomplete
 - 79.20% of participants earned Bronze level Rewards, 5.42% earned Gold and 15.38% earned Platinum Rewards

Wellness Rewards Program

Wellness Program Reward Completion by Program Year



Wellness Program Year:

- PY 2015-2016 Premium Rewards Program: Ended 8/31/16 (Employee Only): Health Assessment, Biometrics, one wellness activity
- PY 2016-2017 Premium Rewards Program: 9/1/16 – 8/31/17 (Employee Only): Annual Physical with Lab Work, Health Assessment, & 1,000 points)
- PY 2017-2018 Premium Rewards Program: 9/1/17 – 8/31/18 (Employee & Covered Spouse): Annual Physical with Lab Work, Health Assessment, & 1,000 points
- PY 2018-2019 Premium Rewards Program: 9/1/18 – 8/31/19 (Employee & Covered Spouse): Annual Physical with Lab Work, Health Assessment, & 1,000 points
- PY 2019-2020 Premium Rewards Program: 9/1/19 – 8/31/20 (Employee & Covered Spouse): Annual Physical with Lab Work (or 250 points through other programs & activities), Health Assessment, & a total of 1,000 points (Covid-19 pandemic)
- PY 2020-2021 Premium Rewards Program: : 9/1/20 – 8/31/21 (Employee & Covered Spouse): Annual Physical with Lab Work, Health Assessment, & 1,000 points
- PY 2021-2022 Wellness Rewards Program: : 9/1/21 – 8/31/22 (Employee & Covered Spouse): Annual Physical with Lab Work, Health Assessment, & 1,000 points

Data source: Premium Rewards Reports: PY 2021-2022, 2020-2021, 2019-2020, 2018-2019, 2017-2018 and 2016-2017 Tiered Benefits Report; 2021-2022 Wellness Scorecard

System-Level Engagement

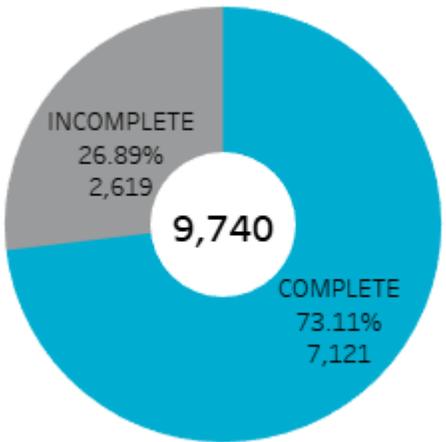
System-Level Program Completion Summary

Wellness Program-Eligible Population

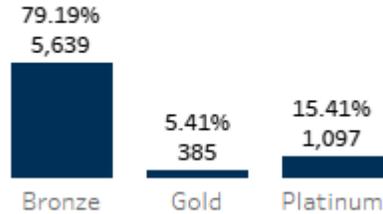
Program-Eligible Population = Regular, full-time and part-time employees (on and off of the medical plan) and spouses on the medical plan with a hire or coverage date from September 1, 2021 – April 30, 2022

Completion status and medal level are individual designations for eligible employees and spouses. Since premium rates consider employees and spouses combined, the Employee Premium Rates graph only includes employees.

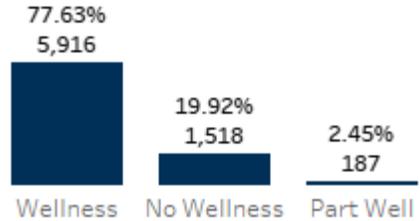
921 employees automatically received the wellness rate and were exempt from participating in the program due to their coverage or hire date after April 30, 2022. These employees are not included in the completion information.



Medal Levels for Completed Participants



Employee Premium Rates



System-Level Program Completion Summary

Wellness Program-Eligible Population (n = 9,740)

Eligible Population	
EE	8284
SP	1456
Total	9740

2021 – 2022 Completion Status for Program-Eligible Population (n = 9,740)				
	EE	SP	Total #	Total %
Incomplete	2172	447	2619	26.89%
Complete	6112	1009	7121	73.11%
Bronze	4789	850	5639	79.19%
Gold	339	46	385	5.41%
Platinum	984	113	1097	15.41%
TOTAL	8284	1456	9740	100.00%

HRA Breakdown for Program-Eligible Population (n = 9,740)				
	EE	SP	Total #	Total %
Complete	6561	1103	7664	78.69%
Incomplete	1723	353	2076	21.31%
TOTAL	8284	1456	9740	100.00%

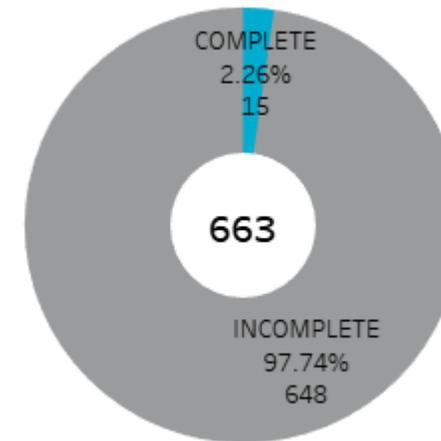
Physicals Breakdown for Program-Eligible Population (n = 9,740)				
	EE	SP	Total #	Total %
Complete	6746	1230	7976	81.89%
Incomplete	1538	226	1764	18.11%
TOTAL	8284	1456	9740	100.00%

System-Level Program Completion Summary

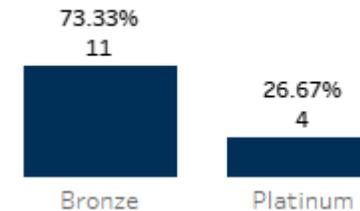
Program-Eligible Population (Non-Medical Plan)

Program-Eligible Population = Regular, full-time and part-time employees (on and off of the medical plan) and spouses on the medical plan with a hire or coverage date from September 1, 2021 – April 30, 2022

This was the first year including employees not enrolled in the medical plan in the Healthy@Harris Rewards Program. Non-medical plan participants are eligible for gift cards instead of the premium reward.



Medal Levels for Completed Participants



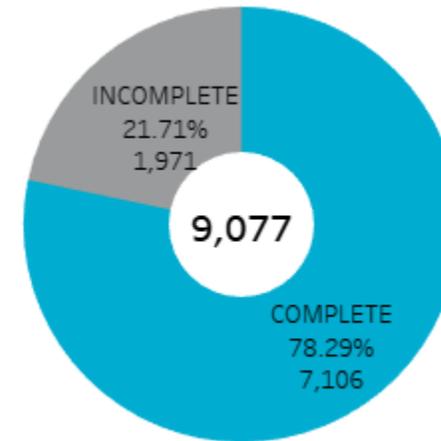
System-Level Program Completion Summary

Wellness Premium Reward-Eligible Population

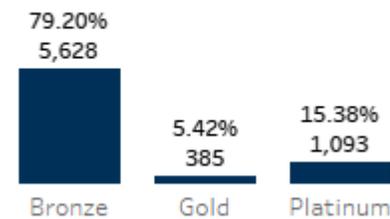
Premium Reward-Eligible Population = Regular, full-time and part-time employees on the medical plan and spouses on the medical plan with a hire or coverage date from September 1, 2021 – April 30, 2022

Completion status and medal level are individual designations for eligible employees and spouses. Since premium rates consider employees and spouses combined, the Employee Premium Rates graph only includes employees.

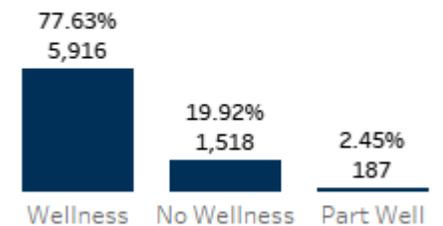
921 employees automatically received the wellness rate and were exempt from participating in the program due to their coverage or hire date after April 30, 2022. These employees are not included in the completion information.



Medal Levels for Completed Participants



Employee Premium Rates



System-Level Program Completion Summary

Wellness Premium Reward-Eligible Population (n = 9,077)

Premium Reward-Eligible Population	
EE	7621
SP	1456
Total	9077

2021 – 2022 Completion Status for Premium-Reward Eligible Population (n = 9,077)				
	EE	SP	Total #	Total %
Incomplete	1524	447	1971	21.71%
Complete	6097	1009	7106	78.29%
Bronze	4778	850	5628	79.20%
Gold	339	46	385	5.42%
Platinum	980	113	1093	15.38%
TOTAL	7621	1456	9077	100.00%

HRA Breakdown for Premium-Reward Eligible Population (n = 9,077)				
	EE	SP	Total #	Total %
Complete	6522	1103	7625	84.00%
Incomplete	1099	353	1452	16.00%
TOTAL	7621	1456	9077	100.00%

Physicals Breakdown for Premium-Reward Eligible Population (n = 9,077)				
	EE	SP	Total #	Total %
Complete	6685	1230	7915	87.20%
Incomplete	936	226	1162	12.80%
TOTAL	7621	1456	9077	100.00%

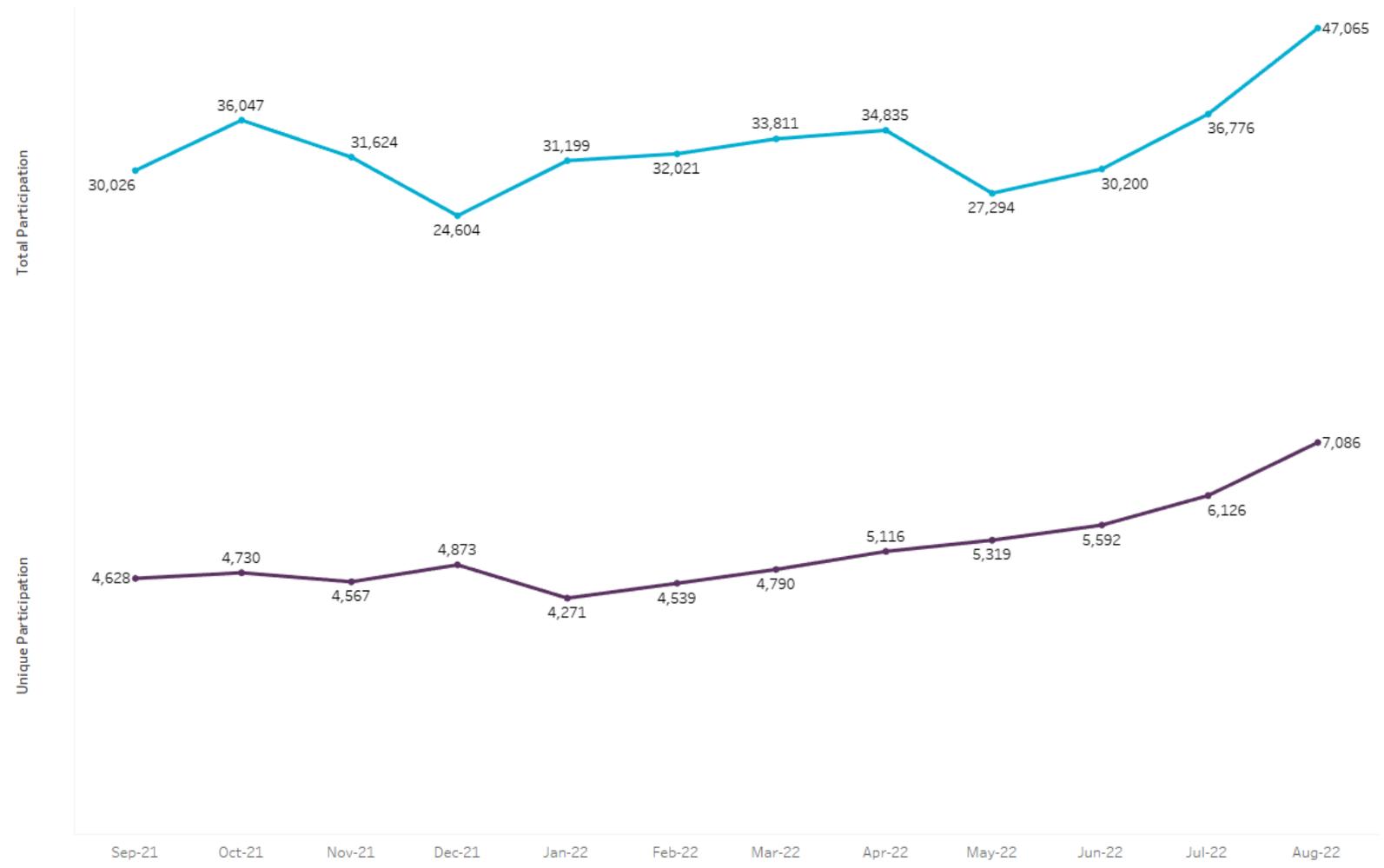
System-Level Program Participation Summary

Total Units of Service

Total Activities	23,353
Total Participation	395,502
Total Unique Participation	12,397
% Engaged	78.48%

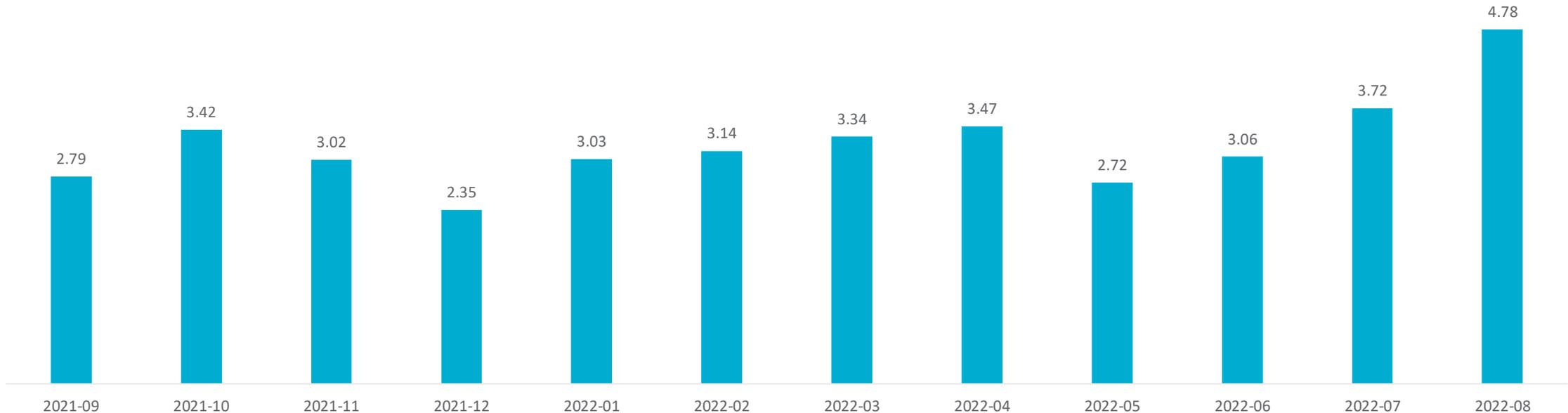
*Total Activities is calculated by counting the number of dates for completed activities. It is higher for on-demand activities that can be completed on any date (ex. eLearning). It is lower for activities where there are multiple times offered within each date (ex. In-Person Employee Wellness Classes).

Total Participation includes all participants, including participants who participated multiple times in the same activity.



System-Level Program Participation Summary

Average Number of Activities per Program-Eligible Participant per Month
(n = 9,740)



System-Level Program Participation Summary

Engaged Participants
12,397 78.48%

Highly Engaged Participants
7,491 47.42%

Average Number of Activities
 per Engaged Participant
31.90

Participation by Activity Category

Wellness Category	Total Activities	Total Participation	Total Unique Participation	% Engaged
Education	15,076	90,186	5,812	36.79%
Evaluation	43	1,151	1,115	7.06%
Health Coaching	570	1,592	1,002	6.34%
Healthy Living Program	967	17,629	2,651	16.78%
Healthy Measures	1,572	21,732	8,239	52.16%
Maternity Support	71	85	80	0.51%
One-on-One Sessions with an Expert	52	122	119	0.75%
Physical Activity	1,842	216,128	4,282	27.11%
Preventive Health	3,010	40,997	11,358	71.90%
Special Event	105	5,087	3,638	23.03%
Wellness Challenge	1	12	12	0.08%
Wellness Champions	44	781	47	0.30%
Grand Total	23,353	395,502	12,397	78.48%

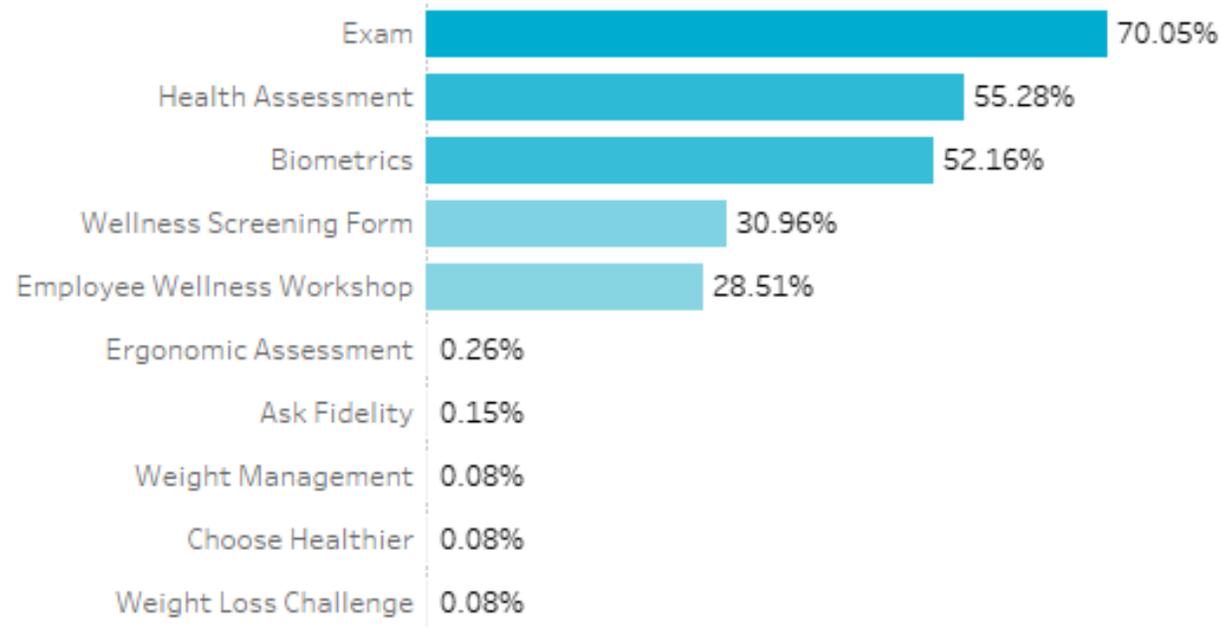
System-Level Program Participation Summary

Activity Types with Highest and Lowest Engagement (YTD % Engaged)

Change the numbers in the Highest N and Lowest N fields below to adjust the rankings shown in the chart.

Highest N

Lowest N



Note: There are 503 participants with no location assigned as it was unavailable in reporting. These participants are included in the system-wide reporting.

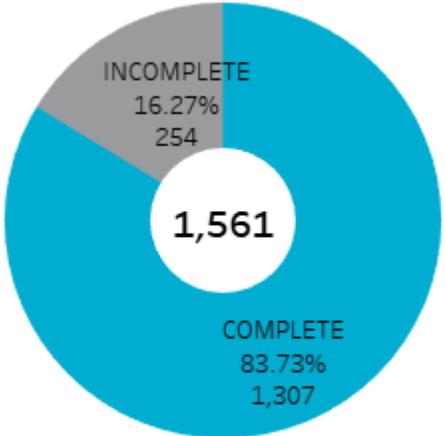
ACS Engagement

ACS Program Completion Summary

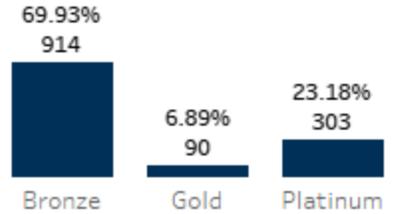
Wellness Program-Eligible Population

Program-Eligible Population = Regular, full-time and part-time employees (on and off of the medical plan) and spouses on the medical plan with a hire or coverage date from September 1, 2021 – April 30, 2022

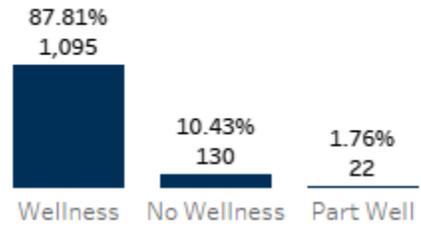
Completion status and medal level are individual designations for eligible employees and spouses. Since premium rates consider employees and spouses combined, the Employee Premium Rates graph only includes employees.



Medal Levels for Completed Participants



Employee Premium Rates

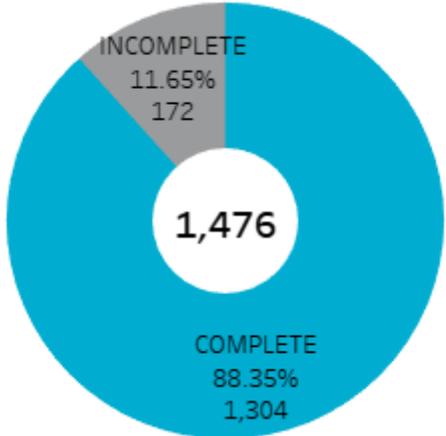


ACS Program Completion Summary

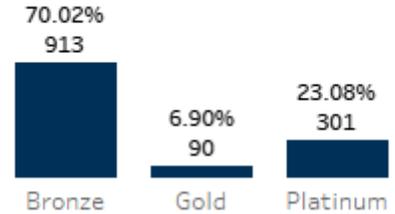
Wellness Premium Reward-Eligible Population

Premium Reward-Eligible Population = Regular, full-time and part-time employees on the medical plan and spouses on the medical plan with a hire or coverage date from September 1, 2021 – April 30, 2022

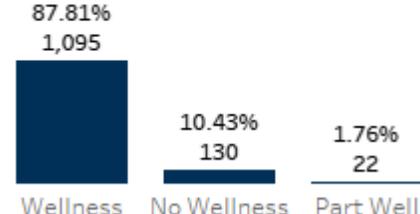
Completion status and medal level are individual designations for eligible employees and spouses. Since premium rates consider employees and spouses combined, the Employee Premium Rates graph only includes employees.



Medal Levels for Completed Participants



Employee Premium Rates



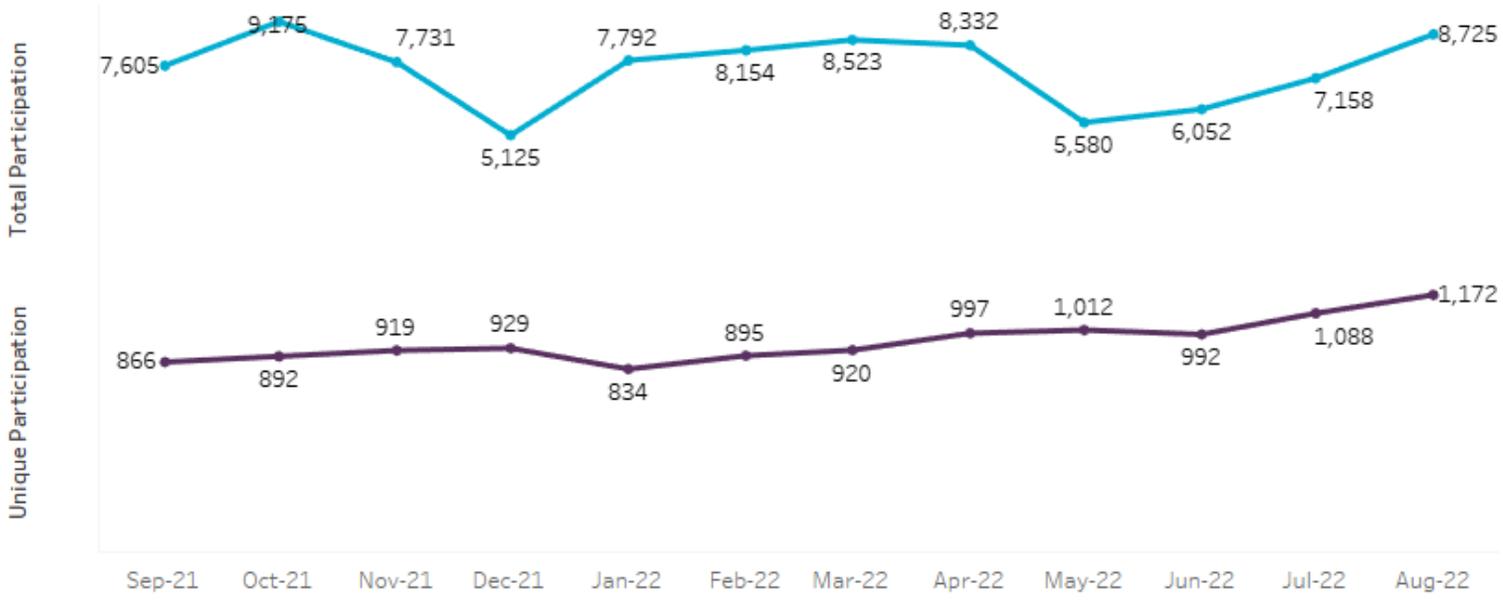
ACS Program Participation Summary

Total Units of Service

Total Activities	9,364
Total Participation	89,952
Total Unique Participation	1,860
% Engaged	11.77%

*Total Activities is calculated by counting the number of dates for completed activities. It is higher for on-demand activities that can be completed on any date (ex. eLearning). It is lower for activities where there are multiple times offered within each date (ex. In-Person Employee Wellness Classes).

Total Participation includes all participants, including participants who participated multiple times in the same activity.



ACS Program Participation Summary

Engaged Participants
 1,860 11.77%

Highly Engaged Participants
 1,402 8.88%

Average Number of Activities per Engaged Participant
 48.36

*Engaged participants completed at least 1 wellness activity. Highly engaged participants completed 9 or more wellness activities. The percentage is out of the total population.

Participation by Activity Category

Wellness Category	Total Activities	Total Participation	Total Unique Participation	% Engaged
Education	4,437	24,977	1,167	7.39%
Evaluation	31	252	246	1.56%
Health Coaching	210	310	195	1.23%
Healthy Living Program	372	3,379	506	3.20%
Healthy Measures	1,117	3,597	1,354	8.57%
Maternity Support	13	13	11	0.07%
One-on-One Sessions with an Expert	11	40	40	0.25%
Physical Activity	948	48,942	913	5.78%
Preventive Health	2,118	6,857	1,733	10.97%
Special Event	64	1,396	913	5.78%
Wellness Challenge	1	1	1	0.01%
Wellness Champions	42	188	13	0.08%
Grand Total	9,364	89,952	1,860	11.77%

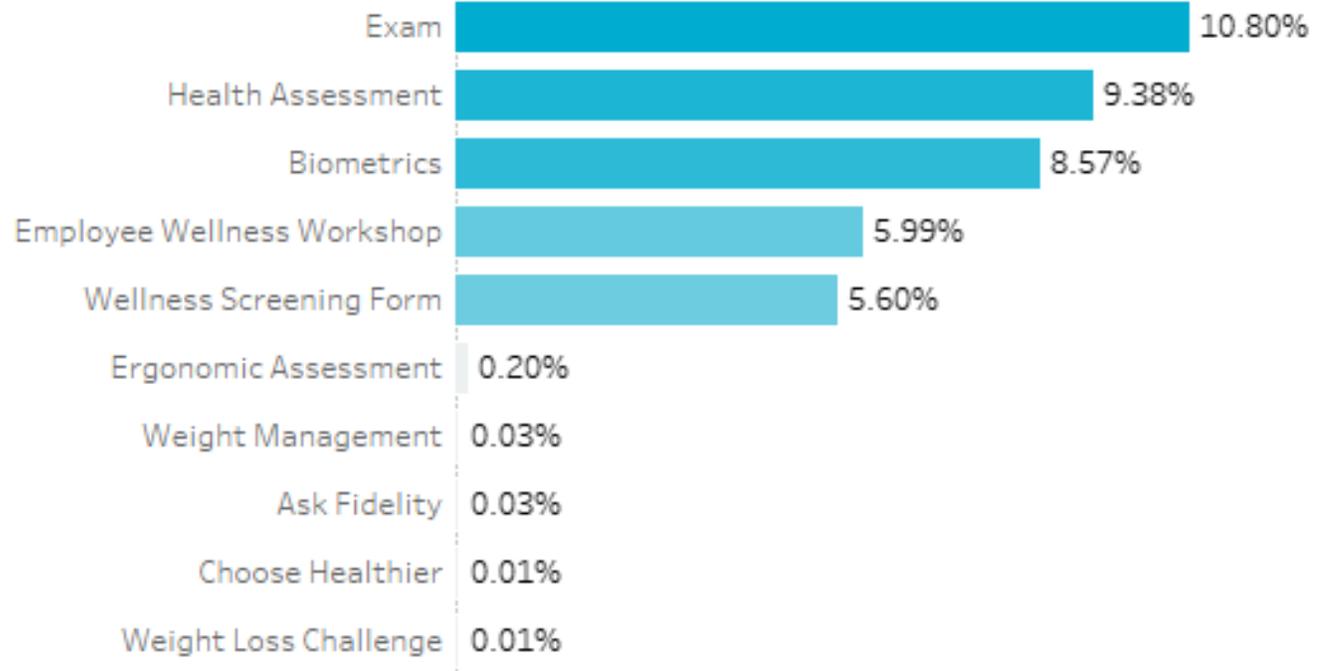
ACS Program Participation Summary

Activity Types with Highest and Lowest Engagement (YTD % Engaged)

Change the numbers in the Highest N and Lowest N fields below to adjust the rankings shown in the chart.

Highest N

Lowest N



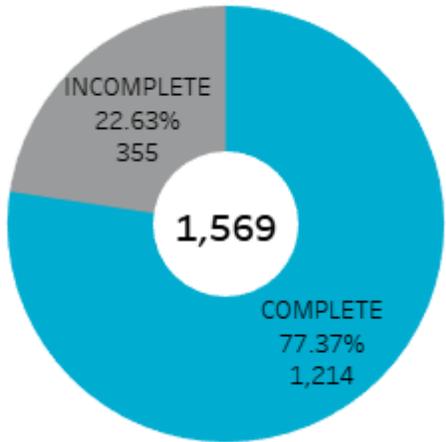
Administration Engagement

Administration Program Completion Summary

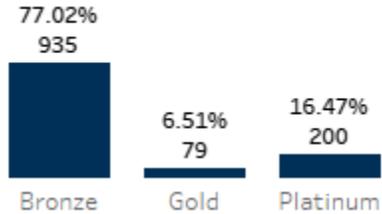
Wellness Program-Eligible Population

Program-Eligible Population = Regular, full-time and part-time employees (on and off of the medical plan) and spouses on the medical plan with a hire or coverage date from September 1, 2021 – April 30, 2022

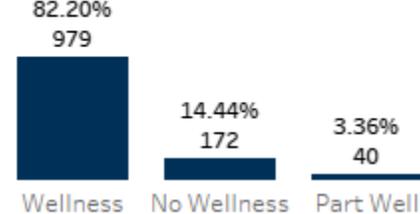
Completion status and medal level are individual designations for eligible employees and spouses. Since premium rates consider employees and spouses combined, the Employee Premium Rates graph only includes employees.



Medal Levels for Completed Participants



Employee Premium Rates

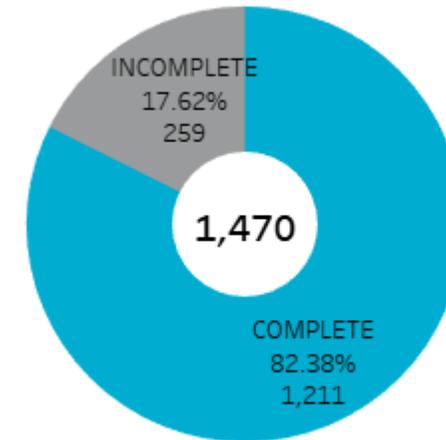


Administration Program Completion Summary

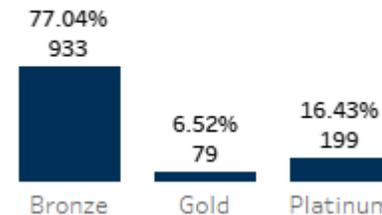
Wellness Premium Reward-Eligible Population

Premium Reward-Eligible Population = Regular, full-time and part-time employees on the medical plan and spouses on the medical plan with a hire or coverage date from September 1, 2021 – April 30, 2022

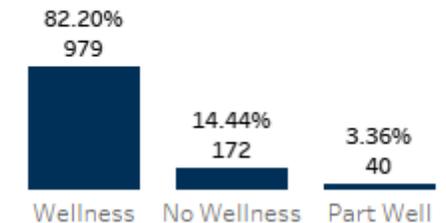
Completion status and medal level are individual designations for eligible employees and spouses. Since premium rates consider employees and spouses combined, the Employee Premium Rates graph only includes employees.



Medal Levels for Completed Participants



Employee Premium Rates



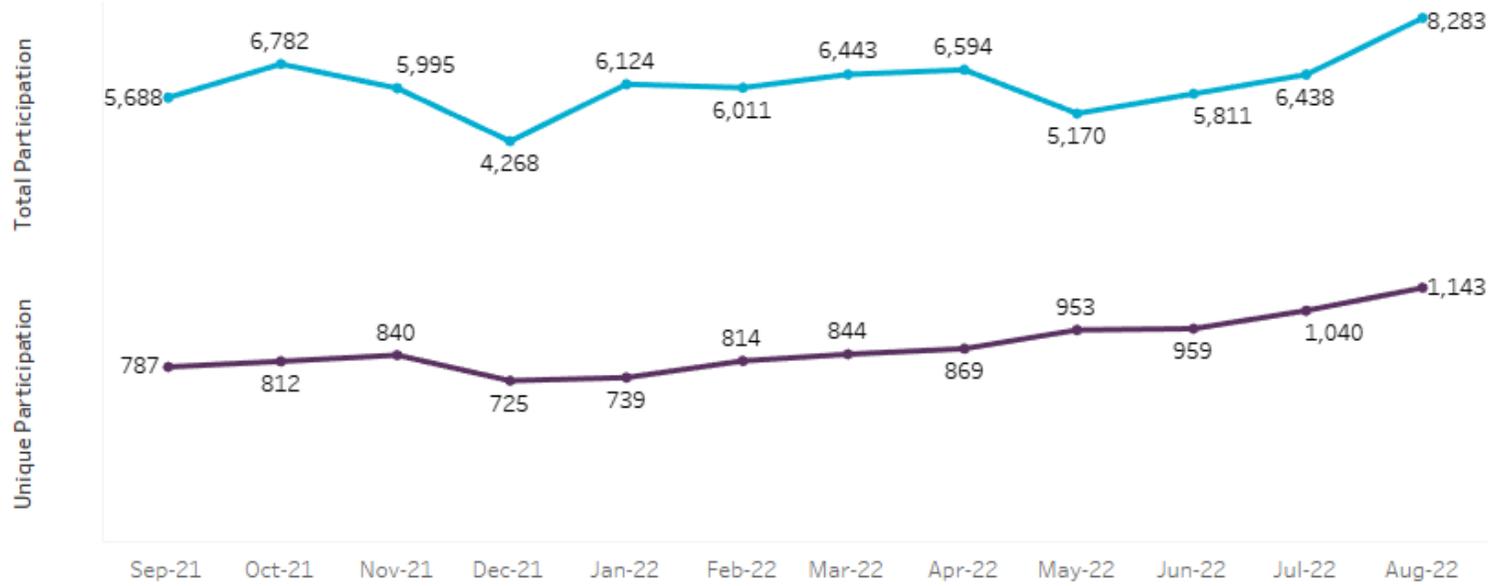
Administration Program Participation Summary

Total Units of Service

Total Activities	8,264
Total Participation	73,607
Total Unique Participation	1,869
% Engaged	11.83%

*Total Activities is calculated by counting the number of dates for completed activities. It is higher for on-demand activities that can be completed on any date (ex. eLearning). It is lower for activities where there are multiple times offered within each date (ex. In-Person Employee Wellness Classes).

Total Participation includes all participants, including participants who participated multiple times in the same activity.



Administration Program Participation Summary

Engaged Participants
 1,869 11.83%

Highly Engaged Participants
 1,278 8.09%

Average Number of Activities per Engaged Participant
 39.38

*Engaged participants completed at least 1 wellness activity. Highly engaged participants completed 9 or more wellness activities. The percentage is out of the total population.

Participation by Activity Category

Wellness Category	Total Activities	Total Participation	Total Unique Participation	% Engaged
Education	3,532	15,244	1,001	6.34%
Evaluation	31	288	269	1.70%
Health Coaching	182	224	148	0.94%
Healthy Living Program	266	2,780	427	2.70%
Healthy Measures	1,071	3,512	1,304	8.25%
Maternity Support	11	13	13	0.08%
One-on-One Sessions with an Expert	29	42	40	0.25%
Physical Activity	918	43,498	810	5.13%
Preventive Health	2,117	6,766	1,697	10.74%
Special Event	64	1,000	662	4.19%
Wellness Champions	43	240	12	0.08%
Grand Total	8,264	73,607	1,869	11.83%

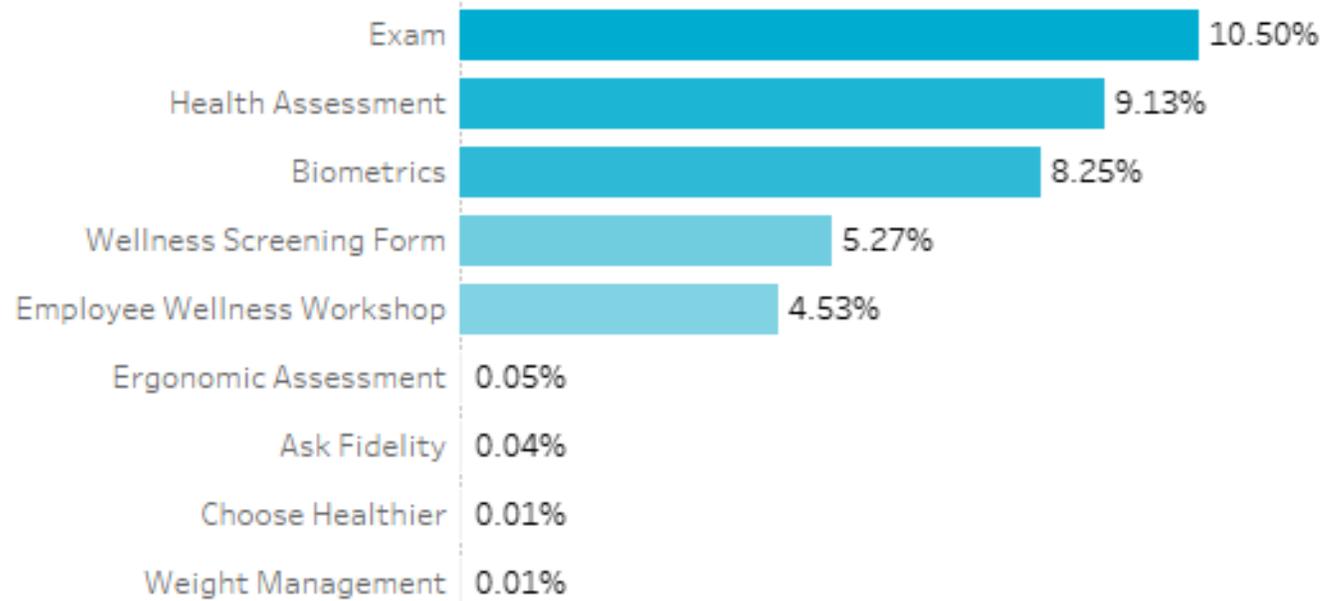
Administration Program Participation Summary

Activity Types with Highest and Lowest Engagement (YTD % Engaged)

Change the numbers in the Highest N and Lowest N fields below to adjust the rankings shown in the chart.

Highest N

Lowest N



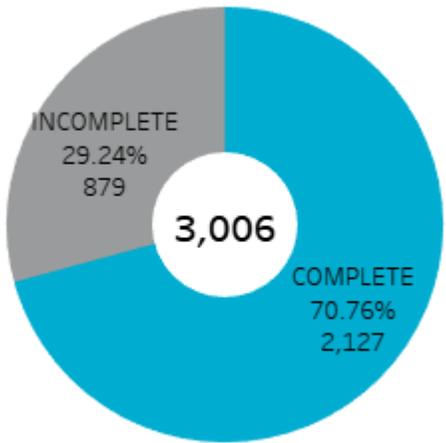
Ben Taub Engagement

Ben Taub Program Completion Summary

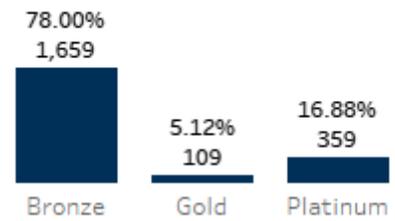
Wellness Program-Eligible Population

Program-Eligible Population = Regular, full-time and part-time employees (on and off of the medical plan) and spouses on the medical plan with a hire or coverage date from September 1, 2021 – April 30, 2022

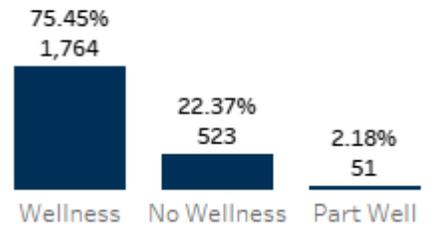
Completion status and medal level are individual designations for eligible employees and spouses. Since premium rates consider employees and spouses combined, the Employee Premium Rates graph only includes employees.



Medal Levels for Completed Participants



Employee Premium Rates

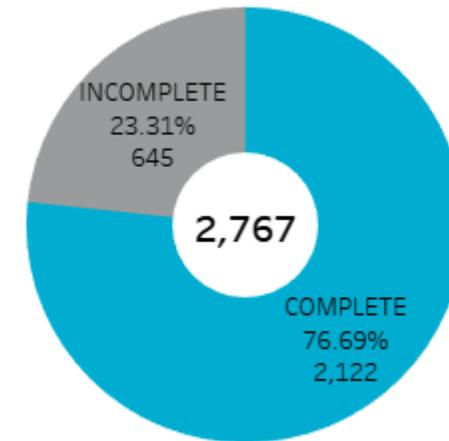


Ben Taub Program Completion Summary

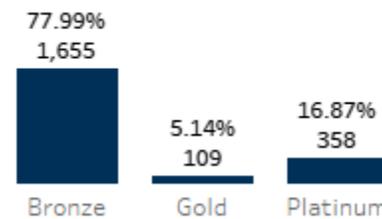
Wellness Premium Reward-Eligible Population

Premium Reward-Eligible Population = Regular, full-time and part-time employees on the medical plan and spouses on the medical plan with a hire or coverage date from September 1, 2021 – April 30, 2022

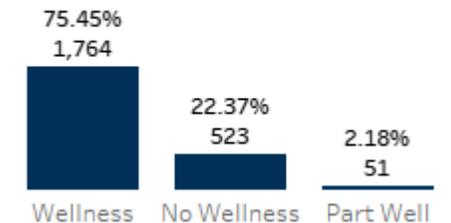
Completion status and medal level are individual designations for eligible employees and spouses. Since premium rates consider employees and spouses combined, the Employee Premium Rates graph only includes employees.



Medal Levels for Completed Participants



Employee Premium Rates



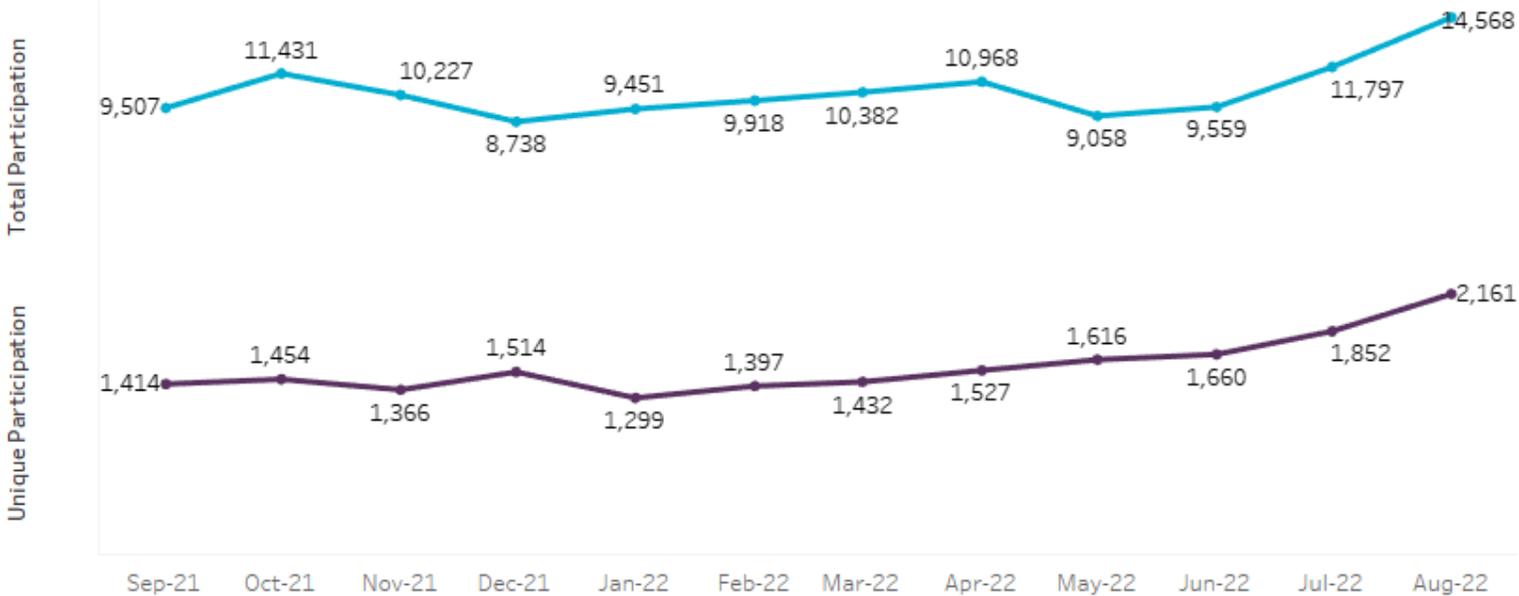
Ben Taub Program Participation Summary

Total Units of Service

Total Activities	15,774
Total Participation	125,604
Total Unique Participation	3,693
% Engaged	23.38%

*Total Activities is calculated by counting the number of dates for completed activities. It is higher for on-demand activities that can be completed on any date (ex. eLearning). It is lower for activities where there are multiple times offered within each date (ex. In-Person Employee Wellness Classes).

Total Participation includes all participants, including participants who participated multiple times in the same activity.



Ben Taub Program Participation Summary

Engaged Participants

3,693 23.38%

Highly Engaged Participants

2,287 14.48%

Average Number of Activities per Engaged Participant

34.01

*Engaged participants completed at least 1 wellness activity. Highly engaged participants completed 9 or more wellness activities. The percentage is out of the total population.

Participation by Activity Category

Wellness Category	Total Activities	Total Participation	Total Unique Participation	% Engaged
Education	9,741	25,253	1,706	10.80%
Evaluation	34	290	283	1.79%
Health Coaching	303	459	275	1.74%
Healthy Living Program	428	5,375	770	4.87%
Healthy Measures	1,284	7,077	2,611	16.53%
Maternity Support	23	25	24	0.15%
One-on-One Sessions with an Expert	15	18	17	0.11%
Physical Activity	1,326	73,428	1,347	8.53%
Preventive Health	2,512	12,312	3,387	21.44%
Special Event	70	1,268	968	6.13%
Wellness Champions	38	99	6	0.04%
Grand Total	15,774	125,604	3,693	23.38%

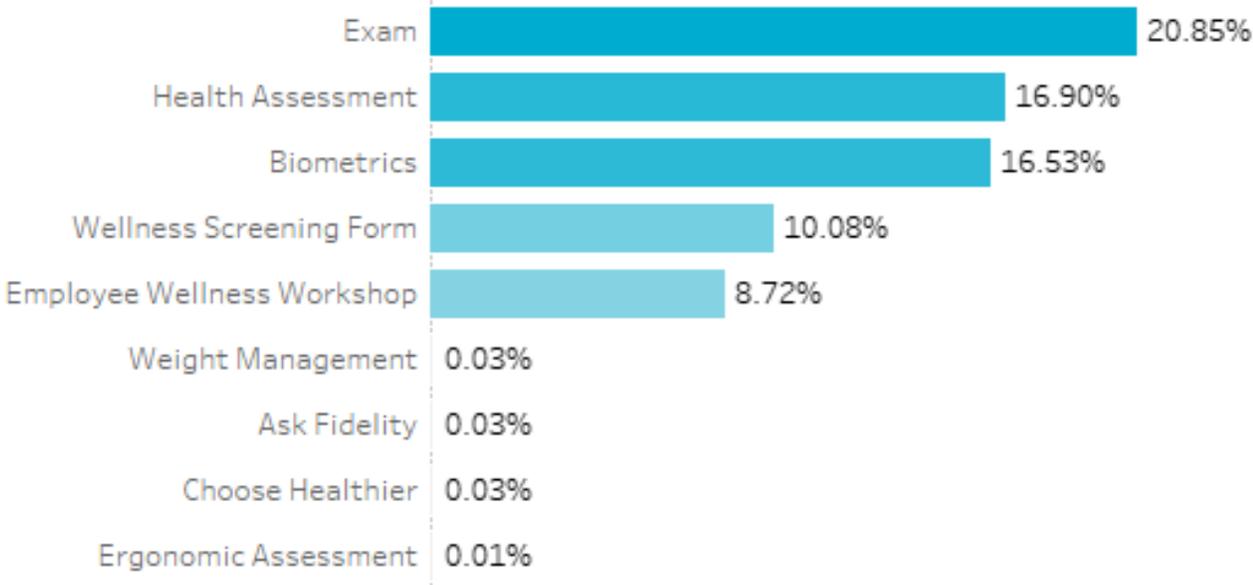
Ben Taub Program Participation Summary

Activity Types with Highest and Lowest Engagement (YTD % Engaged)

Change the numbers in the Highest N and Lowest N fields below to adjust the rankings shown in the chart.

Highest N

Lowest N



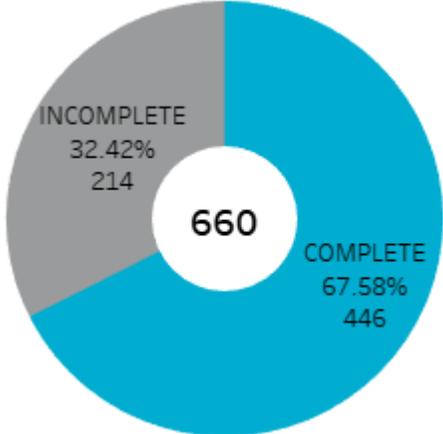
Community Health Choice Engagement

Community Health Choice Program Completion Summary

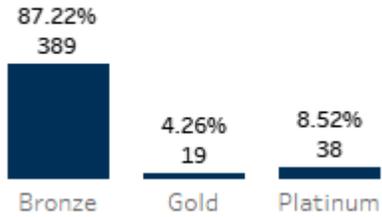
Wellness Program-Eligible Population

Program-Eligible Population = Regular, full-time and part-time employees (on and off of the medical plan) and spouses on the medical plan with a hire or coverage date from September 1, 2021 – April 30, 2022

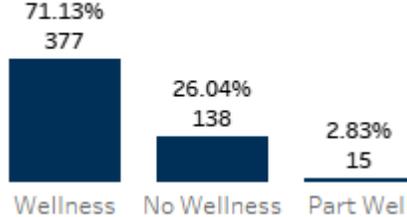
Completion status and medal level are individual designations for eligible employees and spouses. Since premium rates consider employees and spouses combined, the Employee Premium Rates graph only includes employees.



Medal Levels for Completed Participants



Employee Premium Rates

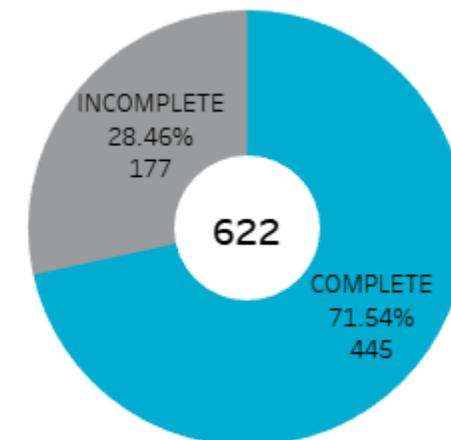


Community Health Choice Program Completion Summary

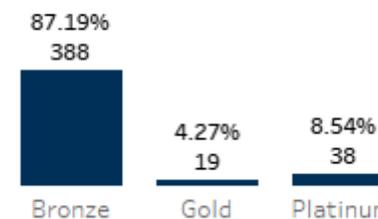
Wellness Premium Reward-Eligible Population

Premium Reward-Eligible Population = Regular, full-time and part-time employees on the medical plan and spouses on the medical plan with a hire or coverage date from September 1, 2021 – April 30, 2022

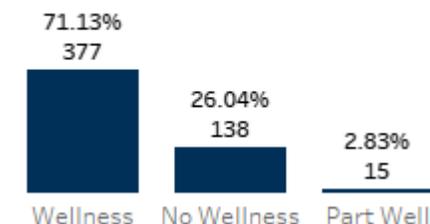
Completion status and medal level are individual designations for eligible employees and spouses. Since premium rates consider employees and spouses combined, the Employee Premium Rates graph only includes employees.



Medal Levels for Completed Participants



Employee Premium Rates



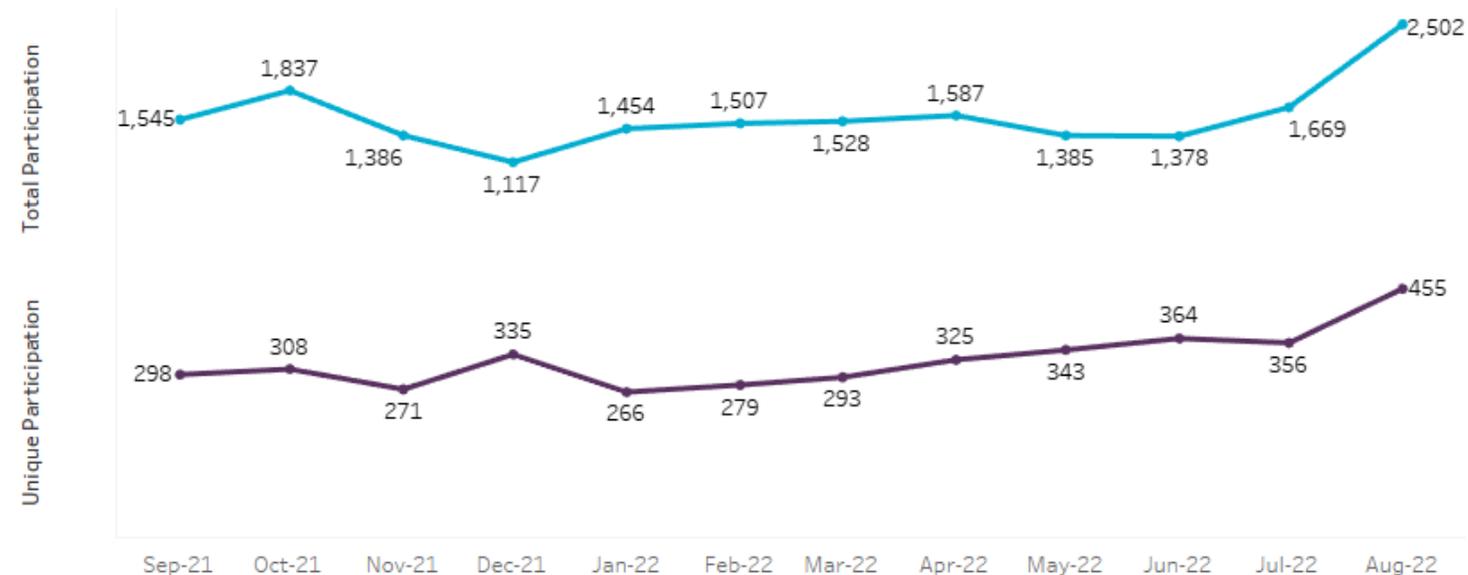
Community Health Choice Program Participation Summary

Total Units of Service

Total Activities	4,436
Total Participation	18,895
Total Unique Participation	849
% Engaged	5.37%

*Total Activities is calculated by counting the number of dates for completed activities. It is higher for on-demand activities that can be completed on any date (ex. eLearning). It is lower for activities where there are multiple times offered within each date (ex. In-Person Employee Wellness Classes).

Total Participation includes all participants, including participants who participated multiple times in the same activity.



Community Health Choice Program Participation Summary

Engaged Participants

849.0 5.37%

Highly Engaged Participants

450.0 2.85%

Average Number of Activities per Engaged Participant

22.26

*Engaged participants completed at least 1 wellness activity. Highly engaged participants completed 9 or more wellness activities. The percentage is out of the total population.

Participation by Activity Category

Wellness Category	Total Activities	Total Participation	Total Unique Participation	% Engaged
Education	1,394	4,414	347	2.20%
Evaluation	17	65	65	0.41%
Health Coaching	91	106	66	0.42%
Healthy Living Program	149	1,146	173	1.10%
Healthy Measures	651	1,250	530	3.36%
Maternity Support	8	8	8	0.05%
One-on-One Sessions with an Expert	2	2	2	0.01%
Physical Activity	692	8,743	254	1.61%
Preventive Health	1,367	2,731	769	4.87%
Special Event	28	368	261	1.65%
Wellness Challenge	1	3	3	0.02%
Wellness Champions	36	59	5	0.03%
Grand Total	4,436	18,895	849	5.37%

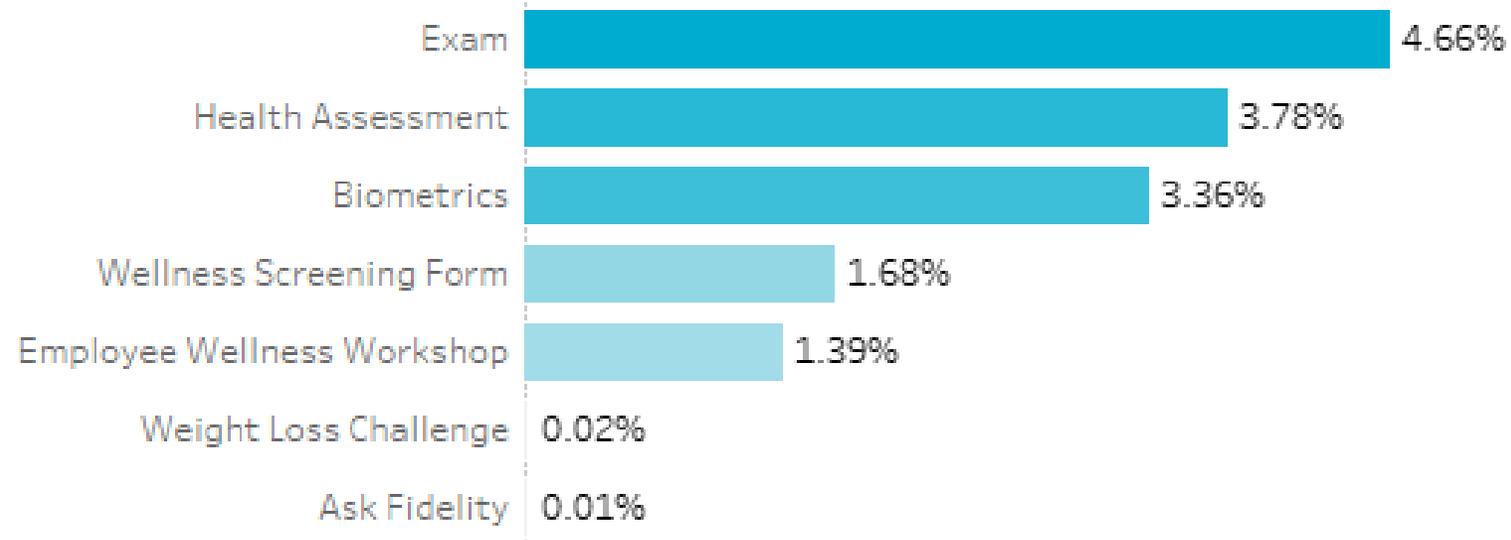
Community Health Choice Program Participation Summary

Activity Types with Highest and Lowest Engagement (YTD % Engaged)

Change the numbers in the Highest N and Lowest N fields below to adjust the rankings shown in the chart.

Highest N

Lowest N



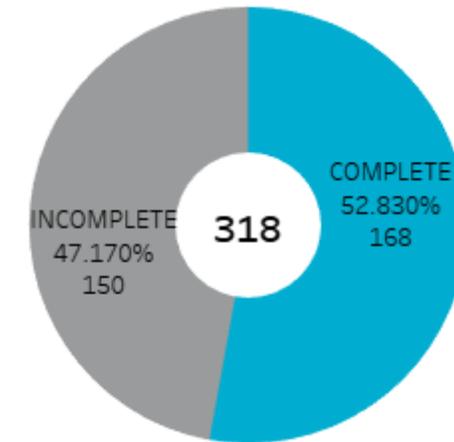
Harris County Sheriff's Office (Correctional Health) Engagement

Correctional Health Program Completion Summary

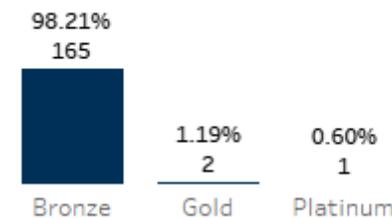
Wellness Program-Eligible Population

Program-Eligible Population = Regular, full-time and part-time employees (on and off of the medical plan) and spouses on the medical plan with a hire or coverage date from September 1, 2021 – April 30, 2022

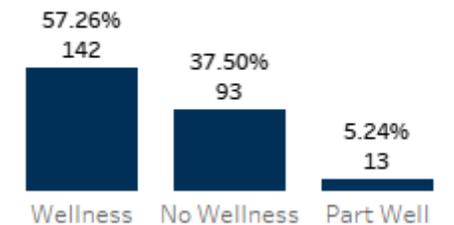
Completion status and medal level are individual designations for eligible employees and spouses. Since premium rates consider employees and spouses combined, the Employee Premium Rates graph only includes employees.



Medal Levels for Completed Participants



Employee Premium Rates

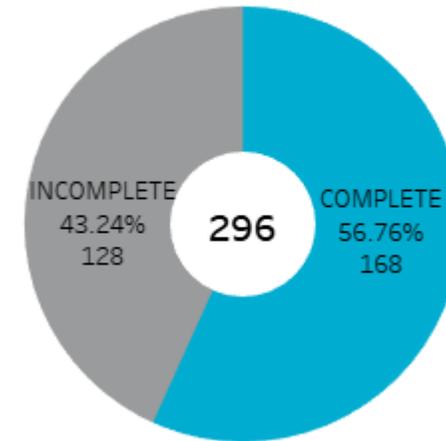


Correctional Health Program Completion Summary

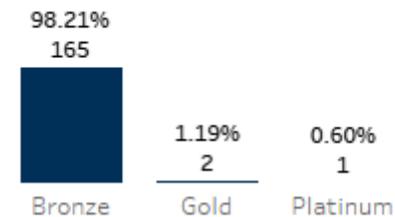
Wellness Premium Reward-Eligible Population

Premium Reward-Eligible Population = Regular, full-time and part-time employees on the medical plan and spouses on the medical plan with a hire or coverage date from September 1, 2021 – April 30, 2022

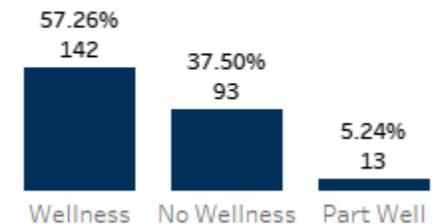
Completion status and medal level are individual designations for eligible employees and spouses. Since premium rates consider employees and spouses combined, the Employee Premium Rates graph only includes employees.



Medal Levels for Completed Participants



Employee Premium Rates



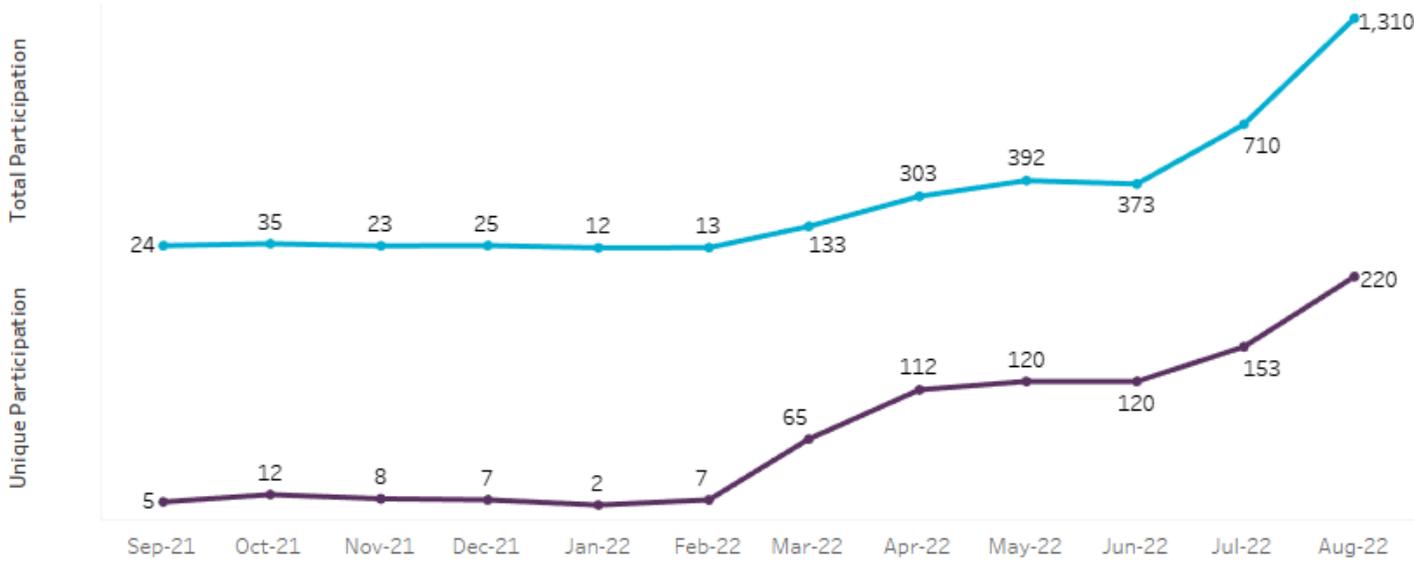
Correctional Health Program Participation Summary

Total Units of Service

Total Activities	2,043
Total Participation	3,353
Total Unique Participation	322
% Engaged	2.04%

*Total Activities is calculated by counting the number of dates for completed activities. It is higher for on-demand activities that can be completed on any date (ex. eLearning). It is lower for activities where there are multiple times offered within each date (ex. In-Person Employee Wellness Classes).

Total Participation includes all participants, including participants who participated multiple times in the same activity.



Correctional Health Program Participation Summary

Engaged Participants

322.0 2.04%

Highly Engaged Participants

138.0 0.87%

Average Number of Activities per Engaged Participant

10.41

*Engaged participants completed at least 1 wellness activity. Highly engaged participants completed 9 or more wellness activities. The percentage is out of the total population.

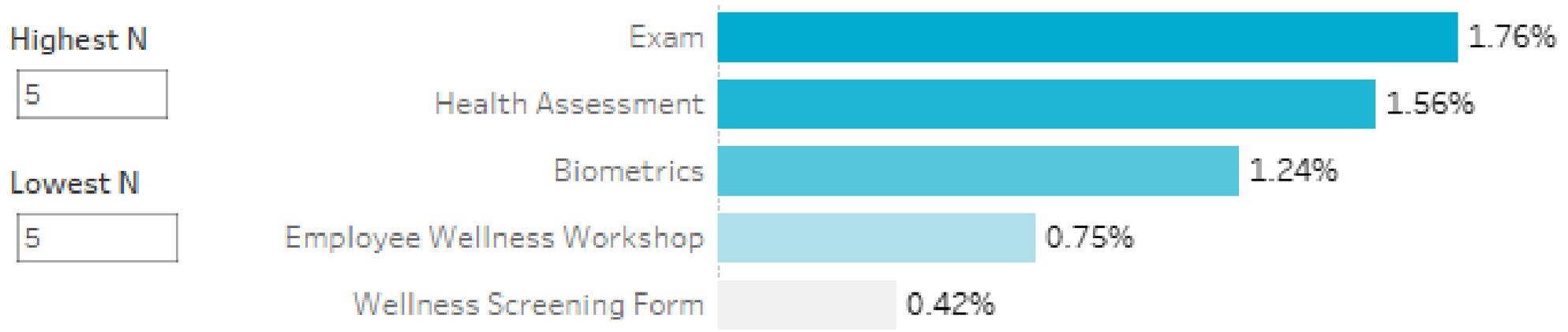
Participation by Activity Category

Wellness Category	Total Activities	Total Participation	Total Unique Participation	% Engaged
Education	753	1,201	156	0.99%
Evaluation	9	13	13	0.08%
Health Coaching	52	67	43	0.27%
Healthy Living Program	72	95	40	0.25%
Healthy Measures	291	431	196	1.24%
One-on-One Sessions with an Expert	1	1	1	0.01%
Physical Activity	330	615	45	0.28%
Preventive Health	530	914	300	1.90%
Special Event	5	16	15	0.09%
Grand Total	2,043	3,353	322	2.04%

Correctional Health Program Participation Summary

Activity Types with Highest and Lowest Engagement (YTD % Engaged)

Change the numbers in the Highest N and Lowest N fields below to adjust the rankings shown in the chart.



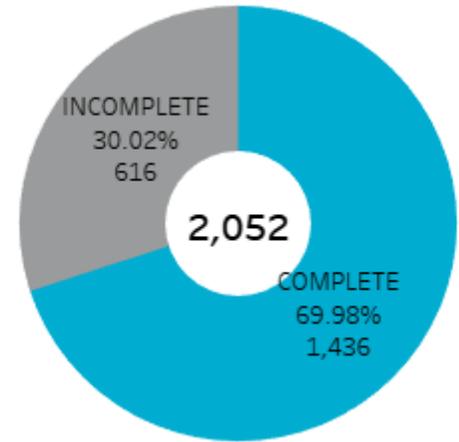
LBJ Engagement

LBJ Program Completion Summary

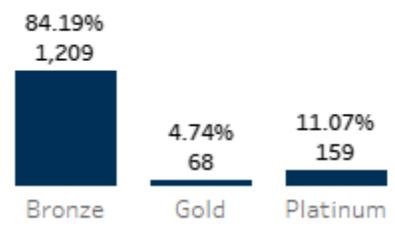
Wellness Program-Eligible Population

Program-Eligible Population = Regular, full-time and part-time employees (on and off of the medical plan) and spouses on the medical plan with a hire or coverage date from September 1, 2021 – April 30, 2022

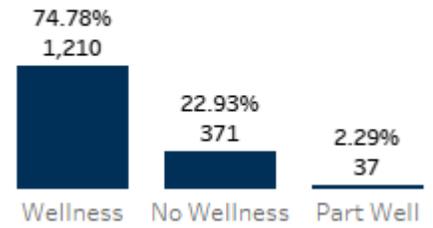
Completion status and medal level are individual designations for eligible employees and spouses. Since premium rates consider employees and spouses combined, the Employee Premium Rates graph only includes employees.



Medal Levels for Completed Participants



Employee Premium Rates

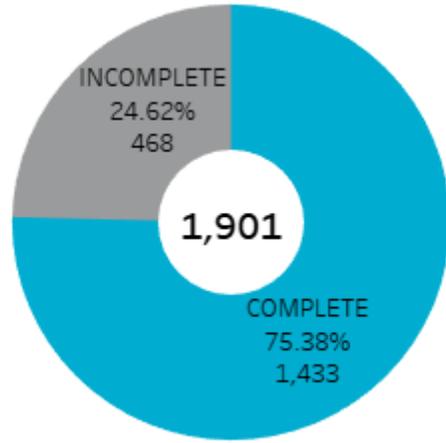


LBJ Program Completion Summary

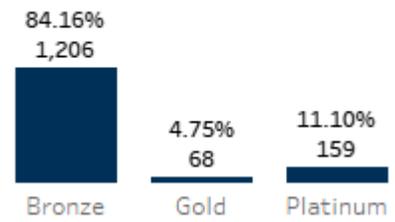
Wellness Premium Reward-Eligible Population

Premium Reward-Eligible Population = Regular, full-time and part-time employees on the medical plan and spouses on the medical plan with a hire or coverage date from September 1, 2021 – April 30, 2022

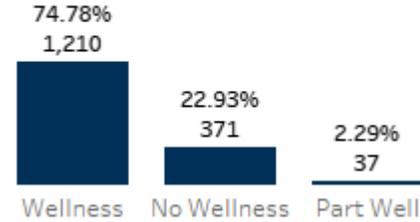
Completion status and medal level are individual designations for eligible employees and spouses. Since premium rates consider employees and spouses combined, the Employee Premium Rates graph only includes employees.



Medal Levels for Completed Participants



Employee Premium Rates



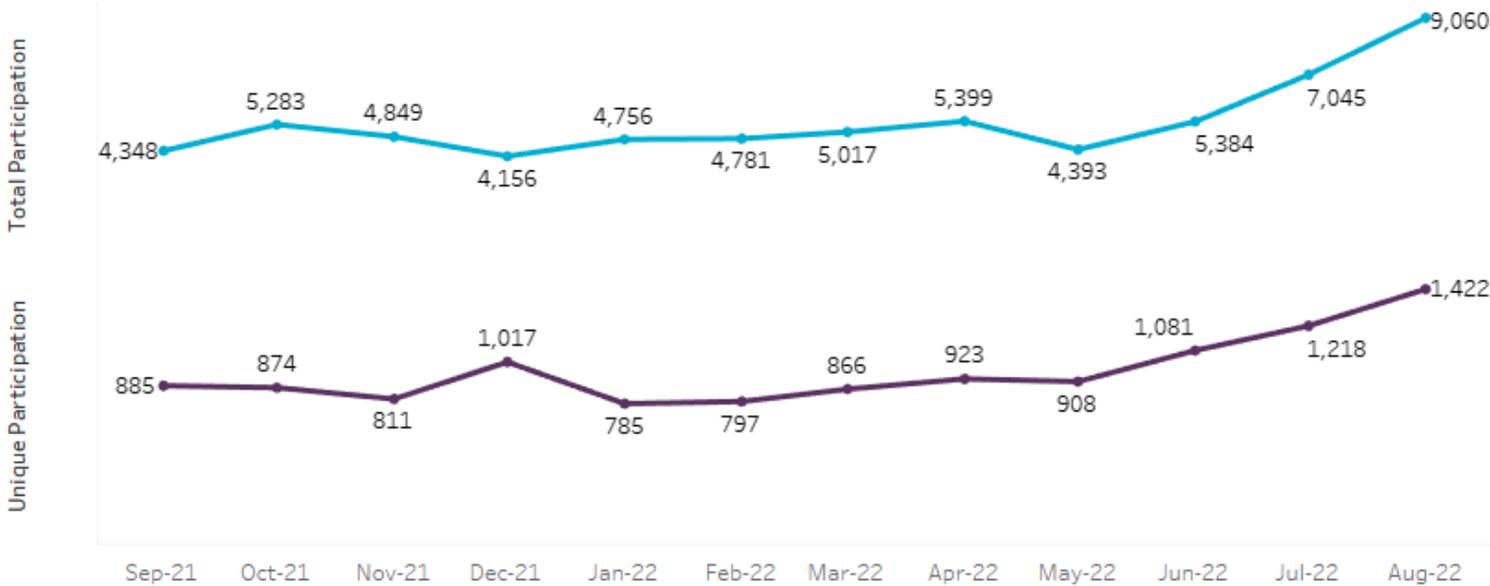
LBJ Program Participation Summary

Total Units of Service

Total Activities	11,833
Total Participation	64,471
Total Unique Participation	2,481
% Engaged	15.71%

*Total Activities is calculated by counting the number of dates for completed activities. It is higher for on-demand activities that can be completed on any date (ex. eLearning). It is lower for activities where there are multiple times offered within each date (ex. In-Person Employee Wellness Classes).

Total Participation includes all participants, including participants who participated multiple times in the same activity.



LBJ Program Participation Summary

Engaged Participants
 2,481 15.71%

Highly Engaged Participants
 1,485 9.40%

Average Number of Activities per Engaged Participant
 25.99

*Engaged participants completed at least 1 wellness activity. Highly engaged participants completed 9 or more wellness activities. The percentage is out of the total population.

Participation by Activity Category

Wellness Category	Total Activities	Total Participation	Total Unique Participation	% Engaged
Education	6,671	14,610	1,103	6.98%
Evaluation	36	171	169	1.07%
Health Coaching	244	341	215	1.36%
Healthy Living Program	336	3,232	503	3.18%
Healthy Measures	1,137	4,651	1,716	10.86%
Maternity Support	22	23	21	0.13%
One-on-One Sessions with an Expert	12	14	14	0.09%
Physical Activity	1,016	32,157	677	4.29%
Preventive Health	2,253	8,319	2,248	14.23%
Special Event	65	844	674	4.27%
Wellness Challenge	1	7	7	0.04%
Wellness Champions	40	102	7	0.04%
Grand Total	11,833	64,471	2,481	15.71%

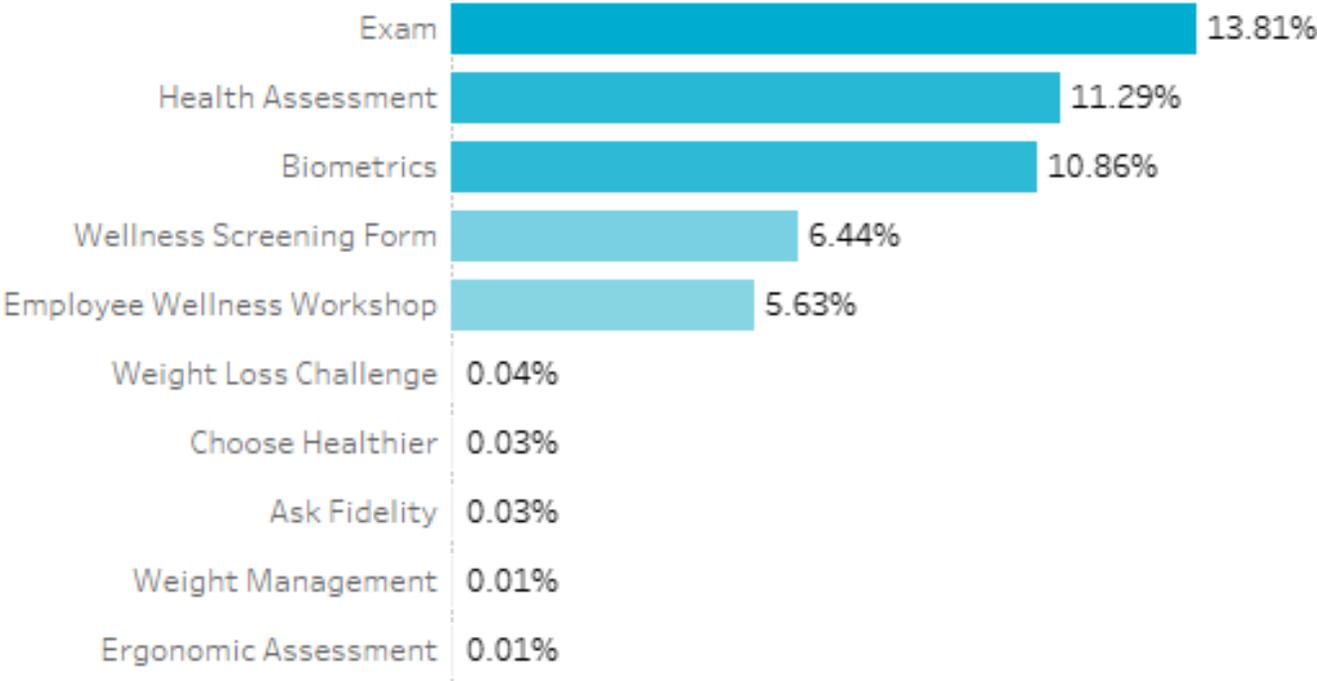
LBJ Program Participation Summary

Activity Types with Highest and Lowest Engagement (YTD % Engaged)

Change the numbers in the Highest N and Lowest N fields below to adjust the rankings shown in the chart.

Highest N

Lowest N



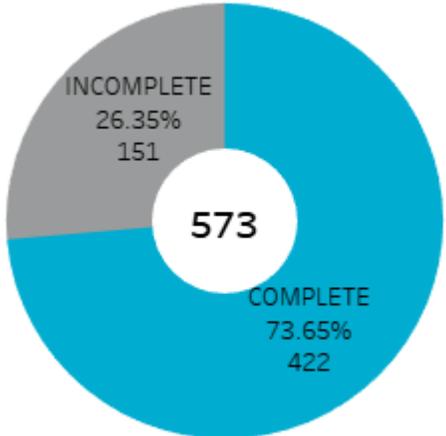
Telecommute Engagement

Telecommute Program Completion Summary

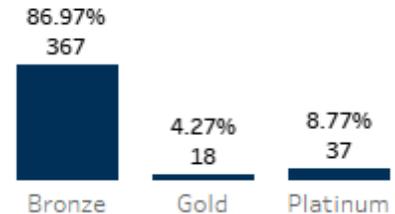
Wellness Program-Eligible Population

Program-Eligible Population = Regular, full-time and part-time employees (on and off of the medical plan) and spouses on the medical plan with a hire or coverage date from September 1, 2021 – April 30, 2022

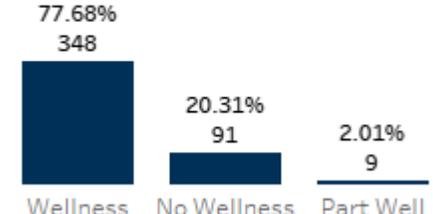
Completion status and medal level are individual designations for eligible employees and spouses. Since premium rates consider employees and spouses combined, the Employee Premium Rates graph only includes employees.



Medal Levels for Completed Participants



Employee Premium Rates

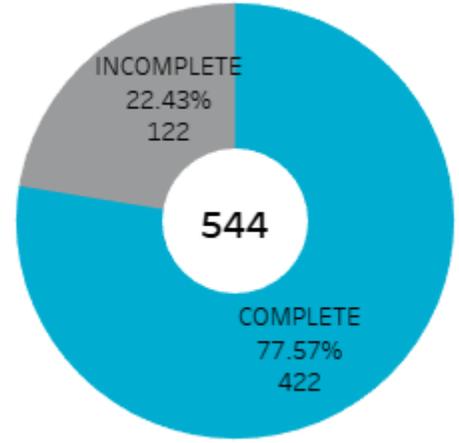


Telecommute Program Completion Summary

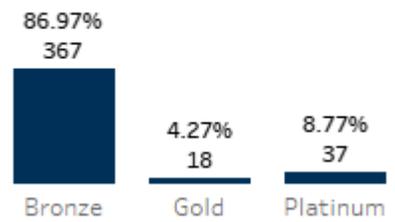
Wellness Premium Reward-Eligible Population

Premium Reward-Eligible Population = Regular, full-time and part-time employees on the medical plan and spouses on the medical plan with a hire or coverage date from September 1, 2021 – April 30, 2022

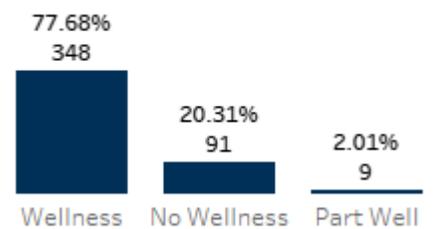
Completion status and medal level are individual designations for eligible employees and spouses. Since premium rates consider employees and spouses combined, the Employee Premium Rates graph only includes employees.



Medal Levels for Completed Participants



Employee Premium Rates



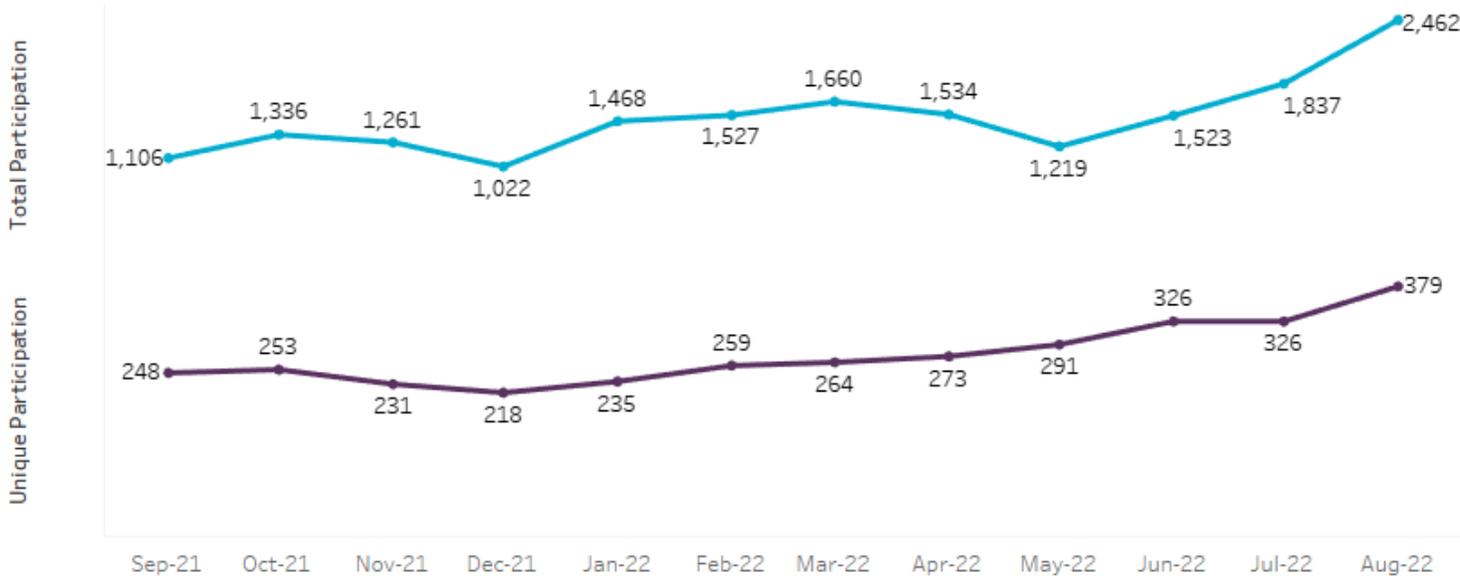
Telecommute Program Participation Summary

Total Units of Service

Total Activities	4,697
Total Participation	17,955
Total Unique Participation	644
% Engaged	4.08%

*Total Activities is calculated by counting the number of dates for completed activities. It is higher for on-demand activities that can be completed on any date (ex. eLearning). It is lower for activities where there are multiple times offered within each date (ex. In-Person Employee Wellness Classes).

Total Participation includes all participants, including participants who participated multiple times in the same activity.



Telecommute Program Participation Summary

Engaged Participants

644.0 4.08%

Highly Engaged Participants

409.0 2.59%

Average Number of Activities per Engaged Participant

27.88

*Engaged participants completed at least 1 wellness activity. Highly engaged participants completed 9 or more wellness activities. The percentage is out of the total population.

Participation by Activity Category

Wellness Category	Total Activities	Total Participation	Total Unique Participation	% Engaged
Education	1,741	4,479	326	2.06%
Evaluation	20	71	69	0.44%
Health Coaching	67	76	55	0.35%
Healthy Living Program	153	987	150	0.95%
Healthy Measures	637	1,074	438	2.77%
Maternity Support	3	3	3	0.02%
One-on-One Sessions with an Expert	3	4	4	0.03%
Physical Activity	758	8,695	227	1.44%
Preventive Health	1,236	2,291	611	3.87%
Special Event	37	181	131	0.83%
Wellness Challenge	1	1	1	0.01%
Wellness Champions	41	93	4	0.03%
Grand Total	4,697	17,955	644	4.08%

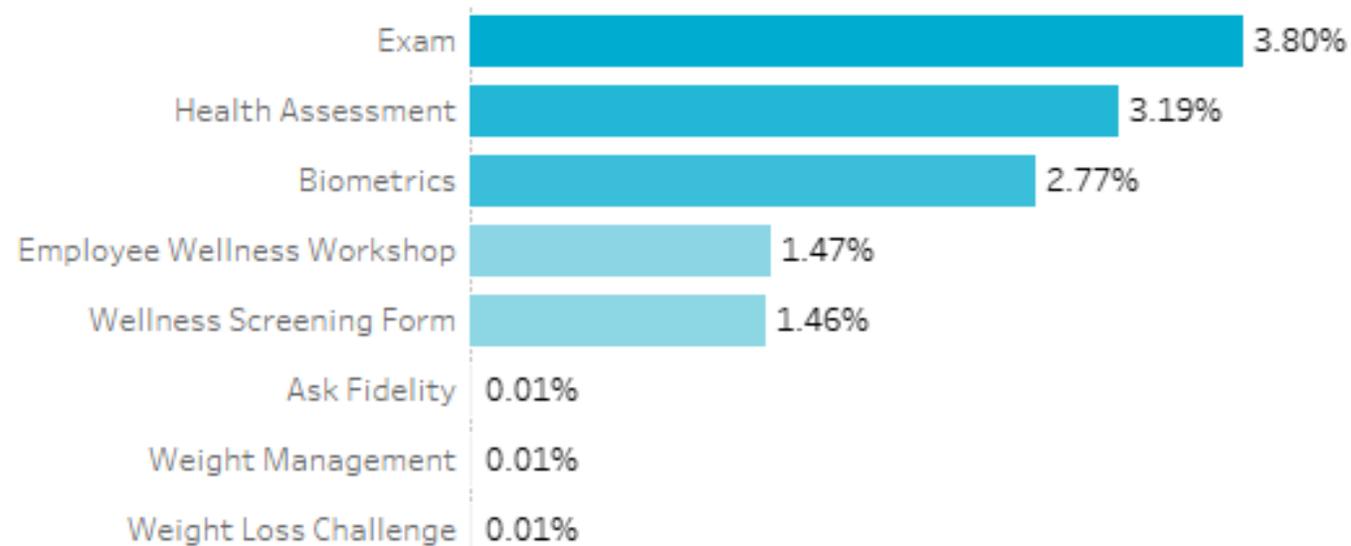
Telecommute Program Participation Summary

Activity Types with Highest and Lowest Engagement (YTD % Engaged)

Change the numbers in the Highest N and Lowest N fields below to adjust the rankings shown in the chart.

Highest N

Lowest N



Population Health Results

Population Health & Wellness - Active Employees

Population Health Status

Prospective Risk Score	Incurred 9/2019 – 8/2020, Paid through 10/2020	Incurred 9/2020 – 8/2021, Paid through 10/2021	Incurred 9/2021 – 8/2022, Paid through 10/2022	Trend
Employees	1.53	1.45	1.70	↑ .25
Spouses	1.79	1.75	2.05	↑ .30

Average Per Member Per Month (PMPM) Medical & Rx Claims	Incurred 9/2019 – 8/2020, Paid through 10/2020	Incurred 9/2020 – 8/2021, Paid through 10/2021	Incurred 9/2021 – 8/2022, Paid through 10/2022	% Trend	\$ Trend
Employees	\$501	\$561	\$568	↑ 1.3%	↑ \$7.30 PMPM
Spouses	\$662	\$747	\$841	↑ 12.6%	↑ \$94.32 PMPM

Average Per Member Per Month (PMPM) Medical & Rx Claims



- Prospective risk score averages increased by 0.25 for employees and by 0.30 for spouses due to higher prevalence of chronic conditions, worsening biometric risks, and more members with severe risk scores (>30)
- Spouses continue to cost the organization more than employees, making it important to engage them in plan programs as well.

Population Health Statistics

Chronic Conditions

Top 3 Chronic Conditions	Sept 2019 – August 2020			Sept 2020 – August 2021			Sept 2021 – August 2022			Trends in Prevalence	Trends in Cost
	% Prevalence	#	Average Paid Per Claimant	% Prevalence	#	Average Paid Per Claimant	% Prevalence	#	Average Paid Per Claimant		
Hypertension	18.1%	3,040	\$10,762	17.9%	3,126	\$14,401	18.1%	3,202	\$14,731	↑ 1.3%	↑ 2.3%
Diabetes	10.0%	1,673	\$12,354	10.0%	1,749	\$17,557	10.7%	1,887	\$16,082	↑ 6.9%	↓ 8.4%
Hyperlipidemia	14.0%	2,358	\$10,857	14.3%	2,498	\$14,778	15.3%	2,695	\$14,083	↑ 6.8%	↓ 4.7%

Actions:

- Programs to improve or eliminate chronic conditions;
 - Livongo Diabetes Management Program: 54% enrolled as of August 2022 (1,110 members enrolled out of 2,072 people identified with Diabetes)
 - Livongo Hypertension Management Program: 50% enrolled as August 2022 (1,866 members enrolled out of 3,731 people identified with Hypertension)
 - Livongo Diabetes Prevention Program: 31% enrolled as of August 2022 (587 members enrolled out of 1,866 people identified with Pre-Diabetes)
 - Wondr Health™ updated eligibility criteria due to launch of Livongo DPP and changed to continuous enrollment.
 - On-site classes, workshops etc.
- Continue to promote relationship with PCP to increase annual physical rate and physician involvement in Chronic Condition Management
- Fifth year spouses included in program requirements for FY24 premium rewards thus increasing spouse engagement and identification of health issues

Data source: Alliant Analytics; incurred September 2019 – August 2020, paid through October 2020; incurred September 2020 – August 2021, paid through October 2021; incurred September 2021 – August 2022, paid through October 2022. Excluding post-65 retirees, Grandfathered disabled & COBRA. Does not include capitated costs.

Population Health Statistics

Preventive Care Statistics

Preventive Screenings	Sept 2019 – August 2020				Sept 2020 – August 2021				Sept 2021 – August 2022				EE Trend	SP Trend
	Compliance Rate – EE	Eligible EE	Compliance Rate - SP	Eligible SP	Compliance Rate – EE	Eligible EE	Compliance Rate - SP	Eligible SP	Compliance Rate – EE	Eligible EE	Compliance Rate - SP	Eligible SP		
Annual Physical	63.30%	8,885	60.00%	1,802	72.54%	9,713	67.20%	1,994	76.00%	9,299	81.47%	1,873	5%	21%
Mammogram	79.80%	3,943	74.70%	379	81.01%	4,019	71.14%	401	81.98%	4,179	71.74%	414	1%	1%
Cervical Cancer Screening	87.00%	5,986	60%	503	88.75%	5,850	83.21%	524	86.94%	6,020	80.86%	533	-2%	-3%
Colorectal Screening	50.30%	3,148	49.10%	801	63.67%	4,266	58.44%	1,102	70.79%	4,485	65.68%	1,119	11%	12%
Prostate Screening*	75.20%	751	82.40%	598	77.76%	814	78.96%	613	77.31%	864	80.65%	620	-1%	2%

*2020 Prostate Screening criteria updated: Males age greater than 49 with PSA test in last 24 months

** Preventive screenings likely impacted by COVID Pandemic

Preventive care utilization for employees and spouses was 84.53%, a decrease of 4.72% over the prior program year

Notes:

Employee compliance includes participants that were not eligible for premium rewards (PPACA participants etc.). 87.2% of Premium Reward-eligible participants completed an Annual Physical; 81.89% of all eligible participants completed an Annual Physical

Population Health Statistics

Preventive Care Statistics

Preventive Screenings	Sept 2020 – August 2021					Sept 2021 – August 2022					Trend
	Compliance Rate - EE	Eligible EE	Compliance Rate – SP	Eligible SP	Total Compliance Rate (EE & SP)	Compliance Rate - EE	Eligible EE	Compliance Rate - SP	Eligible SP	Total Compliance Rate (EE & SP)	
Annual Dental Exam	30%	10,605	29%	2,569	30.0%	31%	10,985	30%	2,609	30.7%	↑ 0.7%
Annual Vision Exam	39%	10,546	37%	2,619	38.8%	39%	10,640	34%	2,618	37.8%	↓ 1.0%

Population Health Statistics

Metabolic Syndrome

Risk Factors	<u>Prospective Risk Score: 2.22</u>	FY24 Prevalence
Fasting glucose ≥100 mg/dL or on medicine to treat high glucose		26.7%
Blood Pressure ≥130/85 mmHg or on medicine to treat high blood pressure		12.5%
HDL (men <40 mg/dL and women <50 mg/dL) or on medicine to treat low HDL		30.6%
Triglycerides ≥150 mg/dL or on medicine to treat high triglycerides		16.8%
Large Waist (males >40", females >35")		38.7%

Actions:

- Livongo Diabetes Prevention Program
- Wondr Health™ engagement
- Nurse outreach
- PCP visits and clinical management
- Well Powered Living Program
- Wellness Workshops
- Healthy cooking classes
- New class to begin in new program year: Healthy Body for Everybody

- 409 members (11% of total population with sufficient biometric data meet Metabolic Syndrome criteria (3 out of 5 risk factors).
- The average cost* of a member with Metabolic Syndrome (Med & Rx) is \$6,849 per year, versus \$4,528 per year for a member without Metabolic Syndrome.
- Potential cost avoidance = \$949,407 (409 * \$2,321)

Data source: Alliant Analytics; incurred September 2021 – August 2022, paid through October 2022. Excluding post-65 retirees, Grandfathered disabled & COBRA. Includes dependents. 3,743 members with sufficient biometric data for this analysis. *Average cost calculated over the entire duration of the member’s data in Alliant Analytics, not just for the most recent wellness year, then converted to a per year claims amount.

Population Health Statistics – Biometrics Risks

Biometric	Biometric Description	Sept 2020 – August 2021			Sept 2021 – August 2022			Trends
		% At risk	% High Risk	%Total (At Risk + High Risk)	% At risk	% High Risk	%Total (At Risk + High Risk)	
BMI	At Risk: 25-29 High Risk: \geq 30	27%	44%	71%	32%	44%	77%	↑ 6%
Waist Circumference	Women: \geq 35 inches Men: \geq 40 inches	38%	--	38%	46%	--	46%	↑ 7%
Cholesterol	At Risk: 200-239 mg/dL High Risk: \geq 240 mg/dL	25%	8%	30%	27%	9%	36%	↑ 3%
HDL	Women: < 50 mg/dL Men: < 40 mg/dL	28%	--	28%	29%	--	29%	↑ 1%
LDL	At Risk: 100-159 mg/dL High Risk: \geq 160 mg/dL	53%	7%	60%	55%	9%	63%	↑ 3%
Triglycerides	At Risk: 150-199 mg/dL High Risk: \geq 200 mg/dL	11%	7%	18%	10%	8%	18%	→ 0%
Glucose [Fasting]	At-Risk: 100-125 mg/dL High-Risk: \geq 126mg/dL	18%	8%	26%	19%	8%	27%	↑ 2%
Blood Pressure	At-Risk: \geq 120/80, but not \geq 140/90 High-Risk: \geq 140/90	28%	4%	32%	28%	6%	33%	↑ 1%

Data sources: Alliant Analytics; HRA/Biometrics Report; incurred September 2020– August 2021, paid through October 2021; incurred September 2021– August 2022, paid through October 2022. Excluding post-65 retirees, grandfathered disabled & COBRA. Biometric data not available for all enrolled members during the wellness year (percentages above are based on the number of members meeting the at risk or high risk criteria out of all members with reported biometric data).

Population Health Statistics-Lifestyle Risks

Biometric	Biometric Description	Sept 2020 – August 2021			Sept 2021 – August 2022			Trends
		% At risk	% High Risk	% Total (At Risk + High Risk)	% At risk	% High Risk	% Total (At Risk + High Risk)	
Physical Activity*	At Risk: 1-4 times (<150 min.) /week High Risk: 0 times/week	64.7%	7.7%	72.4%	65.6%	7.6%	73.2%	↑ 0.9%
Tobacco Use*	High Risk: Current Tobacco user	--	4.0%	4.0%	--	3.8%	3.8%	↓ 0.3%
Nutrition*	At Risk: 1-2 servings of fruit, vegetables & high fiber foods/day High Risk: Rarely or never eats fruit, vegetables & high fiber foods/day	40.4%	3.3%	43.6%	47.8%	3.2%	51.1%	↑ 7.4%
Stress*	At Risk: Sometimes stressed High Risk: High Stress	33.5%	8.3%	41.7%	32.4%	8.3%	40.6%	↓ 1.1%

*Although the data collected above is self-reported, it still gives insight into the habits of the population.

- Key Insights:
 - Increasing physical activity is effective in lowering the prevalence of cardiovascular disease, certain cancers, diabetes and certain mental and nervous disorders.
 - Poor Nutrition is one of the primary unhealthy lifestyle behaviors contributing to hypertension in working age adults

Employee/Retiree versus Spouse Cost & Risk Analysis

Demographics

	Age	% Female	Prospective Risk Score
Employee	44.6	75.6%	1.70
Spouse	49.3	32.0%	2.05

Average risk score is 1.73

Chronic Conditions (Program Year)

Top 3 Chronic Conditions	Spouses Prevalence	Number of Spouses	Employees Prevalence	Number of Employees
Hypertension	33%	608	27%	2,546
Diabetes	21%	395	16%	1,449
Hyperlipidemia	32%	592	22%	2,032

Cost Per Member Per Month PMPM

Spouse costs are 36.1% greater than employee costs.



Actions:

- Livongo Diabetes Management Program
- Livongo Hypertension Management Program
- Livongo Diabetes Prevention Program
- Wondr Health™ Weight Management Program
- Required spouse engagement for Premium Rewards Program

Chronic Conditions Prevalence – Employee Population

Chronic Condition	FY23: Sep 2020 through Aug 2021		FY24: Sep 2021 through Aug 2022		Trend FY24 vs FY 23
	# With Condition	% of Members	# With Condition	% of Members	
Metabolic Disorders	2,776	30.29%	2,675	28.77%	-1.52%
Hypertension	2,758	30.09%	2,546	27.38%	-2.71%
Hyperlipidemia	2,119	23.12%	2,032	21.85%	-1.27%
Diabetes	1,488	16.23%	1,449	15.58%	-0.65%
Blood Disorders	973	10.62%	998	10.73%	0.12%
Morbid Obesity	876	9.56%	928	9.98%	0.42%
Lower Back Pain	761	8.30%	656	7.05%	-1.25%
Chronic Pain	461	5.03%	457	4.91%	-0.11%
Depression	461	5.03%	455	4.89%	-0.14%
Asthma	456	4.97%	447	4.81%	-0.17%
Osteoarthritis	483	5.27%	389	4.18%	-1.09%
Liver Diseases	276	3.01%	282	3.03%	0.02%
Cancer	289	3.15%	250	2.69%	-0.46%
CAD	233	2.54%	195	2.10%	-0.45%
CKD	159	1.73%	121	1.30%	-0.43%
Rheumatoid Arthritis	104	1.13%	104	1.12%	-0.02%
Congestive Heart Failure	109	1.19%	101	1.09%	-0.10%
ADHD	75	0.82%	100	1.08%	0.26%
HIV/AIDS	83	0.91%	85	0.91%	0.01%
Peripheral Vascular Disease	92	1.00%	66	0.71%	-0.29%
Atrial Fibrillation	70	0.76%	55	0.59%	-0.17%
Immune Disorders	20	0.22%	47	0.51%	0.29%
Metabolic Syndrome	41	0.45%	46	0.49%	0.05%
COPD	66	0.72%	45	0.48%	-0.24%
Inflammatory Bowel Disease	41	0.45%	42	0.45%	0.00%
Sickle Cell Disease	29	0.32%	33	0.35%	0.04%
Affective Psychosis	27	0.29%	30	0.32%	0.03%
Paralysis Other	25	0.27%	20	0.22%	-0.06%
Eating Disorders	29	0.32%	19	0.20%	-0.11%
Demyelinating Diseases	17	0.19%	15	0.16%	-0.02%

Chronic condition prevalence within the Harris Health EE population decreased in absolute terms and as a percentage of the overall population, particularly for the most common chronic conditions (hypertension, metabolic disorders, hyperlipidemia, and hypertension).

Environment & Culture

Environment and Culture

- 87.57% of employees believe that Harris Health System cares about their health and well-being, a 2.15% decrease from the prior year.
- 84.67% of employees believe there is a culture of health and wellness within Harris Health System, a 4.08% decrease from the prior program year.

Harris Health System Employee Wellness Survey 2022

TOPIC	2017	2018	2019	2020	2021	2022	Trend
Harris Health System cares about the health and well-being of employees.	80.32%	88.54%	89.87%	86.29%	89.72%	87.57%	↓ -2.15%
There is a culture of health and wellness within Harris Health System.	75.54%	86.30%	87.38%	86.58%	88.75%	84.67%	↓ -4.08%
The managers in my department support employees' participation in the wellness program.	N/A	74.42%	77.36%	76.16%	74.07%	73.02%	↓ -1.05%
The managers in my department care about the health and well-being of employees.	N/A	77.50%	78.18%	78.60%	79.20%	76.02%	↓ -3.18%

Survey Data

2017 total survey responses: 2,206	Survey conducted 5/5/17-6/7/17 (with Benefits)
2018 total survey responses: 3,562	Survey conducted 3/30/18-4/30/18
2019 total survey responses: 4,670	Survey conducted 3/30/19-4/30/19
2020 total survey responses: 4,324	Survey conducted: 3/30/2020 - 4/30/2020
2021 Total Survey Responses: 1,829	Survey conducted 3/30/2021-4/30/2021
2022 Total Survey Responses: 1,162	Survey conducted 3/30/2022-4/30/2022

Employee Wellness Program Satisfaction

Wellness Program Satisfaction

- 85.77% of employees are satisfied with the Wellness Program, a 3.39% decrease from the prior program year.

Harris Health System Employee Wellness Survey 2022								
TOPIC	2017	2018	2019	2020	2021	2022	Trend	
Satisfaction with the overall wellness program (good or excellent)	55.58%	82.19%	89.03%	85.90%	89.16%	85.77%	↓	-3.39%
The wellness program has helped me improve my overall health.	57.04%	76.38%	80.21%	79.38%	80.07%	79.09%	↓	-0.98%
The wellness program has helped me feel more confident about making decisions about my health.	56.77%	77.59%	82.12%	79.99%	82.07%	81.01%	↓	-1.06%
The wellness program has helped me increase my readiness to make positive health behavior changes.	58.53%	79.80%	84.13%	82.41%	84.30%	82.12%	↓	-2.18%
I have made at least one significant health behavior change since participating in the wellness program.	57.94%	81.00%	84.13%	81.14%	82.09%	81.28%	↓	-0.81%
The wellness program has helped me be more productive when I'm NOT at work.	52.15%	70.89%	74.95%	73.69%	72.60%	72.54%	↓	-0.06%
The wellness program has been of value to my spouse or others in my family.	42.26%	64.05%	72.56%	65.83%	65.52%	63.74%	↓	-1.78%
The wellness program has led to improved quality of life for me and/or my family.	52.97%	73.23%	79.24%	76.90%	77.91%	77.88%	↓	-0.03%
The wellness program is a valuable part of my employee benefits.	59.77%	82.19%	87.23%	85.71%	87.09%	85.64%	↓	-1.45%
I have gained knowledge and/or skills from the wellness program that I use in my everyday life.	N/A	79.46%	84.56%	82.52%	83.81%	82.89%	↓	-0.92%

Survey Data	
2017 total survey responses: 2,206	Survey conducted 5/5/17-6/7/17 (with Benefits)
2018 total survey responses: 3,562	Survey conducted 3/30/18-4/30/18
2019 total survey responses: 4,670	Survey conducted 3/30/19-4/30/19
2020 total survey responses: 4,324	Survey conducted: 3/30/2020 - 4/30/2020
2021 Total Survey Responses: 1,829	Survey conducted 3/30/2021-4/30/2021
2022 Total Survey Responses: 1,162	Survey conducted 3/30/2022-4/30/2022

Note: Data collected and impacted by the 2021 Covid-19 Pandemic

Data sources: Employee Wellness Survey via Survey Monkey 2017, 2018, 2019, 2020, 2021 and 2022.



Wellness Program Satisfaction

Harris Health System Employee Wellness Survey 2022

Satisfaction with Specific Programs and Resources	2017	2018	2019	2020	2021	2022	Trend	
Premium Rewards Program	N/A	77.70%	79.41%	84.56%	86.64%	86.36%	↓	-0.28%
Telephonic Health Coaching	N/A	68.17%	74.38%	78.10%	79.58%	76.28%	↓	-3.30%
In-person Health Coaching	N/A	67.63%	73.80%	75.30%	72.08%	68.81%	↓	-3.27%
Cigna Online Chronic Condition Coaching	N/A	71.08%	75.28%	78.13%	79.07%	76.18%	↓	-2.89%
Livongo Diabetes Management Program	N/A	73.10%	79.98%	80.90%	82.72%	75.00%	↓	-7.72%
Livongo Free Diabetes Medication Program	N/A	N/A	78.29%	80.90%	77.43%	72.87%	↓	-4.56%
Livongo Hypertension Management Program	N/A	N/A	80.04%	80.74%	82.96%	77.41%	↓	-5.55%
Livongo Free Hypertension Medication Program	N/A	N/A	N/A	N/A	73.82%	73.06%	↓	-0.76%
Livongo Diabetes Prevention Program	N/A	N/A	N/A	79.78%	79.11%	77.55%	↓	-1.56%
Wondr Weight Management Program	N/A	75.64%	77.82%	78.51%	77.06%	70.36%	↓	-6.70%
Well Powered Living Program	N/A	74.31%	80.76%	84.22%	86.18%	83.68%	↓	-2.50%
Online Wellness Challenges	N/A	81.25%	85.43%	85.87%	87.47%	87.21%	↓	-0.26%
EAP Webinars	N/A	73.96%	83.02%	86.25%	87.05%	84.70%	↓	-2.35%
Healthy Knowledge Seminars	N/A	82.85%	84.94%	88.91%	90.56%	87.46%	↓	-3.10%
Employee Wellness Workshops	N/A	N/A	N/A	85.63%	89.54%	88.65%	↓	-0.89%
Relaxathons	N/A	79.44%	85.09%	85.13%	85.85%	86.57%	↑	0.72%
Other Special Events-Med Center Run, AHA Walk	N/A	79.44%	85.09%	80.60%	84.13%	82.73%	↓	-1.40%
Explore & Learn Booths	N/A	77.45%	83.23%	83.67%	83.43%	80.32%	↓	-3.11%
Group Exercise Classes	N/A	78.34%	79.91%	81.68%	84.76%	79.11%	↓	-5.65%
Recreational Sports	N/A	77.27%	79.14%	79.24%	79.68%	77.46%	↓	-2.22%
15 Minute Virtual Stretches	N/A	N/A	N/A	N/A	89.25%	84.89%	↓	-4.36%
30 Minute Virtual Walks	N/A	N/A	N/A	N/A	86.91%	83.02%	↓	-3.89%
Fitbit	N/A	N/A	N/A	86.65%	87.90%	84.86%	↓	-3.04%
Healthy Cooking Classes	N/A	80.96%	83.28%	83.30%	84.94%	82.16%	↓	-2.78%
Healthy Wage Weight Loss Contest	N/A	75.86%	N/A	77.19%	74.93%	72.08%	↓	-2.85%
Cigna Healthy Pregnancy, Healthy Baby Program	N/A	70.50%	74.56%	76.07%	75.52%	67.63%	↓	-7.89%
Employee Assistance Program through FEI	N/A	75.31%	79.54%	78.22%	80.22%	75.73%	↓	-4.49%
Gardening at LBJ or Fournace	N/A	N/A	N/A	N/A	76.57%	64.71%	↓	-11.86%
eLearning Wellness Classes and Workshops (Saba)	N/A	N/A	N/A	N/A	88.84%	87.75%	↓	-1.09%
Lactation Rooms	N/A	N/A	N/A	N/A	71.13%	62.69%	↓	-8.44%

Data sources: Employee Wellness Survey via Survey Monkey 2017, 2018, 2019, 2020, 2021 and 2022.

Wellness Program Needs & Interests

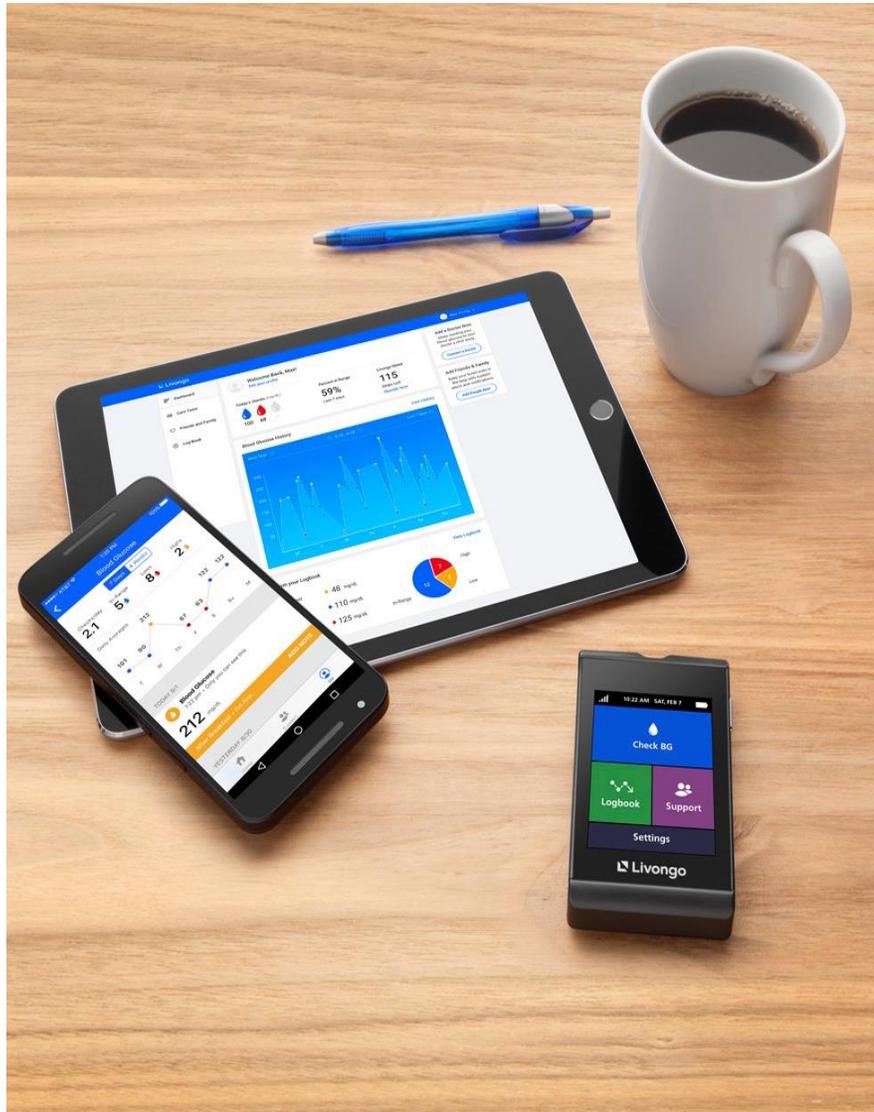
Harris Health System Employee Wellness Survey 2022								
Needs & Interests	2017	2018	2019	2020	2021	2022	Trend	
Please rate your level of interest in having more healthy food options at work	N/A	N/A	N/A	79.26%	79.32%	80.79%	↑	1.47%
Survey Data								
2017 total survey responses: 2,206	Survey conducted 5/5/17-6/7/17 (with Benefits)							
2018 total survey responses: 3,562	Survey conducted 3/30/18-4/30/18							
2019 total survey responses: 4,670	Survey conducted 3/30/19-4/30/19							
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2022 Total Survey Responses: 1,162	Survey conducted: 3/30/2022 - 4/30/2022							

Livongo Diabetes Management Program

Livongo Diabetes Management Program

- Program designed to empower participants with the latest technology, information and coaching to more effectively manage their diabetes.
- Livongo is FREE program provided to Harris Health System employees, spouses and pre-65 retirees who have Diabetes and are enrolled in the Harris Health System Medical Plan. The program empowers people with Diabetes to live a better life.
- Our Goals:
 - Achieve $\geq 40\%$ enrollment and engagement in the Livongo Diabetes Management Program.
 - Program year enrollment =55%
 - Decrease ER visits and complications associated with Diabetes
 - On average, diabetics participating in Livongo are 1.3x less likely to have an ER visit compared to non-participants
 - On average, diabetics participating in Livongo are 2.5x less likely to have inpatient days compared to non-participants
 - Improve number of glucose checks as well as number of time glucose readings are in range
 - Members engage with the Diabetes program on average 18x per month; 87 times per month
 - 510 Alerts in last 90-days; average of 4 alerts per member; 36.7% low glucose alerts and 63.3% are high alerts
 - Achieve HbA1c reductions of $\geq 1\%$
 - The average HbA1c of all participants in Livongo decreased by .02. The average HbA1c for participants with an average HbA1c ≥ 9 decreased by .06. Reductions are correlated to cost savings and reduced health risks
 - Average eHbA1c of Livongo participants enrolled at least 6-months and were uncontrolled (HbA1c $\geq 7\%$) at enrollment had a decrease of 1.5% participant
 - Improve clinical compliance with HEDIS measures and the Diabetes Increase the percentage of the diabetic population that has an HbA1c in the well-managed range ($< 7\%$)
 - 44.4% of all diabetics are in good diabetic control $<7\%$; 41.6% of Diabetics participating in Livongo are in good diabetic control $< 7\%$
 - Standards of Care
 - Improved
 - Achieve positive participant feedback that Livongo is easy to use and is a valuable resource in better self management.
 - Net promoter score of 77+; positive testimonials
 - Achieve ROI & VOI (Value on Investment)
 - Pooled ROI for medical and Rx cost is:
 - 1.4x ROI; \$69 PMPM; a total savings of \$862, 776

Livongo Diabetes Management Program



The Livongo Diabetes Management Program includes:

- A two-way, smart blood glucose meter
- Instant, personalized tips with each blood glucose check
- Real-time support when participants are out of range
 - Within 3 minutes of high or low glucose reading a Livongo member has electronically been given immediate action to treat and they receive a call from a Certified Diabetes Educator who can assist 24/7/365.
- Free test strips and supplies mailed directly to member's home
- Test strip reordering, right from the meter
- Optional Family alerts keep everyone in the loop
- Data Sharing with Family and Health Providers directly from the meter, app or portal
- Automatic uploads for better reporting and management
- Unlimited, personalized coaching
- Informative resources and learning tools help participants improve their lifestyle, manage their Diabetes and improve their health
- Available via desktop, laptop or mobile device including apps for both iPhone and Android devices

Livongo Diabetes Management Executive Summary

- **Engagement:**
 - Achieved 55% participation in Livongo Diabetes Management Program during the program year compared to Livongo’s BOB of 36%
 - 56% of Members engaged in both the Livongo Diabetes Management Program and Hypertension Management Program
- **Cost Savings:**
 - Diabetics Participating in Livongo cost 22% less than non participants; a difference of \$305 PMPM; a total difference of \$3,813,720 per year.
 - Participants engaged in Livongo both years have decreased their costs by 2% (\$22 PPPM); \$264 PMPM; totaling \$293,040. This includes all costs
 - **Decreased ER visits and inpatient days:**
 - On average, diabetics participating in Livongo are 1.3x less likely to have an ER visit.
 - On average, Diabetics participating in Livongo are 2.5x less likely to have inpatient days compared to non-participants.
- **Clinical Results:**
 - Prospective risk score is 0.22 greater in Livongo Participants versus non-participants; opportunity for impact
 - Livongo participants are achieving clinical compliance. Greatest opportunity is with annual dilated eye exams (70%). Annual Exams: Foot exam (88%), HbA1c (98%), Lipid profile (97%), LDL-C (97%) and preventive visit (95%).
 - Livongo participants are achieving higher clinical compliance with HEDIS measures and the Diabetes Standards of Care than non-participants
 - 41.6% of Livongo participants are in good diabetic control (<7%); a 2.9% decrease from the prior program year
 - 39.9% of Livongo participants are in moderate diabetic control (7%-9%); a 3.6% increase over the prior program year
 - 18.5% of Livongo participants are in in poor diabetic control ($\geq 9\%$); a 0.7% decrease over the prior program year
 - The average HbA1c of all participants in Livongo increased by .02.
 - The average HbA1c for participants with an average HbA1c ≥ 9 decreased by .06. Reductions are correlated to cost savings and reduced health risks
 - Harris Health participants who were uncontrolled (>7%) experienced a **1.5% decrease in eHbA1c** from the self reported values at registration
 - Livongo Participants had a 10.5% improvement in biometric clinical risks
- **Empowerment & Satisfaction:**
 - Livongo participants have a Net Promoter Score (NPS) of +77 compared to NPS of 68 for Livongo’s BOB and a NPS of 12 for health plans. This demonstrates that HHS participants recommend Livongo and are satisfied with the program.
 - 87.4% of members feel more empowered in their diabetes management
 - 55% of Livongo members feel less distress in their chronic disease management; a 19% improvement over the prior year
 - Livongo participants have a significantly higher medication adherence (PDC > 80%) is 93.3% compared to non-participants 77.3%
- **ROI and VOI:**
 - Pooled ROI for medical and Rx cost is:
 - Year 1: 1.2x ROI; \$38 PMPM
 - Year 2: 1.9x ROI; \$58 PMPM
 - Year 3: 2.1x ROI; \$65 PMPM
 - Year 4: 4.3x ROI; \$135 PMPM
 - Year 5: 1.4x ROI; \$69 PMPM; a total savings of \$862, 776
 - Clinical health improvements, high participant satisfaction

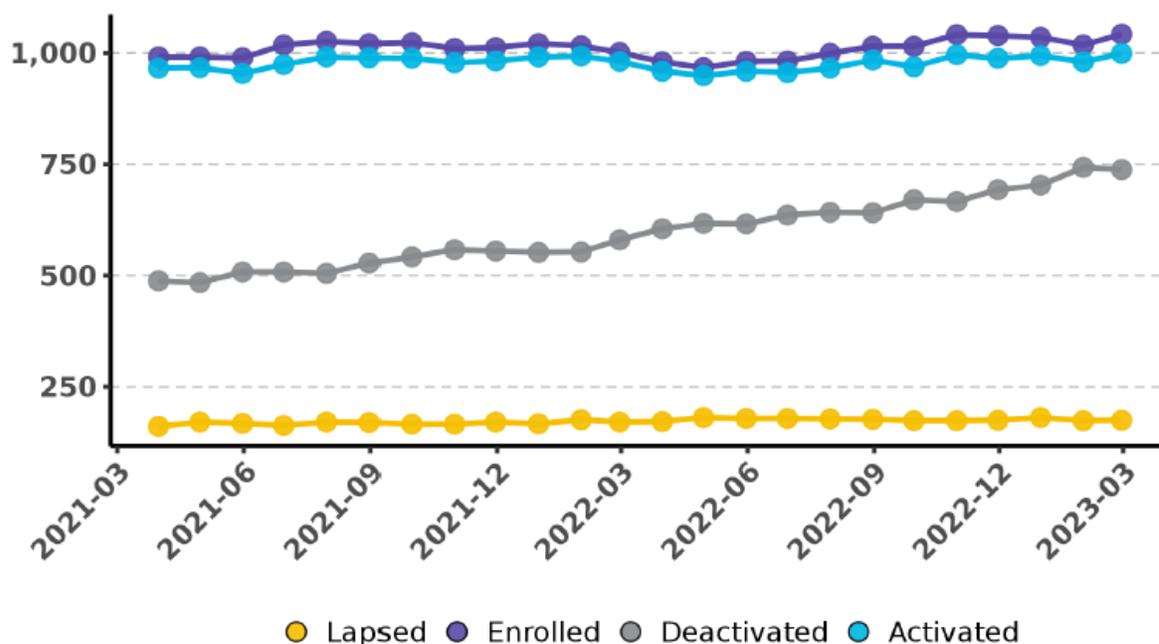
Livongo Diabetes Management Program Enrollment

Diabetes management

Enrollment & Activation dashboard



Diabetes enrollment and activation trends



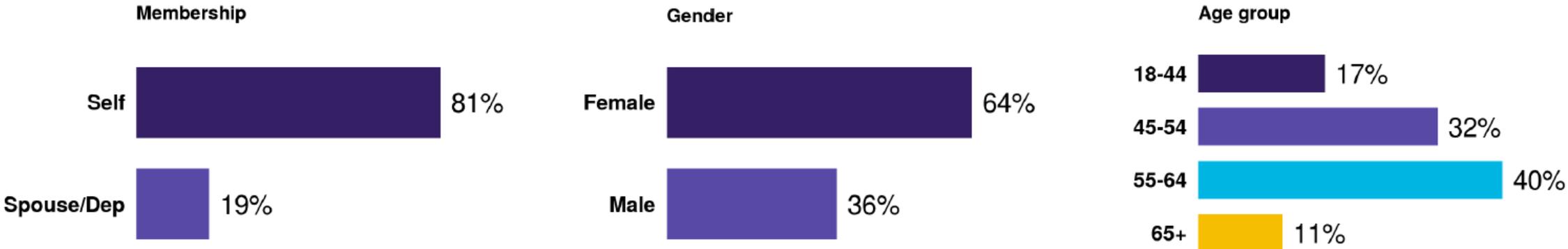
Recrutable: Number of people who are eligible for the program
Enrolled: Number of members who registered and successfully enrolled
Activated: Number of members who used the device for a first blood glucose reading
Lapsed: Number of members who have not used BG device in 6 months (Lapsed User Clause). Members are not removed or deactivated, and client will no longer need to pay for members until they re-engage.
Deactivated: Number of members who are no longer eligible for the benefit

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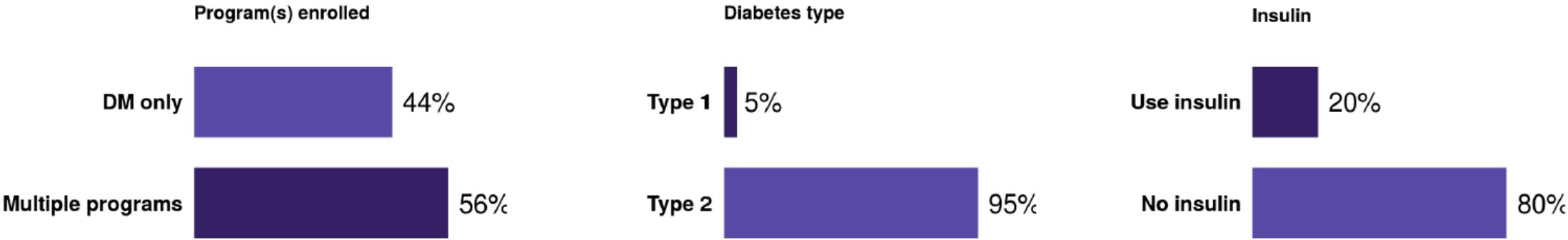


Livongo Diabetes Management Program Enrollment

Diabetes management



Diabetes management



Note: The only program that participants in the Livongo Diabetes program can participate in besides the Livongo Diabetes program is the Livongo Hypertension program

Diabetic versus Non Diabetic Cost & Risk Analysis

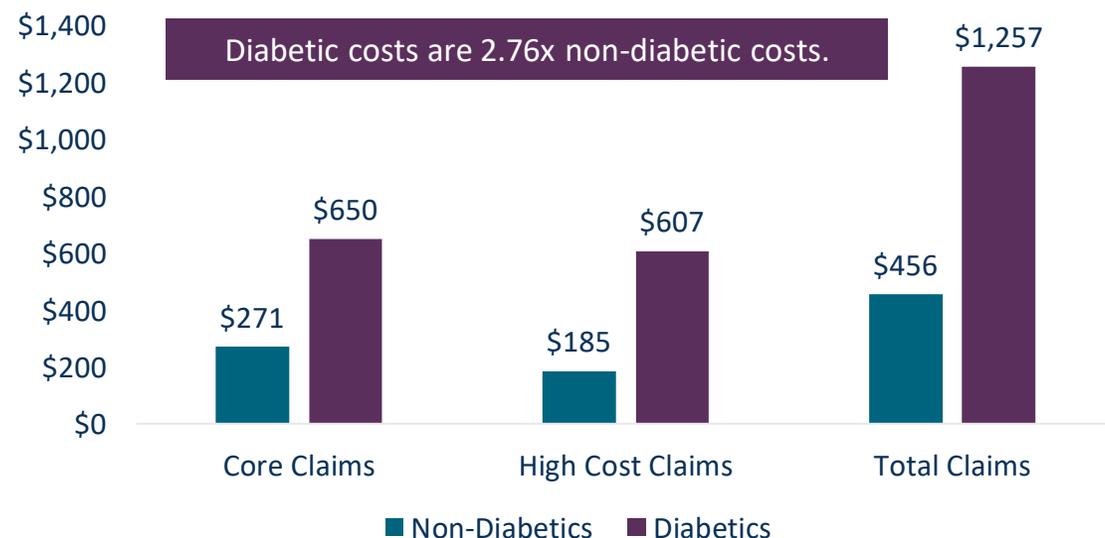
Top 3 Chronic Conditions	Spouses Prevalence	Number of Spouses	Employees Prevalence	Number of Employees
Hypertension	33%	608	27%	2,546
Diabetes	21%	395	16%	1,449
Hyperlipidemia	32%	592	22%	2,032

* Prevalence includes employee and spouse populations only

	Diabetic # of ER Visits	Diabetic ER Spend
Diabetic	879	\$1,340,461
Non-Diabetic	2,207	\$2,988,438

Note: the number of visits and costs are for people with a Diabetes diagnosis but the visit but is not necessarily related to diabetes.

Cost Comparison (PMPM)



Top Diabetic Comorbidities	Diabetic Prevalence FY23*	Non-Diabetic Prevalence FY23*
Hypertension	66%	23%
Hyperlipidemia	67%	16%

* Prevalence includes employee and spouse populations only

Prevalence of hypertension and hyperlipidemia is on average 3.4x higher, respectively, for diabetics versus non-diabetics. This has remained consistent with FY23.

Solutions Implemented:

- Livongo Diabetes Management Program
- Livongo Hypertension Management Program
- Wondr Health™ (Pre-Diabetes, MetS, Overweight)
- Livongo Diabetes Prevention Program

Chronic Condition Population

Diabetes HEDIS Measures:

	LDL < 100 mg/dl	LDL Test in last 12 months	HbA1c in last 12 months	Poor Diabetic Control: HbA1c > 9%	Moderate Diabetic Control: HbA1c 7%-9%	Good Diabetic Control: HbA1c < 7%
% of Diabetic Members 18-75	54.3%	99.1%	95.1%	19.2%	36.4%	44.4%

Medication Adherence

	Diabetes-Livongo Participants	Diabetes-Non-Livongo Participants
Members/Utilizers	1,110	962
Average Proportion of Days Covered Total Utilizers	93.3%	77.3%

Livongo participants have a significantly higher medication adherence (PDC > 80%) is 93.3% compared to non-participants 77.3%

Diabetic Drug Utilization & Cost (All Medications**):

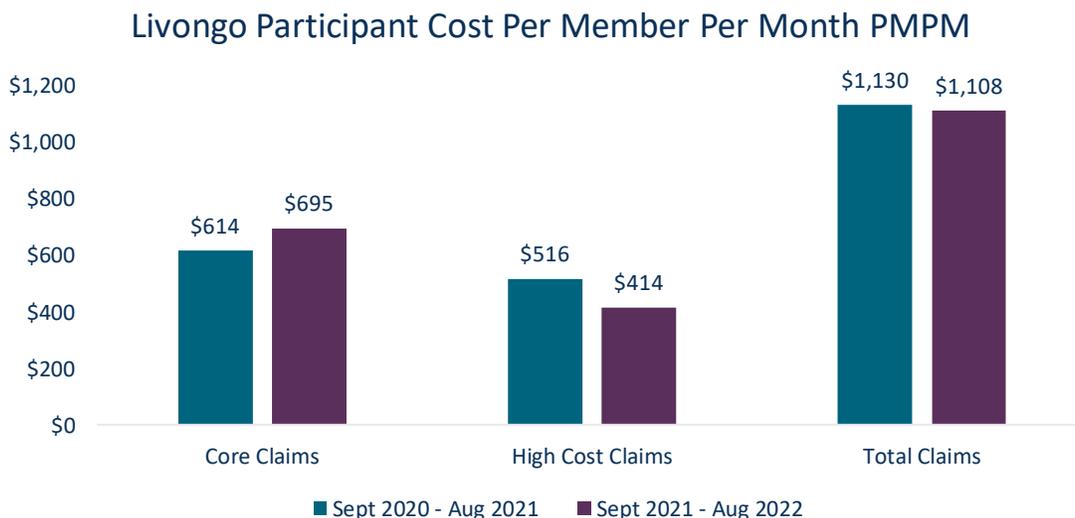
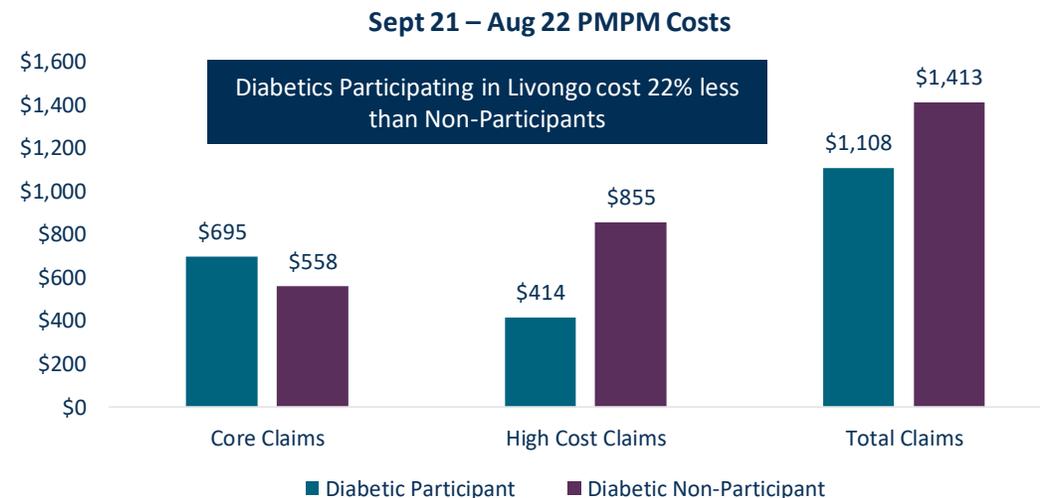
	Claimants	Total RXs	Average Drug Cost per RX	Average Member Paid Per RX	Total Plan Paid
Sept 21 – Aug 22	1,933	44,926	\$224.98	\$25.94	\$10,107,363

**Note: Includes all medications Diabetics are taking for inclusive of medications for other conditions such as hypertension as well as medications such as antibiotics, etc. EE & SP Only.

Diabetic Population – Livongo Participants

Participating in Livongo Diabetes	Count	% Engaged
Participating	1,042	55%
Not Participating	847	45%
Total	1,889	100%

55% Diabetics Engaged in Livongo during program year

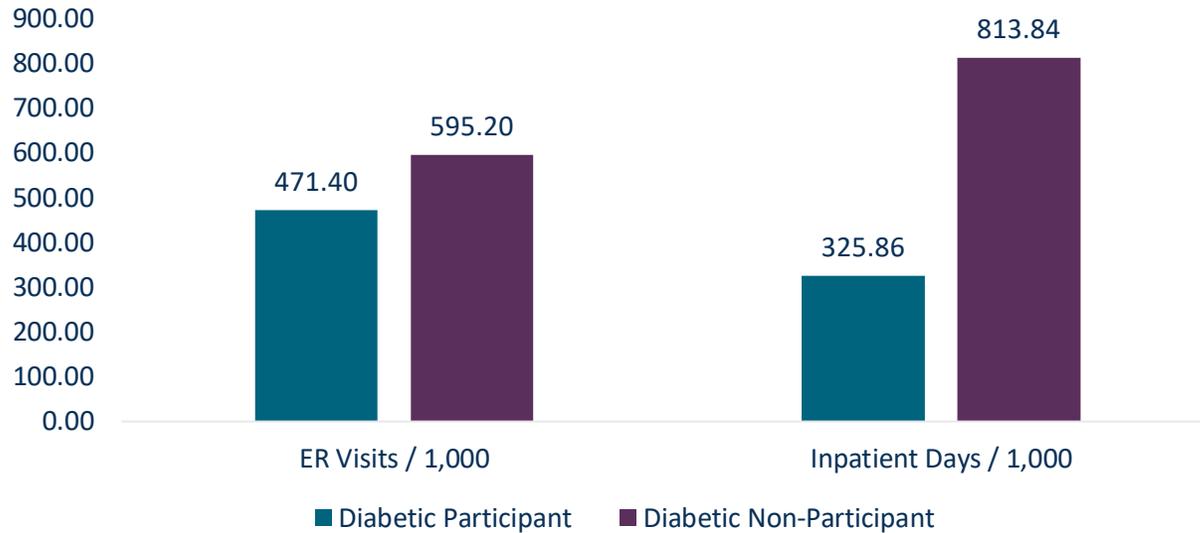


Prospective Risk Scores

Participating in Livongo	Count	Prospective Risk Score
Participating	1,042	3.34
Not Participating	847	3.12
Total	1,889	

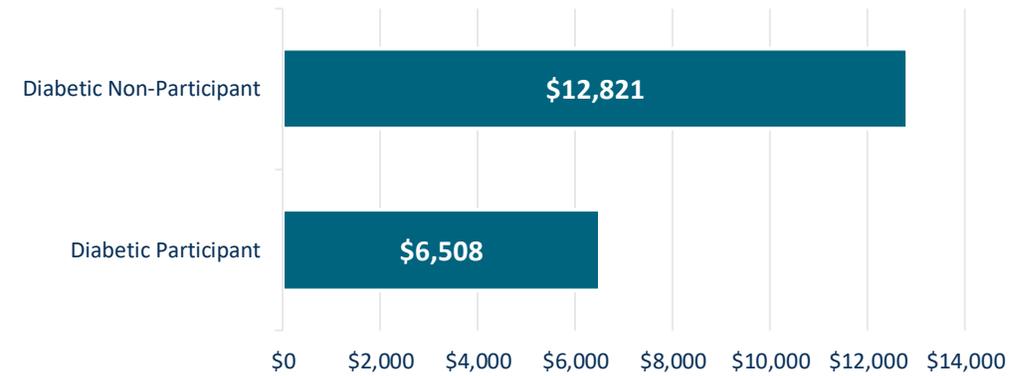
Diabetic Population – Livongo Participants

Livongo Diabetics: Participants vs. Non-Participants ER & In-Patient Days



On average, diabetics not participating in Livongo had 1.3x more ER visits and 2.5x more inpatient days than diabetics participating in Livongo

Average Medical Cost / Claimant



The average medical cost for diabetics not participating in Livongo is nearly 2x that of participating diabetics.

Average Medical Claim Cost



The average medical claim cost for diabetics not participating in Livongo is slightly more than 2x that of participating diabetics.

Diabetic Population – Livongo Participants

Livongo Participants Clinical Compliance

Clinical Measure	Percent Compliant – Livongo Participants Total	Percent Compliant – Employee	Percent Compliant – Spouse
Annual dilated eye exam	70%	69%	73%
Annual foot exam	88%	87%	89%
Annual HbA1c exam	98%	98%	99%
Annual lipid profile	97%	96%	97%
Annual LDL-C screening	97%	96%	97%
Pneumonia vaccine*	N/A	N/A	N/A
Flu vaccine	N/A	99.5%	N/A
Preventive visit	95%	94%	96%

*Pneumonia vaccine administered once per lifetime, and is generally recommended to high risk diabetics, and diabetics over 65. Post-65 retirees do not participate in Livongo program

Greatest opportunity for improvement continues to be annual dilated eye exams.

Diabetic Population – Livongo Participants

Livongo Participants Clinical Compliance

Clinical Measure	Livongo – September 2020 – August 2021	Livongo – September 2021 – August 2022	Risk Shift
LDL < 100 mg/dL	58.3%	54.4%	↓ 3.9%
Total Cholesterol < 200 mg/dL	78.7%	77.0%	↓ 1.8%
HDL < 50 mg/dL for Females / < 40 mg/dL for Males	37.1%	38.3%	↑ 1.2%
Triglycerides < 150 mg/dL	70.3%	72.7%	↑ 2.3%
Glucose < 100 mg/dL	22.9%	28.9%	↑ 6.0%
Blood Pressure < 120/80 mm Hg	26.9%	27.6%	↑ 0.7%
HbA1c < 9%	83.8%	84.0%	↑ 0.3%

Clinical compliance for Livongo diabetic participants improved for most metrics with the only exceptions being **LDL** and **total cholesterol**

Diabetic Population – Livongo Participants

Diabetes HEDIS Measures for Livongo Participants:

	LDL < 100 mg/dl	LDL Test in last 24 months	HbA1c in last 12 months	Poor Diabetic Control: HbA1c > 9%	Moderate Diabetic Control: HbA1c 7%-9%	Good Diabetic Control: HbA1c < 7%
Diabetics participating in Livongo	58.0%	99.7%	97.1%	18.5%	39.9%	41.6%
Diabetics not participating in Livongo	48.5%	98.2%	93.1%	20.3%	27.7%	52.0%

Livongo Participants:

- The average HbA1c of all participants in Livongo increased by 0.02
- The average HbA1c for participants with an average HbA1c ≥ 9 decreased by 0.06. Reductions are correlated to cost savings and reduced health risks
- Compliance with HEDIS measures are generally higher for Livongo participants than non-participants
- Livongo participants experienced a net improvement of 4.7% in their biometric clinical risks
- The program is engaging diabetics who need assistance with self-management

All Diabetics:

- 44% of all diabetics are in good diabetic control <7%
- 66% of Diabetics also have hypertension
- 67% of Diabetics also have hyperlipidemia
- Prevalence of hypertension and hyperlipidemia is on average 3.4 times higher, respectively, for diabetics versus non-diabetics
- Diabetic costs are on average 2.8x non-diabetic costs

Solutions:

- Livongo Diabetes Management Program, Livongo Hypertension Management Program, Livongo Diabetes Prevention Program, Wondr Health™ (Weight Management) and Nutrition Counseling

Chronic Condition Population

Diabetic Drug Utilization & Cost by Livongo Engagement:

Sept 21 – Aug 22	Claimants	Total RXs	Average Drug Cost per RX	Average Member Paid Per RX	Total Plan Paid
Diabetics participating in Livongo	927	7,545	\$618.86	\$28.32	\$4,669,292
Diabetics not participating in Livongo	618	3,061	\$489.60	\$65.83	\$1,498,671

Note: Diabetic medication specifically; excludes other non-diabetic medications participants may be taking

Diabetic Drug Utilization & Cost (All Medications):

Total Drug Utilization	Claimants	Total RXs	Average Drug Cost per RX	Average Member Paid Per RX	Total Plan Paid
Sept 21 – Aug 22	1,933	44,926	\$224.98	\$25.94	\$10,107,363

Note: Includes all medications Diabetics are taking for inclusive of medications for other conditions such as hypertension as well as medications such as antibiotics, etc. EE & SP Only.

Livongo Diabetes Management

Program Engagement Overview

Average 90 day member engagement rates (% of activated)



87%

Device monitoring

Connected blood glucose meter usage



77%

Self-guided activity

Email opens, log-ins, health summary report sharing, food logs



57%

Digital coaching

Health nudges, 5-day challenges, action plans



11%

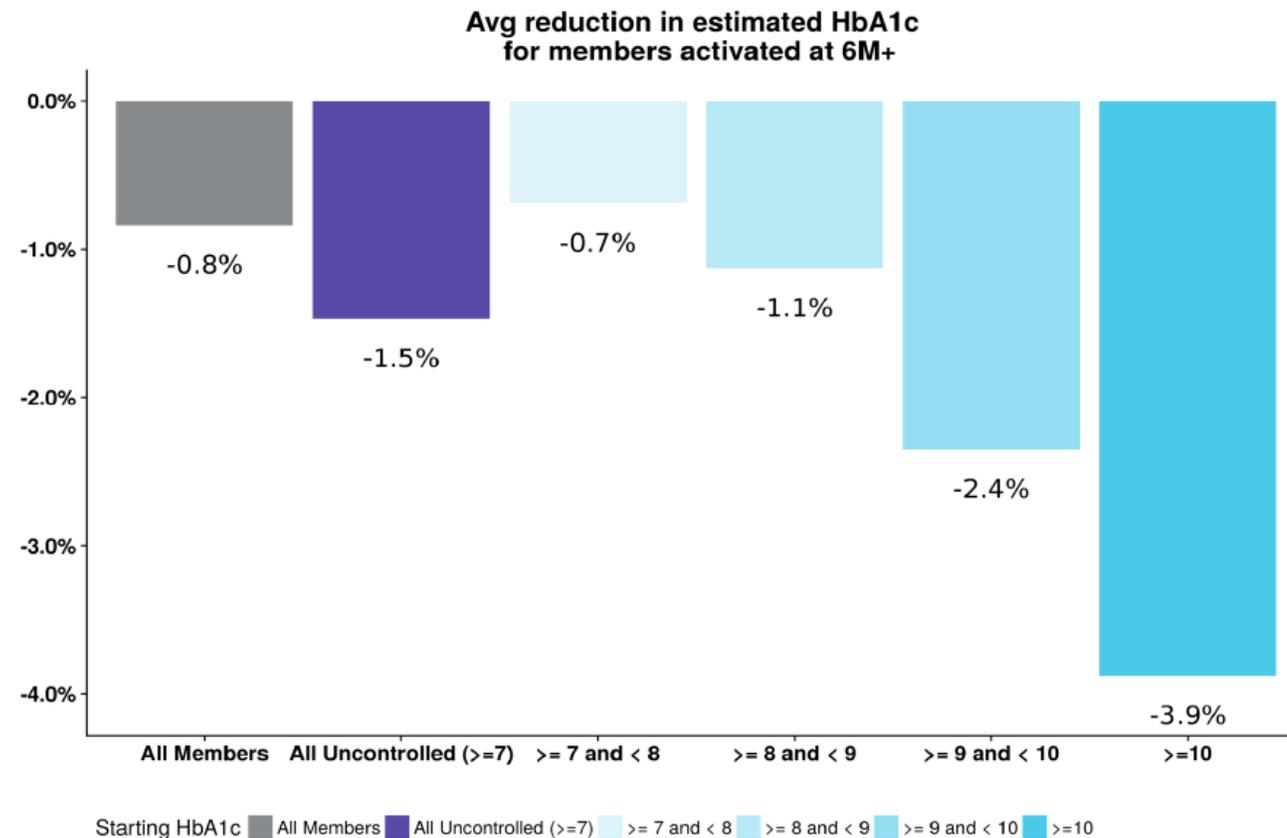
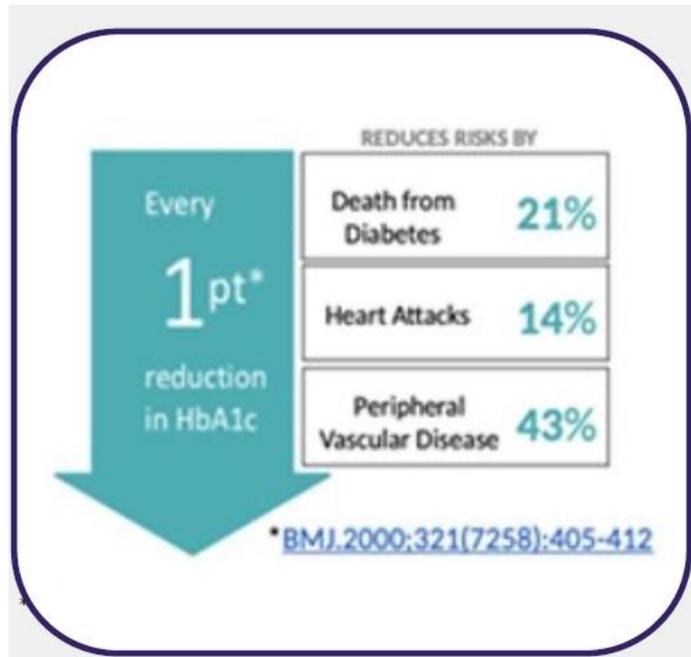
Expert coaching

Alert-based, on-demand, and scheduled coaching

Members engage with Livongo on average 18 times per month

Livongo Diabetes Clinical Results: eHbA1c

Clinical Outcomes: eHbA1c Reduction



Harris Health members who started uncontrolled (HbA1c >= 7%) have experienced a **1.5% decrease in eHbA1c** from the self reported values at registration

Diabetic Population – Livongo Participants

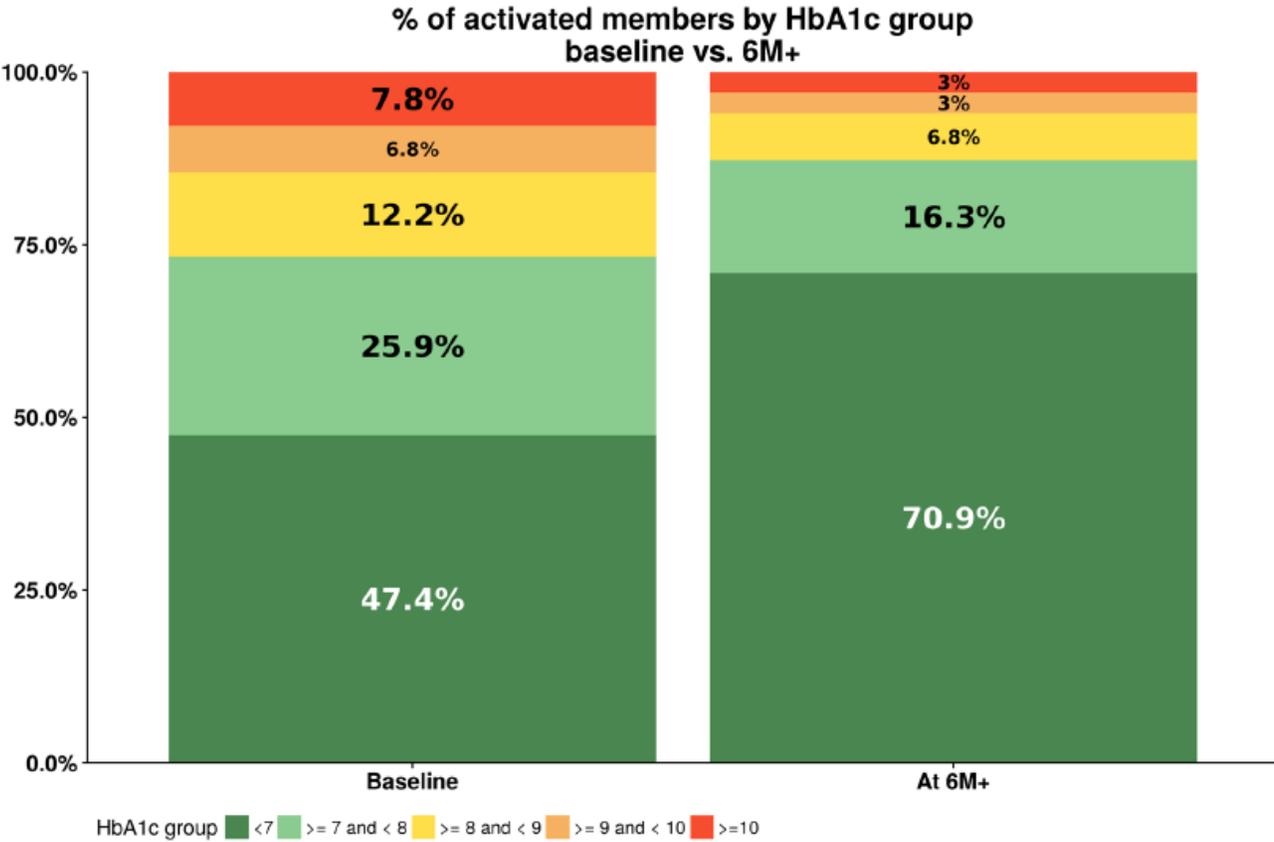
Livongo Diabetes Management Participants Clinical Outcomes:

Diabetes management

For members enrolled at least 6M, the share of members with **controlled diabetes (HbA1c < 7%)** has increased from 47.4% at baseline to 70.9%.

The share of members with **HbA1c > 8**, which indicates an **above-normal BG**, has decreased from 26.7% at baseline to 12.7%.

Clinical Outcomes: Diabetes Movement

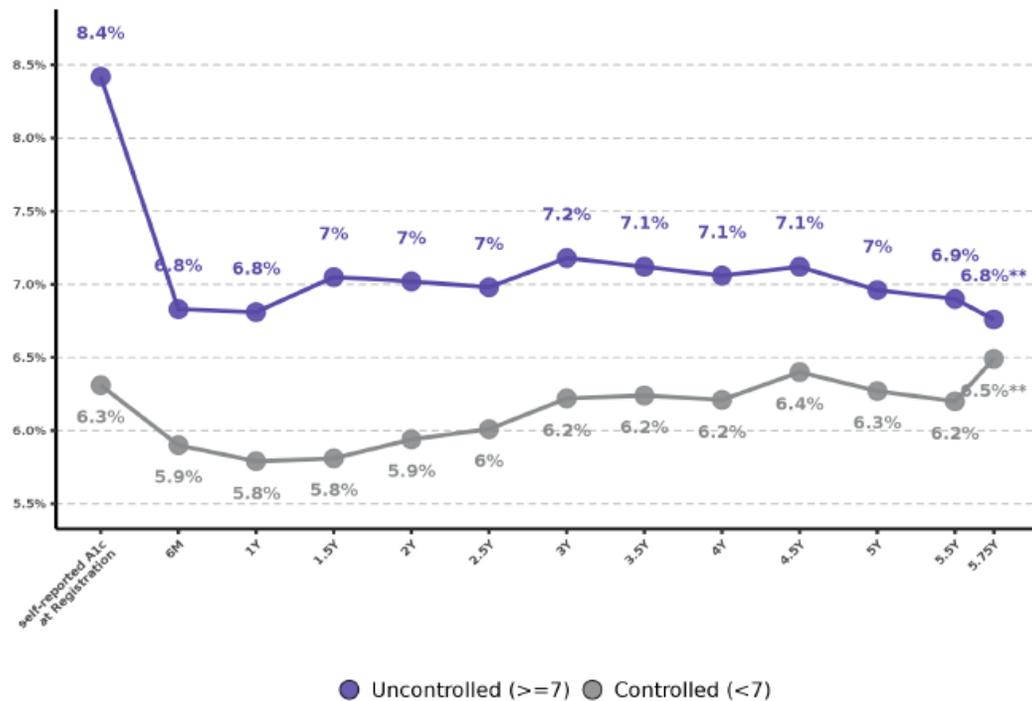


Data sources: Livongo Business Review Report March 2023

Diabetic Population – Livongo Participants

Diabetes management

Clinical Outcomes: eHbA1c Reduction Trends



- Members with **uncontrolled** starting A1c values experience a large, **sustainable A1c reduction**
- For those with **controlled** starting values, Livongo's goal is to **maintain control in the 6 – 7 %** range set by ADA

REDUCES RISKS BY

Every 1 pt* reduction in HbA1c	Death from Diabetes 21%
	Heart Attacks 14%
	Peripheral Vascular Disease 43%

*BMJ.2000;321(7258):405-412

	Reg	6M	1Y	1.5Y	2Y	2.5Y	3Y	3.5Y	4Y	4.5Y	5Y	5.5Y	5.75Y
Starting controlled N	233	128	124	115	104	108	95	81	75	66	52	45	21
Starting uncontrolled N	265	144	129	128	121	93	86	88	81	60	49	46	23

**Due to the small cohort size, the reported average reduction may vary substantially across reporting periods



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The diabetes management program estimates A1c values (eA1c) from blood glucose values using the ADAG model [http://care.diabetesjournals.org/content/31/8/1473]. Any member who has a starting self-reported A1c value and an eA1c value is represented in this analysis; the average member reduction in eA1c from the starting self-reported value is used to extrapolate the eA1c trendline.

Diabetic Population – Livongo Participants

Diabetes management

Device Monitoring: Alerts Details

(Last 90 days)

510

Number of alerts

135

(14% of activated)

Number of alerted members

4

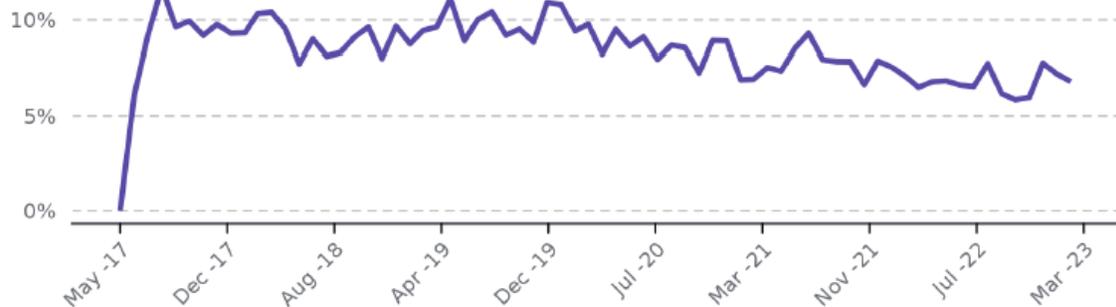
Average alerts / member



Alert type distribution



% of activated members who received alerts since launch (by month)



Low = Below self-defined lower limit or <50 mg/dL
 High = Above self-defined upper limit or >=400 mg/dL
 Both = Members who received low and high alerts
 Note: Each member can fall in only one "Alerted Members" group

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Livongo Diabetes Empowerment & Distress Scale

Clinical outcomes: Diabetes Empowerment & Distress Scales

Diabetes Empowerment Scale (DES)	Pre-program	Last survey	Change
I am able to turn my diabetes goals into a workable plan.	4.14	4.39	0.25
I can ask for support for having and caring for my diabetes when I need it.	4.17	4.51	0.34
I can find ways to feel better about having diabetes.	4.05	4.28	0.23
I can try out different ways of overcoming barriers to my diabetes goals.	4.23	4.39	0.16
I know enough about myself as a person to make diabetes care choices that are right for me.	4.15	4.47	0.32
I know the positive ways I cope with diabetes-related stress.	3.97	4.30	0.33
I know what helps me stay motivated to care for my diabetes.	4.17	4.43	0.26
I know what part(s) of my diabetes I am dissatisfied with.	4.08	4.18	0.10

Diabetes Distress Scale (DDS)	Pre-program	Last survey	Change
Feeling overwhelmed by the demands of living with diabetes.	2.14	1.95	-0.19
Feeling that I am often failing with my diabetes routine.	2.26	1.90	-0.36

- DES is measured on a scale of 1 - 5, with 5 being the most empowered
- DDS is measured on a scale of 1 - 6, with 1 being the least distressed
- 865 client last survey respondents and 601 client pre-program survey respondents

Our mission is to empower people with chronic conditions to live a better life.

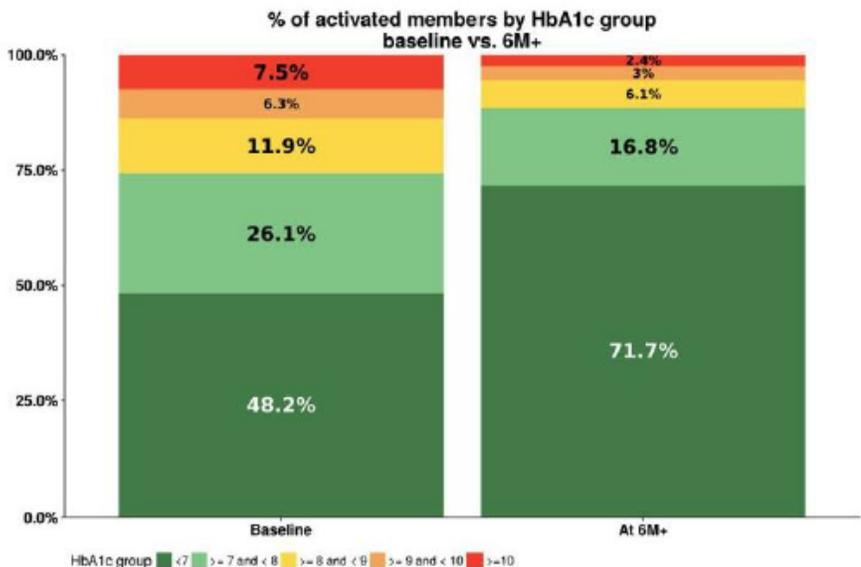
Improvements in the **Diabetes Empowerment Scale** indicate people are **increasingly confident** in their ability to **successfully manage their diabetes** and **improve their blood glucose control**.

Diabetes Distress Scale measures the unique, often **hidden emotional burdens** and worries with chronic disease management.

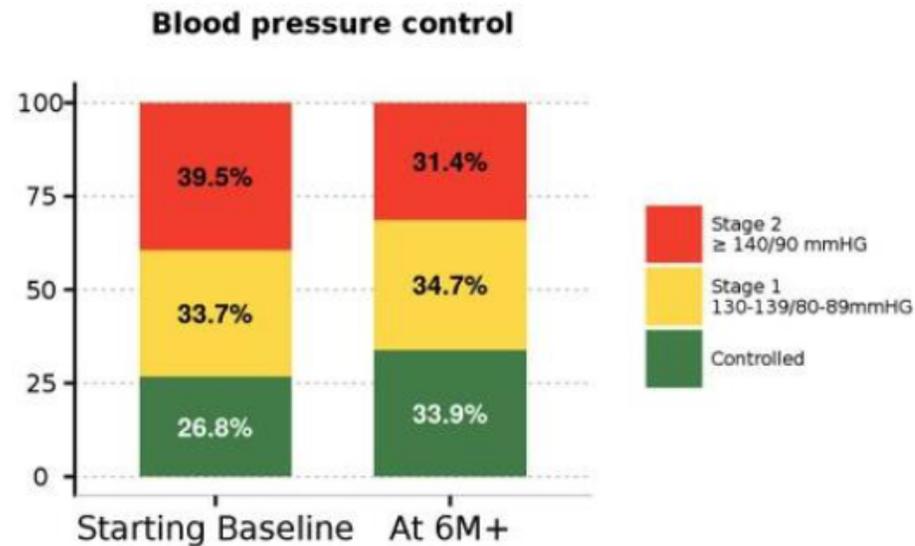
High levels of diabetes distress have been significantly associated with poor glycemic control.

Livongo Diabetes Program ROI Analysis

Executive Summary



+77
NPS Score



Medical & Pharmacy Savings

Diabetes YoY:
\$69 PMPM
1.4 x ROI

Hypertension YoY:
\$45 PMPM
2.2x ROI

Livongo Diabetes Program ROI Analysis

Medical Spending

- Positive ROI seen in all years (year 1 – year 5)
- 13% decrease in total medical spending for Livongo members versus the prior program year
- Medical cost reduction was driven by decreases in condition related expenses
- ROI for medical cost:
 - Year 1: Decrease 23%; \$54 PMPM
 - Year 2: Decrease 32%; \$80 PMPM
 - Year 3: Decrease 33%; \$84 PMPM
 - Year 4: Decrease 70%; 188 PMPM
 - Year 5: Decrease 13%; \$62 PMPM (from prior program year)

Pharmacy Spending

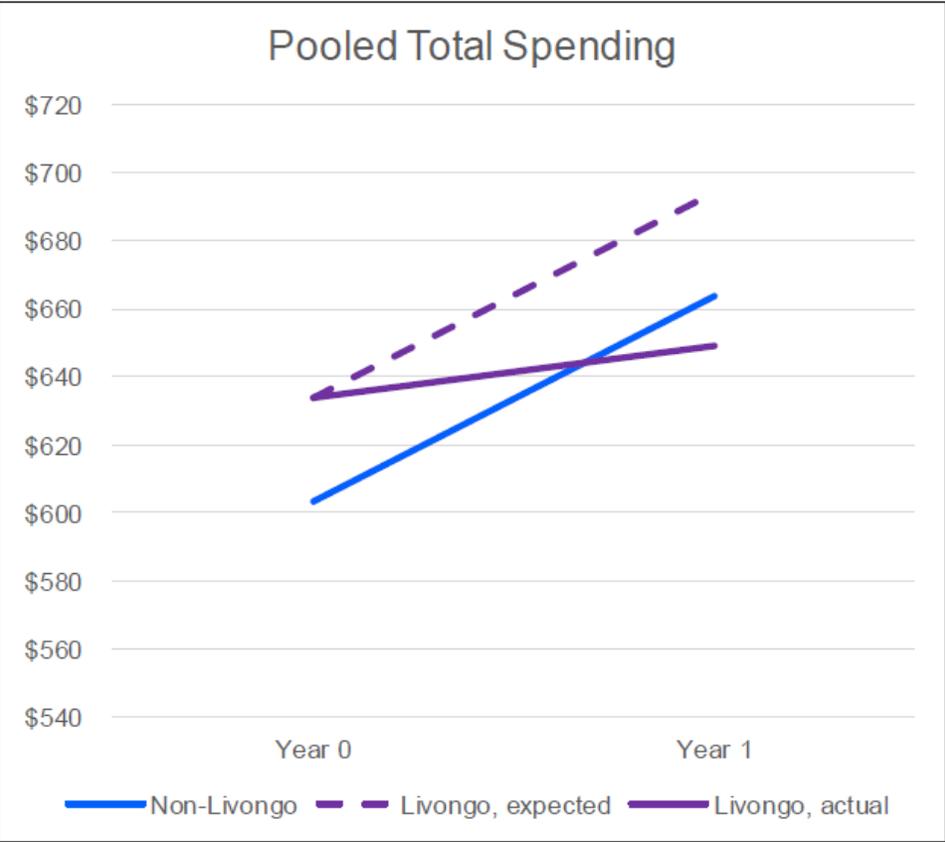
- -Decreased total pharmacy costs by 12% over prior program year; even with increased medication adherence due to free DM Rx for engaged participants
 - Year 1: Increase 5%; \$16 PMPM
 - Year 2: Increase 7%; \$22 PMPM
 - Year 3: Decrease 7%; \$19 PMPM
 - Year 4: increase 1%; 54 PMPM
 - Year 5: Decrease 12%; 7 PMPM (from prior program year)

Overall ROI

- Pooled ROI for medical and Rx cost:
 - Year 1: 1.2x ROI; \$38 PMPM
 - Year 2: 1.9x ROI; \$58 PMPM
 - Year 3: 2.1x ROI; \$65 PMPM
 - Year 4: 4.3x ROI; \$135 PMPM
 - Year 5: 1.4x ROI; \$69 PMPM; a total savings of \$862, 776

Livongo Diabetes Program ROI Analysis

Total Spending - YOY Diabetes ROI



Group	Year 0	Year 1
Non-Livongo	\$ 648	\$ 758
Livongo, expected	\$ 830	\$ 941
Livongo, actual	\$ 830	\$ 872

	YoY (N=532)
Net Medical Costs	-13% (\$62 PMPM medical savings)
Net Pharmacy Costs	-12% (\$7 PMPM pharmacy savings)
ROI	$\$69 \div (\$68 - \$30) = 1.4$

\$68: Livongo PMPM fee
 \$30: Diabetes Supply Cost



Livongo Diabetes Program ROI Analysis

Cohort Details

Cohorts	Activation Timeframe	N
Year 5 or more on program	09/2017 - 08/2018	237
Year 4 on program	09/2018 - 08/2019	119
Year 3 on program	09/2019 - 08/2020	84
Year 2 on program	09/2020 - 08/2021	62
Year 1 on program	09/2021 - 08/2022	30
Total		532

Population Attrition Description

Criteria	Non-Member		Member	
	Count	Percent	Count	Percent
Ever activated members			1596	
Total unique number of PwDs found in claims within study period	789		932	
Age below 65	725	92%	821	88%
Pre-launch and post-launch eligible	472	60%	745	80%
Enrolled in Livongo for more than 3 months	--	--	741	80%
Final Number*	532		532	

*Non-members were matched with replacement
 Data sources: Harris Health System – Livongo ROI Analysis May 2023

Livongo Diabetes Program ROI Analysis

Pooled Spending Summary - Diabetes

	Non-member			Member			DID Y1 vs Y0
	Y0	Y1	% Diff Y1 vs Y0	Y0	Y1	% Diff Y1 vs Y0	
Total costs	\$ 475	\$ 551	16%	\$ 473	\$ 487	3%	-13%
Diabetes-related	\$ 25	\$ 38	54%	\$ 46	\$ 40	-12%	-65%
Cholesterol-related	\$ 1	\$ 1	114%	\$ 1	\$ 1	0%	-114%
Hypertension-related	\$ 16	\$ 16	4%	\$ 9	\$ 7	-26%	-30%
MSK-related	\$ 12	\$ 26	105%	\$ 21	\$ 31	48%	-57%
ER visits	\$ 15	\$ 11	-27%	\$ 9	\$ 9	10%	37%
Inpatient hospital, non-ER visits	\$ 112	\$ 143	28%	\$ 114	\$ 116	2%	-26%
Outpatient hospital, non-ER visits	\$ 205	\$ 214	4%	\$ 197	\$ 193	-2%	-6%
Office visits	\$ 73	\$ 83	14%	\$ 72	\$ 88	22%	8%

Pharmacy	Non-Member			Member			DID Y1 vs Y0
	Year 0	Year 1	% Diff Y1vsY0	Year 0	Year 1	% Diff Y1vsY0	
Total costs	\$ 172	\$ 207	20%	\$ 357	\$ 384	8%	-12%
Diabetes-related	\$ 94	\$ 117	24%	\$ 277	\$ 300	8%	-16%

Disease-related costs are identified by ICD-10 codes and one claim can have multiple ICD-10 codes associated to it, therefore, they are not mutually exclusive groups and will not sum to the Total Medical Costs (PMPM).

Place of Service costs are mutually exclusive groups and will have a sum close to the Total Medical Costs (PMPM). Not all categories are represented in the table.



by Teladoc

Livongo Diabetes Program ROI Analysis

ROI Methodology Overview



Approach

Difference-in-difference (DID) comparison of total allowed amount of medical spending (PMPM) one year prior to index date (Year 0) compared to year(s) following index date (Year 1) for members vs. non-members.

Inclusion Criteria (Members & Non-Members):

Eligible for health benefits for entire study period

Age < 65

Members activated in Livongo > 3 months

Annual medical costs capped at \$100K or the 95th percentile



Matching

Members propensity score matched 1:1 with non-members using age, gender, Charlson Comorbidity Score and pre-period total medical costs. Exact match on cost bands.

Study Time Periods

Study Index Date: 2021/09/01

Pre-Period, Year 0: 2020/09/01 - 2021/08/31

Post-Period, Year 1: 2021/09/01 - 2022/08/31



Member Satisfaction Survey & NPS

Net Promoter Score (NPS): The overall Livongo Net Promoter Score among Harris Health Members is +77

Harris Health System
NPS score

+77

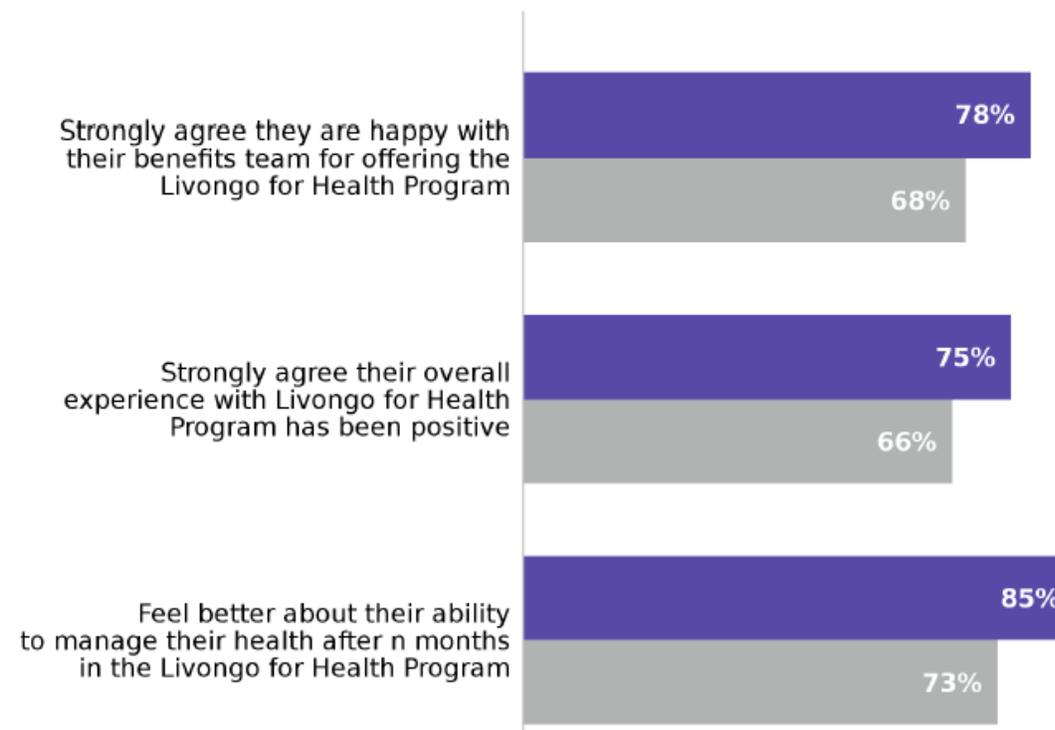
NPS is an index from -100 to 100 that measures a member's willingness to recommend a company's products or services.

Members Love Programs

Member satisfaction & NPS

n= 1,630 Client respondents
n= 293,092 CCM program average respondents

■ Harris ■ CCM program average



Livongo Hypertension Management Program

Livongo Hypertension Management Program

- Program designed to empower participants with the latest technology, information and coaching to more effectively manage their Hypertension.
- Livongo is FREE program provided to Harris Health System employees, spouses and pre-65 retirees who have Hypertension and are enrolled in the Harris Health System Medical Plan.
- Our Goals:
 - Achieve \geq 40% enrollment and engagement in the Livongo Hypertension Management Program.
 - Program-year enrollment =49%; a 4% increase from the prior program year
 - Decrease ER visits and complications associated with Hypertension
 - On average, Hypertension members not participating in Livongo are 1.4x less likely to have an ER visit.
 - On average, Hypertension members participating in Livongo are 1.6x less likely to have inpatient days compared to non-participants.
 - Livongo HTN participants cost 6% less than non participants; a difference of \$249 PMPM; a total difference of \$5,575,608 per year.
 - Improve % of participants that have a controlled blood pressure
 - 78% of members maintained or improved blood pressure control
 - Livongo participants have a significantly higher medication adherence (PDC > 80%) is 89.3% compared to non-participants 79.6%
 - Achieve Blood pressure reductions of 10 mmHg and reducing risk of coronary heart disease and stroke*
 - Members saw an reduction of 6.4 mmHg reduction in systolic blood pressure and 4.5 mmHg in diastolic blood pressure, resulting in risk reduction of coronary heart disease events and stroke
 - Improve clinical compliance with HEDIS measures and Quality metrics
 - Livongo HTN participants are meeting quality metrics 20% more than non-participants
 - Achieve positive participant feedback that Livongo is easy to use and is a valuable resource in better self management.
 - Net promoter score of +77; positive testimonials
 - Achieve ROI & VOI (Value on Investment)
 - Pooled ROI for medical and Rx cost:
 - 2.2x ROI; \$45 PMPM; a total savings of \$860,760

*[BMJ](#). 209; 338: b1665.

Livongo Hypertension Management Program

The Livongo Hypertension Management Program includes:



- A free connected blood pressure monitor
- Instant, personalized tips with each blood pressure check
- Real-time support when participants are out of range
- Data Sharing with Family and Health Providers directly from the meter, app or portal
- Automatic uploads for better reporting and management
- Unlimited, personalized coaching
- Informative resources and learning tools help participants improve their lifestyle, manage their Hypertension and improve their health
- Available via desktop, laptop or mobile device including apps for both iPhone and Android devices

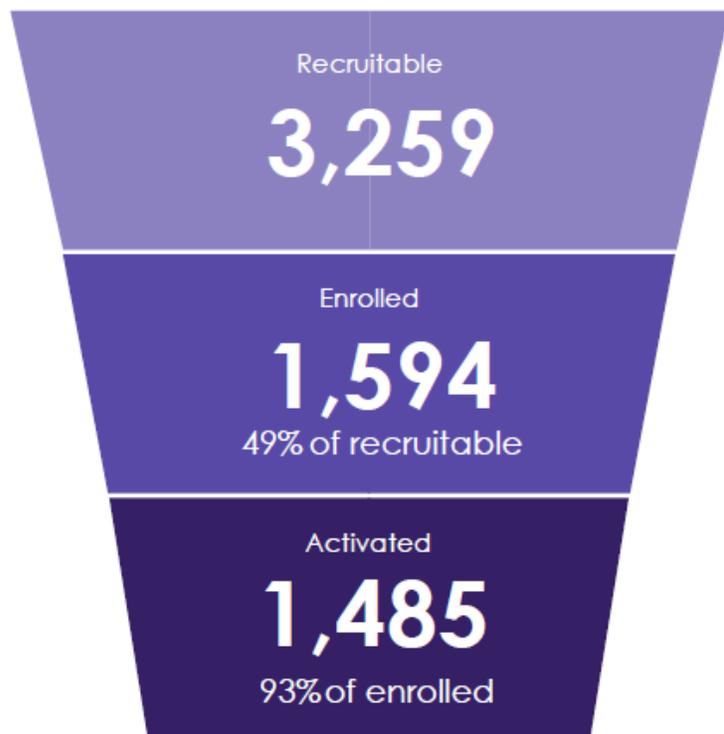
Livongo Hypertension Management Executive Summary

- **Hypertensives participating in Livongo cost 6% less** than non participants; a difference of \$249 PMPM; a total difference of \$5,575,608 per year.
- **High member satisfaction** – Based on survey feedback, the overall Livongo Net Promotor Score (NPS) among Harris Health members is +77.
- **Strong engagement results** – 49% participants with Hypertension engaged in Livongo during the program year; a 4% increase from the prior program year
- **Reduced blood pressure readings** – Members saw an reduction of 6.4 mmHg reduction in systolic blood pressure and 4.5 mmHG in diastolic blood pressure, resulting in risk reduction of coronary heart disease events and stroke
 - 78% of Livongo participants maintained or improved blood pressure control
 - 86% completed the ‘Drive-to-5’ to establish checking patterns in the first 30-days to develop initial personalized interventions
 - Average of 22 blood pressure checks per month for participants who checked at least once per month
- **Improve clinical compliance with HEDIS measures and Quality metrics** —
 - On average, Hypertension members participating in Livongo are 1.4x less likely to have an ER visit.
 - On average, Hypertension members participating in Livongo are 1.6x less likely to have inpatient days compared to non-participants.
 - Livongo HTN participants are meeting quality metrics 20% more than non-participants
 - Achieve Blood pressure reductions of 10 mmHg and reducing risk of coronary heart disease and stroke
 - Achieved positive risk shift in participants; Achieved 32.7% controlled versus 27.5% at baseline. Achieved 35.5% in Stage 1 HTN compared to 33% at baseline. Achieved 31.8% in Stage 2 HTN compared to 39.5% at baseline
- **Medication Adherence:**
 - Livongo participants have a significantly higher medication adherence (PDC > 80%) is 89.3% compared to non-participants 79.6%
- **Achieve ROI & VOI (Value on Investment)**
 - Pooled ROI for medical and Rx cost:
 - 2.2x ROI; \$45 PMPM; a total savings of \$860,760
 - Clinical improvements
 - Net promoter score of +77 positive testimonials

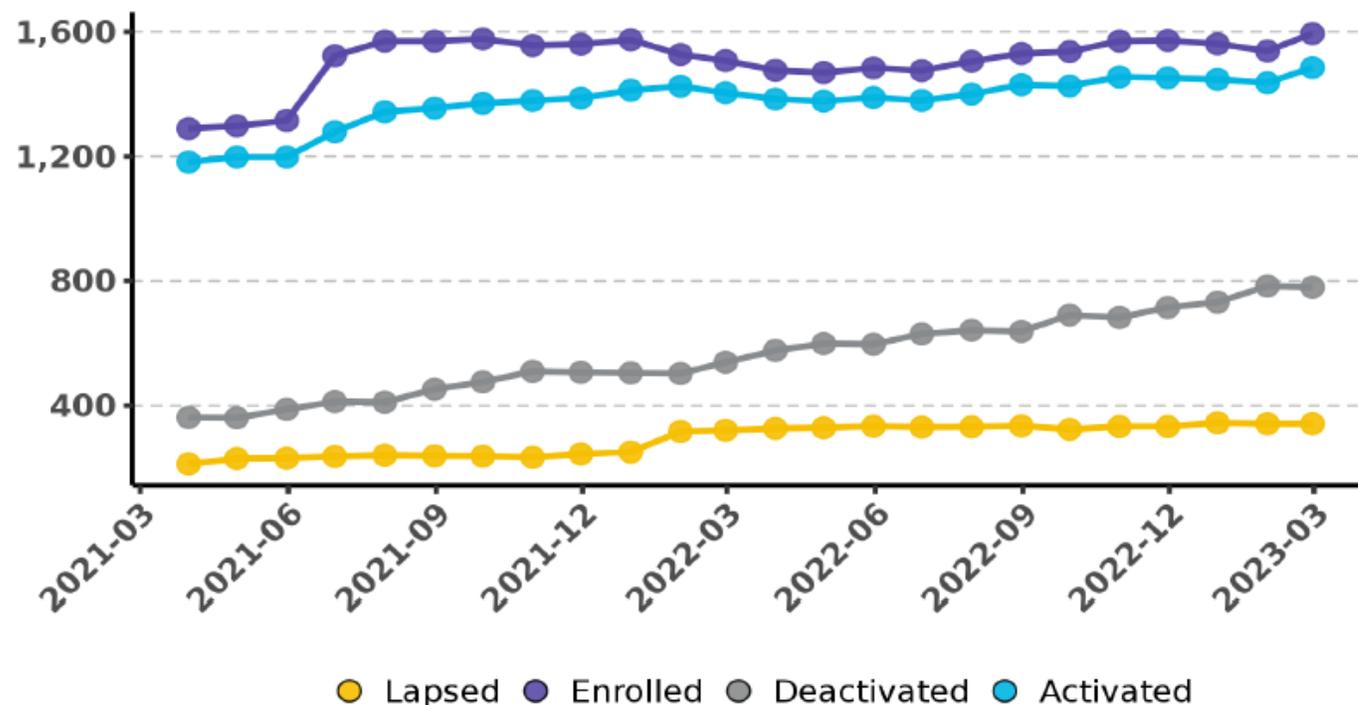
Livongo Hypertension Management Program Enrollment

Hypertension management

Enrollment & Activation Dashboard



Hypertension enrollment and activation trends

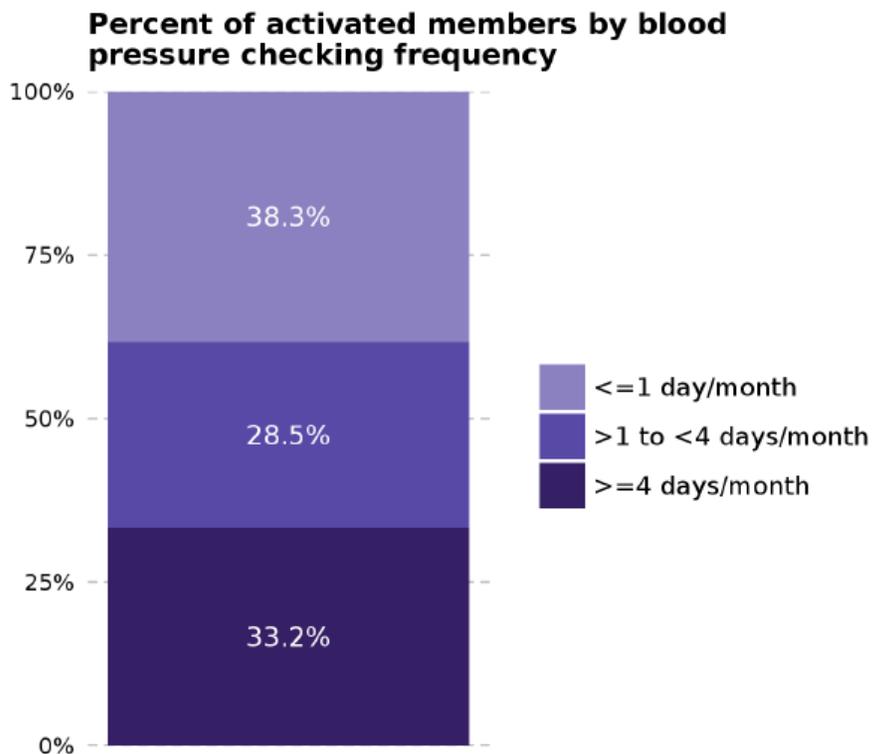


Recruitable: Number of people who are eligible for the program
Enrolled: Number of members who registered and successfully enrolled
Activated: Number of members who used the device for a first blood pressure reading
Lapsed: Number of members who as not used BP device in 6 months (Lapsed User Clause)
Deactivated: Number of members who are no longer eligible for the benefit

Livongo Hypertension Management Device Monitoring

Hypertension management

Device Monitoring Dashboard (Last 90 days)



22x **Average checks per member**
 Across members who checked their blood pressure at least once in the last 90 days

61% **Active 30**
 Percentage of activated members who used their blood pressure device at least once in the last 30 days

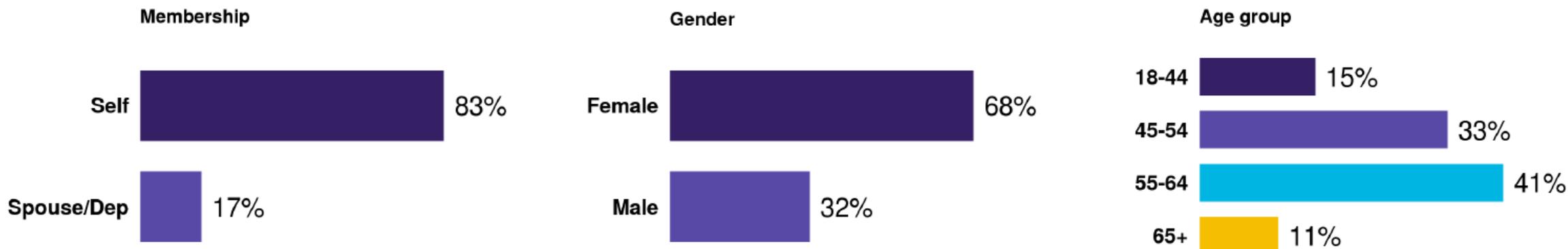
86% **Drive-to-5**
 Percentage of activated members who have successfully logged at least 5 Blood Pressure readings within the first 30 days of activation



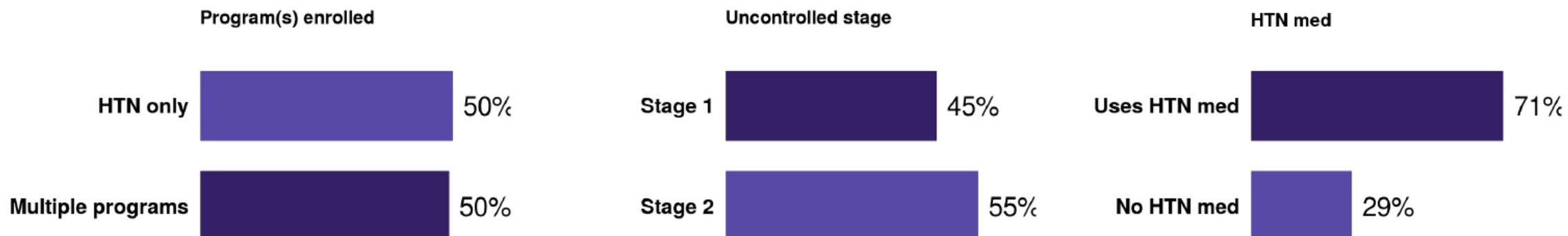
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Livongo Hypertension Management Program Enrollment

Hypertension management



Hypertension management



Note: Participants in the Livongo Hypertension program can participate in the Livongo Diabetes program or the Livongo DPP program

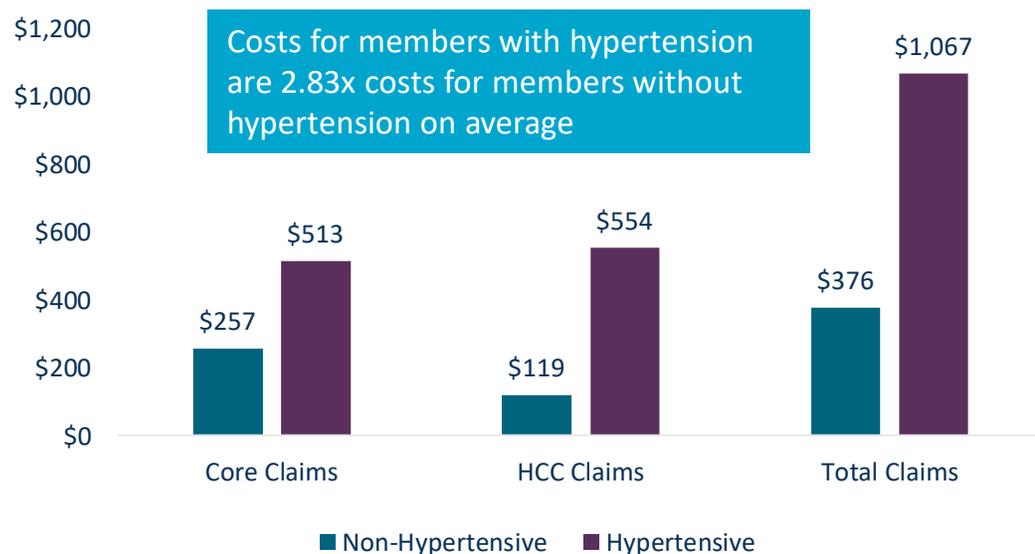
Hypertensive versus Non-Hypertensive Cost & Risk Analysis

Top 3 Chronic Conditions	Spouses Prevalence	Number of Spouses	Employees Prevalence	Number of Employees
Diabetes	42%	278	35%	988
Hyperlipidemia	66%	440	54%	1,517
Morbid Obesity	13%	87	19%	529

Hypertension Population	Hypertension ER Visits per 1000	Hypertension ER Plan Paid Avg.
Hypertension Members	429.72	\$2,627
Non-Hypertension Members	244.45	\$2,275

Hypertensive population

Cost Comparison (PMPM)



Top Hypertension (HTN) Comorbidities	HTN Prevalence FY23	Non-HTN Prevalence FY23
Diabetes	37.4%	8.2%
Hyperlipidemia	50.1%	13.3%

Prevalence of diabetes and hyperlipidemia is on average 4.1x higher, respectively, for hypertensives versus non-hypertensives.

Solutions Implemented:

- Livongo Diabetes Management Program
- Livongo Hypertension Management Program
- Livongo Diabetes Prevention Program
- Wondr Health™ Pre-Diabetes & Weight Management Program
- Onsite HbA1c Screenings

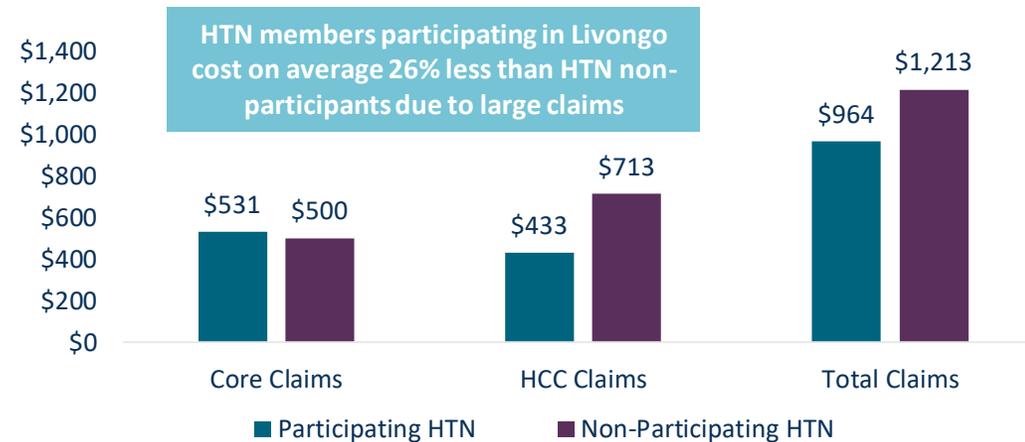
Hypertension Population – Livongo Participants

Livongo Hypertension Participation	Count	% Engaged	Prospective Risk Score
Participating	1,594	49%	2.84
Not Participating	1,665	51%	2.80
Total	3,259	100%	

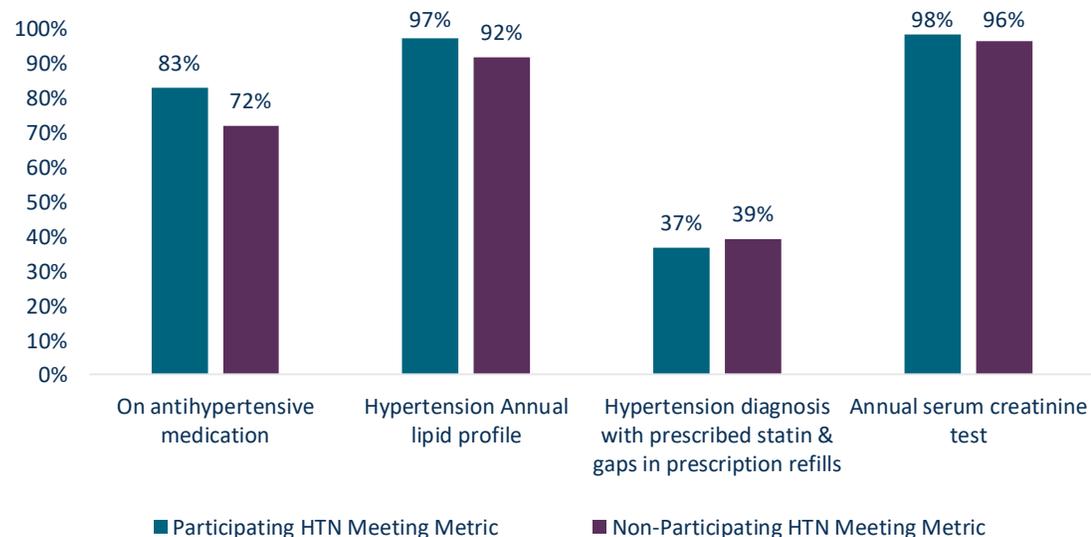
49% participants with Hypertension engaged in Livongo during the program year, a 4% increase from the prior program year

Hypertension member risk scores increased significantly from 2.39 and 2.41 in FY22 for participating and non-participating members to 2.84 and 2.80 in the current program year

Cost Comparison PMPM FY23



Quality Metrics - Hypertension



17% of the HHS non-HTN population have Pre-Hypertension & 28.6% have Hyperlipidemia

- **486** Pre-Hypertension: Systolic ≥ 120 & ≤ 139 , Diastolic ≥ 80 & ≤ 89 , and no diagnosis of Hypertension.
- **3,190** have a diagnosis of Hyperlipidemia

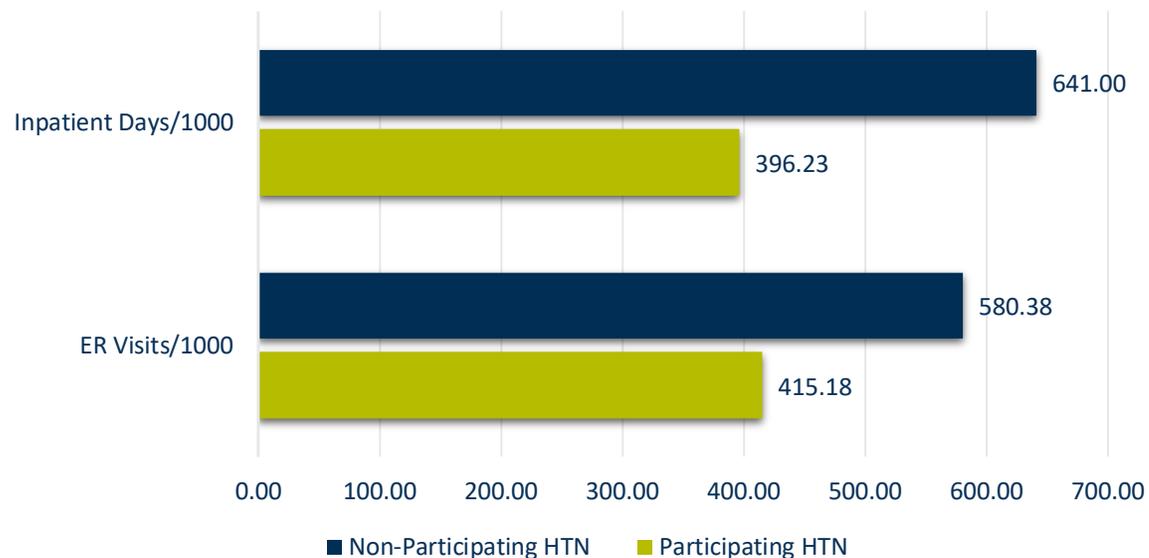
Solutions:

- Livongo Diabetes Prevention Program
- Wondr Health™ Pre-Diabetes & Weight Management Program

*Pre-Hypertension range $>120/80$ & $<139/89$ with no HTN diagnosis; Active Members with reported biometric data

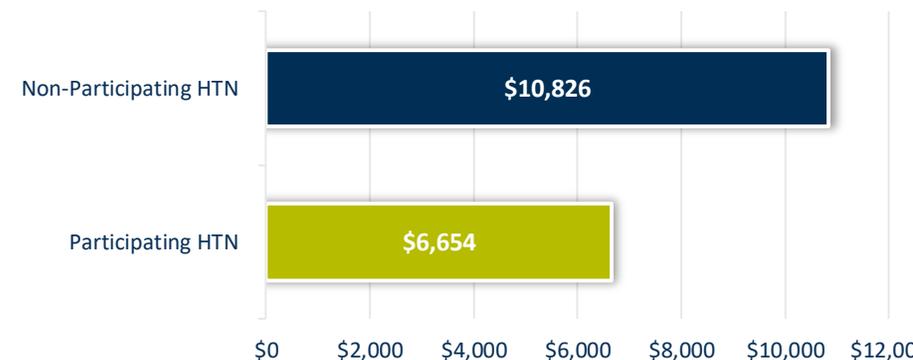
Hypertension Population – Livongo Participants

**Livongo HTN Participants vs. Non-Participants:
ER & Inpatient Days**



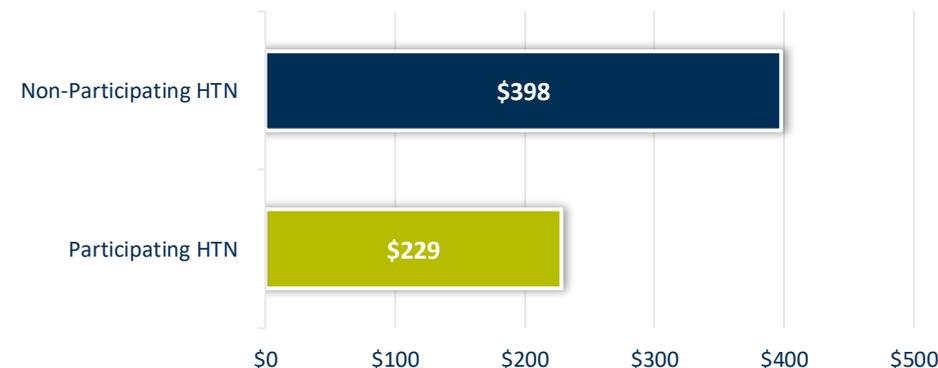
On average, hypertensive members not participating in Livongo had 40% more ER visits and 62% more inpatient days than hypertensive members participating in Livongo.

Average Medical Cost/Claimant



In FY24, the average medical cost for a hypertensive member participating in Livongo was on average 39% less than a non-participating hypertensive member.

Average Medical Claim Cost



The average medical claim cost for hypertensives not participating in Livongo was 1.74x the average medical claim cost for participating hypertensives.

Hypertension Population – Livongo Participants

Livongo Participants Clinical Compliance

Clinical Measure	% Compliant – All Livongo Hypertension Participants	% Compliant – Employee	% Compliant – Spouse
On antihypertensive medication	82.8%	83.1%	84.0%
Hypertension annual lipid profile	97.3%	97.4%	97.2%
Hypertension diagnosis and prescribed statin and gaps in prescription refills	36.7%	37.3%	33.1%
Annual serum creatinine test	98.2%	98.4%	97.6%
Preventive visit	95.0%	95.1%	95.7%

Hypertension Population – Livongo Participants

Livongo Participants Clinical Compliance

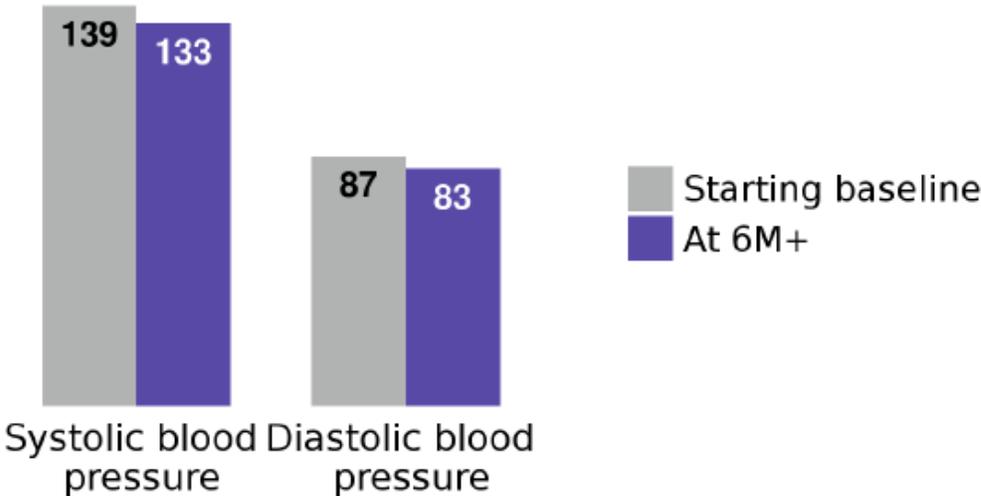
Clinical Measure	% Compliant – All Livongo Hypertension Participants	% Compliant – Employee	% Compliant – Spouse
LDL < 100 mg/dL	41.4%	40.2%	57.1%
Total Cholesterol < 200 mg/dL	66.3%	64.3%	92.9%
HDL: < 50 mg/dL for Females < 40 mg/dL for Males	30.8% F / 28.6% M	30.5% F / 30.2% M	50.0% F / 23.5% M
Triglycerides < 150 mg/dL	80.2%	80.4%	77.1%
Glucose < 100 mg/dL	57.6%	57.8%	55.0%
Blood Pressure < 120/80 mm Hg	20.4%	21.2%	16.9%
Waist Circumference: Women: < 35 inches Men: <40 inches	31.1% F / 50.3% M	31.5% F / 48.9% M	0.0% F / 66.7% M
Physical Activity: At Risk: 1-4 times (<150 min.) /week High Risk: 0 times/week	66.1% / 8.5%	67.9% / 8.7%	56.4% / 7.3%
Tobacco Use: Current Tobacco user	3.6%	3.6%	4.7%
Nutrition: At Risk: 1-2 servings of fruit, vegetables & high fiber foods/day High Risk: Rarely or never eats fruit, vegetables & high fiber foods/day	45.7% / 3.4%	46.2% / 3.4%	43.2% / 3.4%
Stress: At Risk: Sometimes stressed High Risk: High Stress	30.8% / 9.8%	32.1% / 10.9%	23.9% / 3.4%

Data source: Alliant Analytics, incurred September 2021 – August 2022, paid through October 2022. Excluding post-65 retirees, grandfathered disabled & COBRA. Employee and Spouse only. Biometric and HRA data not available for all Livongo hypertension participants during the wellness year (percentages above are based on the number of Livongo HTN participants meeting the at risk or high risk criteria out of all Livongo HTN participants with reportable biometric and HRA data).

Hypertension Population – Livongo Participants

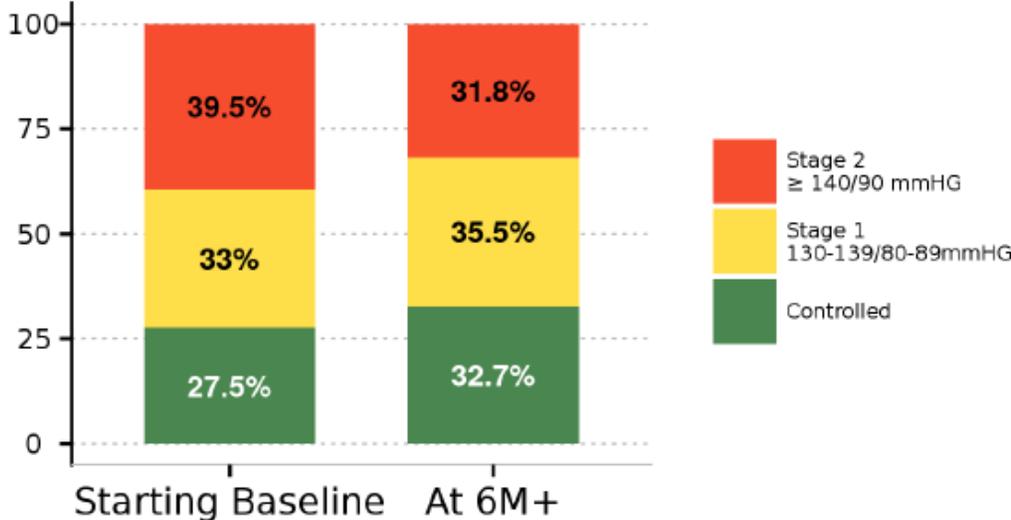
Clinical Outcomes: Blood Pressure Reduction

Blood pressure change for members starting uncontrolled (>130/80 mmHG)



For members who started uncontrolled at baseline (72% of enrolled), on average **-6.4 mmHg** reduction in systolic blood pressure was observed and a **-4.5 mmHg** reduction in diastolic blood pressure was observed at 6M+ onwards

Blood pressure control



78% Members maintained or improved blood pressure control

Hypertension Population – Livongo Participants

Livongo Hypertension Participants – Engagement

Hypertension management

Program Engagement Overview

Average 90 day member engagement rates (% of activated)



76%

Device monitoring

Connected blood pressure monitor



82%

Self-guided activity

Email opens, log-ins, health summary report sharing, food logs



43%

Digital coaching

Health nudges, 5-day challenges, action plans



2%

Expert coaching

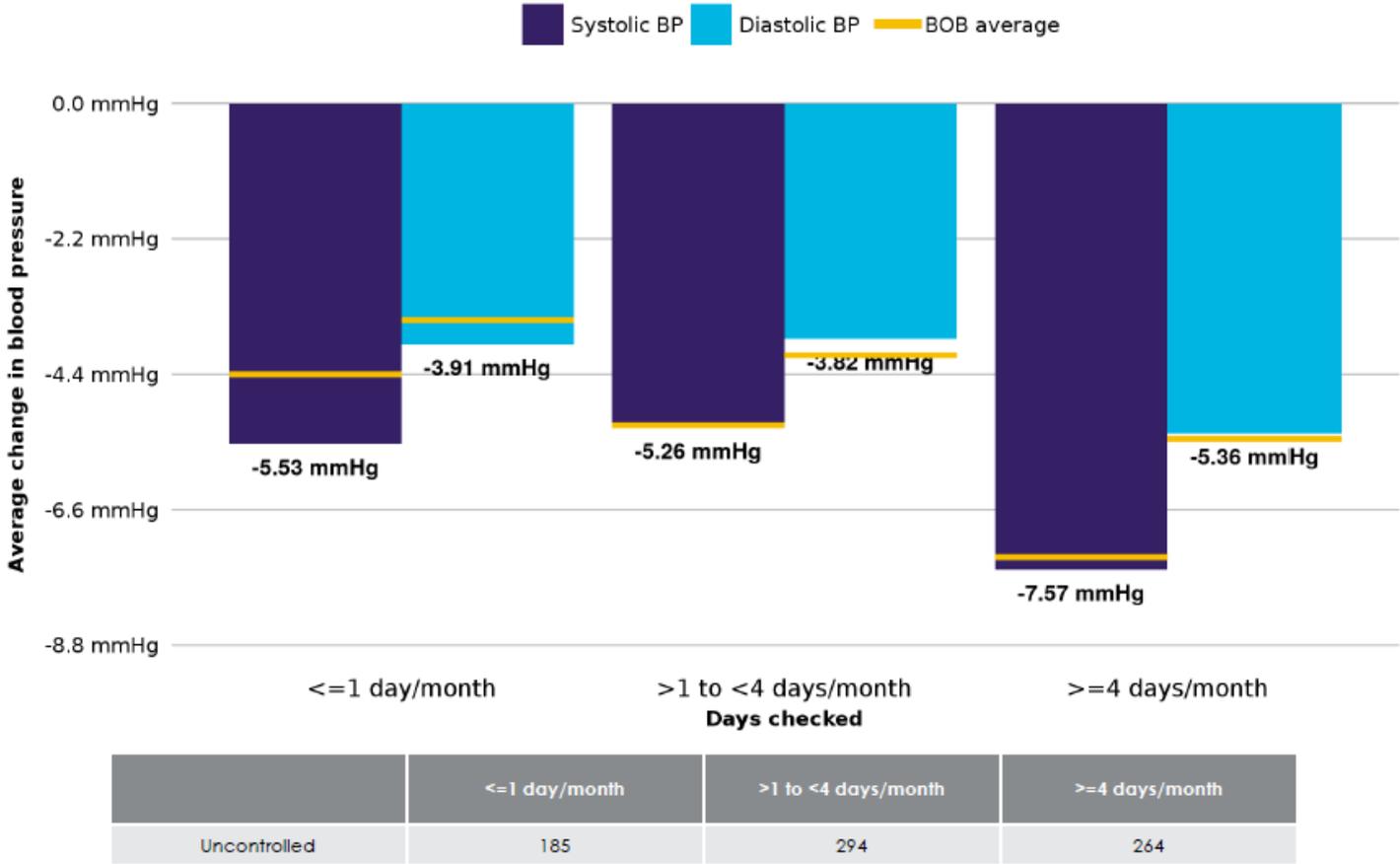
On-demand and scheduled coaching

Members engage with the hypertension management program on average **13** times per month

Hypertension Population – Livongo Participants

Device Monitoring: BP Reduction Compared To Checking Frequency

Members who started uncontrolled (Last 6 months)



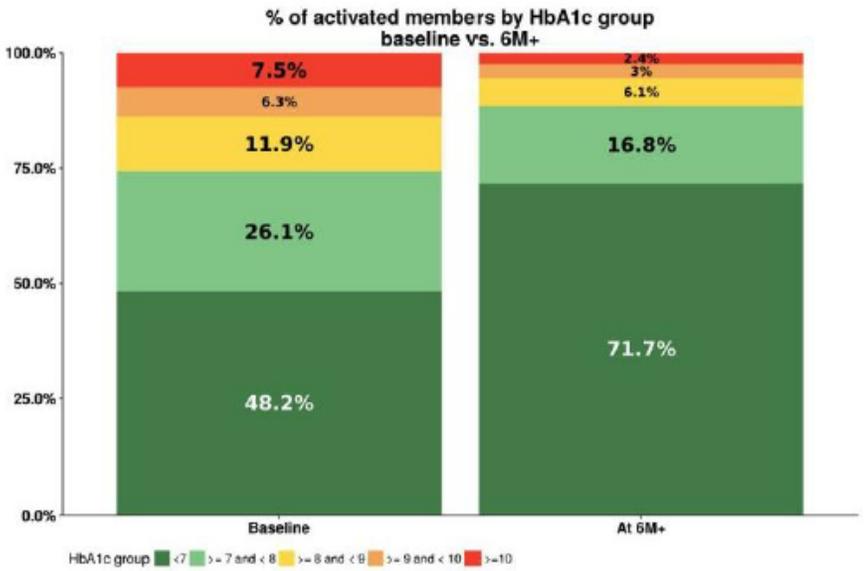
Hypertension management

Members who started **uncontrolled** (>130/80 mmHg) **achieve reduction in systolic and diastolic blood pressure** regardless of checking frequency, but **higher checking frequency is associated with greater reductions.**

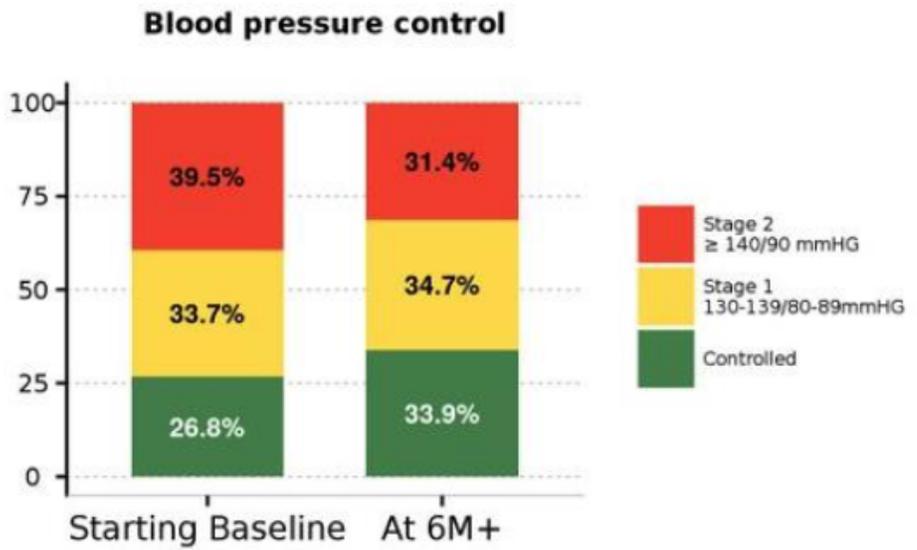
75.1% of Uncontrolled Members check more than one day per month, which is associated with systolic reductions of **-7.57** mmHg and diastolic reductions of **-5.36** mmHg for those who check >=4 days per month, and systolic reductions of **-5.26** mmHg and diastolic reductions of **-3.82** mmHg for those who check between 1 to 4 days per month. **24.9%** of Uncontrolled Members check one day per month or less, which is associated with systolic reductions of **-5.53** mmHg and diastolic reductions of **-3.91** mmHg.

Livongo Hypertension Program ROI Analysis

Executive Summary



+77
NPS Score



Medical & Pharmacy Savings

Diabetes YoY:
\$69 PMPM
1.4 x ROI

Hypertension YoY:
\$45 PMPM
2.2x ROI

Livongo Hypertension Program ROI Analysis

Medical Spending

- Positive ROI seen in all years (year 1 – year 4)
- 13% decrease in total medical spending for Livongo members compared to prior program year
- ROI for medical cost:
 - Year 1: Decrease 20%; \$52 PMPM
 - Year 2: Decrease 20%; \$48 PMPM
 - Year 3: Decrease 30%; \$73 PMPM
 - Year 4: Decrease 13%; \$63 PMPM

Pharmacy Spending

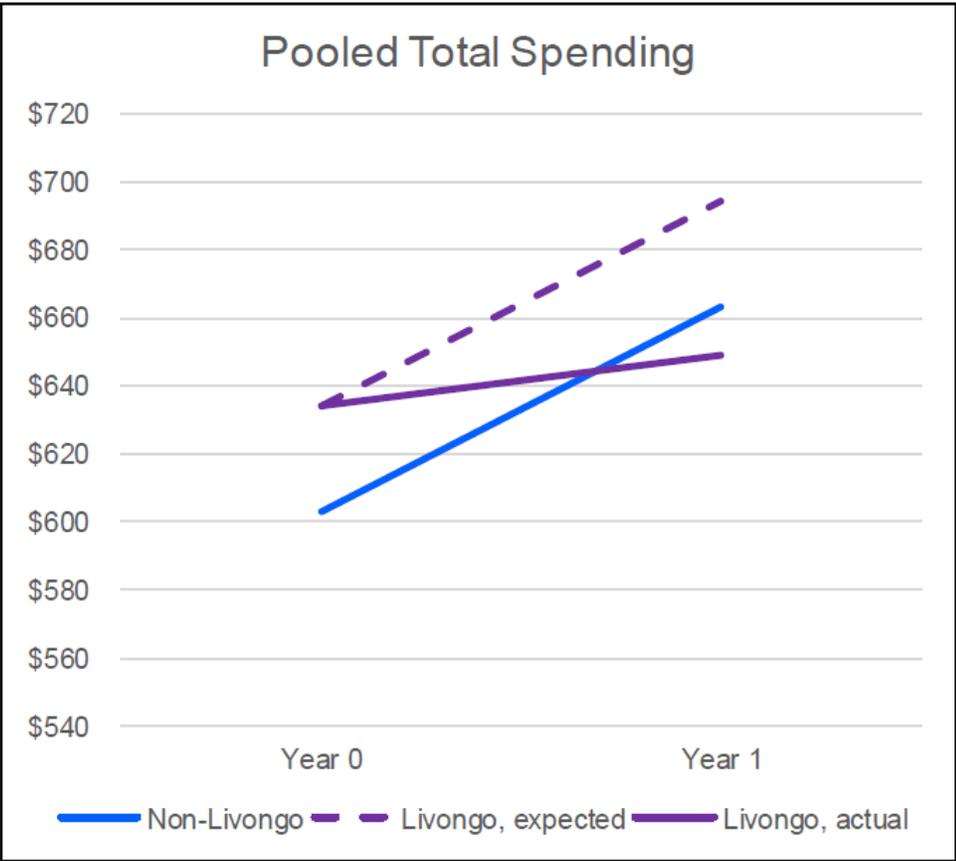
- 8% increase in total pharmacy spending for Livongo Members; partly driven by increased medication adherence
 - Year 1: Increase 8%; \$27 PMPM
 - Year 2: Increase 4%; \$8 PMPM
 - Year 3: Decrease 8%; \$13 PMPM
 - Year 4: Increase 8%; \$18 PMPM

Overall ROI

- Pooled ROI for medical and Rx cost:
 - Year 1: 1.3x ROI \$25 PMPM
 - Year 2: 2.0x ROI \$40 PMPM
 - Year 3: 3.0 x ROI \$60 PMPM
 - Year 4: 2.2x ROI; \$45 PMPM; a total savings of \$860,760

Livongo Hypertension Program ROI Analysis

Total Spending - YOY Hypertension ROI



Group	Year 0	Year 1
Non-Livongo	\$ 603	\$ 663
Livongo, expected	\$ 634	\$ 694
Livongo, actual	\$ 634	\$ 649

	YoY (N=741)
Net Medical Costs	-13% (\$63 PMPM medical savings)
Net Pharmacy Costs	8% (\$18 PMPM pharmacy cost increase)
ROI	$\$45 \div \$20 = 2.2$

\$20: Livongo PMPM fee

Livongo Hypertension Program ROI Analysis

Cohort Details

Cohorts	Activation Timeframe	N
Year 4 or more on program	09/2018 - 08/2019	387
Year 3 on program	09/2019 - 08/2020	109
Year 2 on program	09/2020 - 08/2021	172
Year 1 on program	09/2021 - 08/2022	75
Total		741

Population Attrition Description

Criteria	Non-Member		Member	
	Count	Percent	Count	Percent
Ever activated members			2092	
Total unique number of PwDs found in claims within study period	1070		1135	
Age below 65	980	92%	1027	90%
Pre-launch and post-launch eligible	667	62%	933	82%
Enrolled in Livongo for more than 3 months	--	--	883	78%
Final Number*	741		741	

*Non-members were matched with replacement

Livongo Hypertension Program ROI Analysis

Pooled Spending Summary - Hypertension

	Non-member			Member			DID Y1 vs Y0
	Y0	Y1	% Diff Y1 vs Y0	Y0	Y1	% Diff Y1 vs Y0	
Total costs	\$ 495	\$ 545	10%	\$ 477	\$ 464	-3%	-13%
Hypertension-related	\$ 26	\$ 16	-39%	\$ 17	\$ 11	-35%	4%
Diabetes-related	\$ 5	\$ 15	191%	\$ 12	\$ 8	-31%	-222%
Cholesterol-related	\$ 1	\$ 1	61%	\$ 1	\$ 1	4%	-57%
CVD-related	\$ 38	\$ 46	23%	\$ 53	\$ 36	-32%	-55%
ER visits	\$ 13	\$ 11	-12%	\$ 8	\$ 7	-16%	-4%
Inpatient hospital, non-ER visits	\$ 152	\$ 140	-8%	\$ 124	\$ 119	-5%	3%
Outpatient hospital, non-ER visits	\$ 187	\$ 234	25%	\$ 204	\$ 201	-2%	-27%
Office visits	\$ 80	\$ 75	-6%	\$ 78	\$ 72	-8%	-2%

Pharmacy	Non-Member			Member			DID Y1 vs Y0
	Year 0	Year 1	% Diff Y1vsY0	Year 0	Year 1	% Diff Y1vsY0	
Total costs	\$ 108	\$ 119	10%	\$ 157	\$ 185	18%	8%
Hypertension-related	\$ 11	\$ 11	-3%	\$ 13	\$ 12	-7%	-4%

Disease-related costs are identified by ICD-10 codes and one claim can have multiple ICD-10 codes associated to it, therefore, they are not mutually exclusive groups and will not sum to the Total Medical Costs (PMPM).
 Place of Service costs are mutually exclusive groups and will have a sum close to the Total Medical Costs (PMPM). Not all categories are represented in the table.

Livongo Diabetes Prevention Program (DPP)

Livongo Diabetes Prevention Program

- Program designed to empower participants with the latest technology, information and coaching to more effectively prevent the development of Diabetes through weight management and lifestyle enhancement
- Livongo Diabetes Prevention is FREE program provided to Harris Health System employees, spouses and pre-65 retirees who meet the DPP health criteria and are enrolled in the Harris Health System Medical Plan.
- Our Goals:
 - Achieve $\geq 30\%$ enrollment and engagement in the Livongo Diabetes Prevention Program.
 - Program-year enrollment =31%; a 12% increase from the prior program year
 - Decrease the prevalence of pre-diabetes at Harris Health System by $\geq 1\%$
 - 32.2% of our population (with available glucose and/or HbA1c data and no diabetes diagnosis) has Pre-Diabetes, a increase of 4.2% over prior program year
 - Decrease the prevalence of overweight and obesity at Harris Health System by $\geq 1\%$
 - 85.1% of participants with Pre-Diabetes have a BMI of ≥ 25 , a 1.2% decrease from prior program year
 - 54.6% of participants with Pre-Diabetes have a high waist circumference, a 1.7% decrease from prior program year
 - Decrease medical claims cost per DPP Participant
 - The average medical claims cost per DPP participant is \$159.57 PMPM, an increase of 11.6% (\$16 PMPM)
 - Decrease the utilization and costs of ER and inpatient visits
 - The average number of ER visits/1,000 for DPP participants is 330.99, an increase of 6.3% (19.64 visits/1,000 members)
 - The average number of Inpatient Days/1,000 for DPP participants is 205.14, a decrease of 8.2% (18.27 days/1,000 members).
 - Improve % of participants who lost weight
 - 60.8% of members lost weight
 - Achieve $\geq 5\%$ and 10% Weight loss to improve health and decrease risks
 - 27.8% of participants lost $> 10\%$ Weight loss; 15.7% lost 7-10%; 8.1% loss 5-7% weight loss; 16.1% lost 3-5% and 32.3% lost $< 3\%$ weight loss.
 - Achieve positive participant feedback that Livongo is easy to use and is a valuable resource to improve health and decrease risk
 - Net promoter score of +77; positive testimonials

Livongo Diabetes Prevention Program



The Livongo Diabetes Prevention Program includes:

- A free digital scale and activity tracker
- Weekly diabetes prevention lessons
- Self guided activities, reports and food logs
- Digital Coaching, health nudges, 5-day challenges and action plans
- Expert coaching, on-demand and scheduled
- Real-time support
- Data Sharing with Family and Health Providers directly from the app or portal
- Informative resources and learning tools help participants improve their lifestyle, manage their weight and improve their health
- Available via desktop, laptop or mobile device including apps for both iPhone and Android devices

Population Health Statistics – Pre-Diabetes

Pre-Diabetes		Sept 2021 - Aug 2022		TRENDS	
Biometric	Biometric Description	#	%	#	%
Population with Pre-Diabetes	Glucose ≥ 100 and < 126 or an HbA1c $> 5.7\%$ and $< 6.4\%$, and no diagnosis of diabetes	1,866	32.2%	561	4.2%
Potentially undiagnosed diabetics	Glucose ≥ 126 or an HbA1c $\geq 6.4\%$, and no diagnosis of diabetes	248	4.3%	88	0.8%
% of Pre-Diabetic Population Overweight (BMI)	At Risk: 25-29 High Risk: ≥ 30	903	85.1%	448	-1.2%
% of Pre-Diabetic Population Overweight (Waist Circumference)	Women: ≥ 35 inches Men: ≥ 40 inches	456	54.6%	200	-1.7%

Livongo Diabetes Prevention Program:

- New Program launched in January 2020
- Achieved 31% engagement out of those eligible during the program year
- Participants gain the knowledge and skills to make effective healthy lifestyle changes. Lessons include nutrition, exercise, weight-loss, stress management and more.
- This is a year-long program with weekly and bi-weekly lessons following the CDC curriculum

Key Findings:

- 32.2% of our population (with available glucose and/or HbA1c data and no diabetes diagnosis) has Pre-Diabetes, a increase of 4.2% over prior program year
- Potentially undiagnosed diabetics increased by 1.0% (88 people)
- 85.1% of participants with Pre-Diabetes have a BMI of ≥ 25 , a 1.2% decrease from prior program year*
- 54.6% of participants with Pre-Diabetes have a high waist circumference, a 1.7% decrease from prior program year*

*The number of pre-diabetic members with reportable BMI and waist circumference data in Alliant Analytics doubled compared to the prior program year, which explains the conflicting # and % trends

DPP Participants Cost & Risk Analysis (baseline)

Participating in Livongo DPP	Count	Prospective Risk Score
Participating (Total)	587	1.85
Employees	547	1.86
Spouses	40	1.71

587 Pre-Diabetics engaged in Livongo DPP during program year, an increase of 162 from FY23

DPP Population	Avg. Medical Claim Cost	ER Visits/1000	Inpatient Days/1000
DPP Members	\$159.57	330.99	205.14

- The average medical claims cost per DPP participant is \$159.57 PMPM, an increase of 11.6% (\$16.56 PMPM)
- The average number of ER visits/1,000 for DPP participants is 330.99, an increase of 6.3% (19.64 visits/1,000 members)
- The average number of Inpatient Days/1,000 for DPP participants is 205.14, a decrease of 8.2% (18.27 days/1,000 members)

Top 3 Chronic Conditions	Prevalence within DPP Participants	% of Total DPP Participants
Hypertension	211	35.9%
Hyperlipidemia	167	28.4%
Morbid Obesity	125	21.3%

Solutions Implemented:

- Livongo Diabetes Prevention Program
- Livongo Hypertension Management Program
- Wondr Health™ Pre-Diabetes & Weight Management Program
- Onsite HbA1c Screenings

DPP Eligibility Criteria

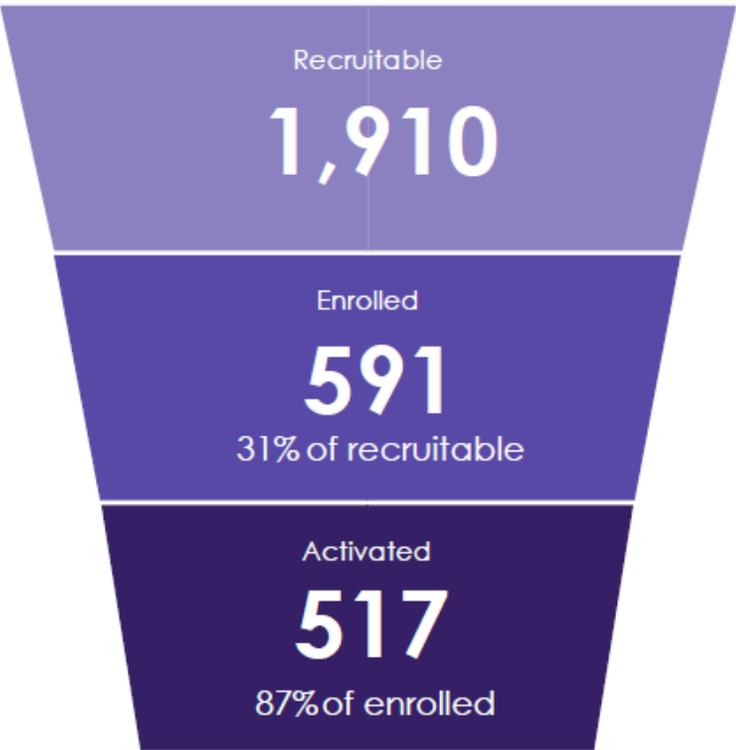
Must meet criteria 1-3 and 1 additional factor below	
1	At least 18 years old and
2	Overweight (BMI ≥25 <u>or</u> WC ≥35 (f) or ≥40 (m))
3	No previous diagnosis of T1 or T2 Diabetes

Additional Factor(s): *must meet at least 1*

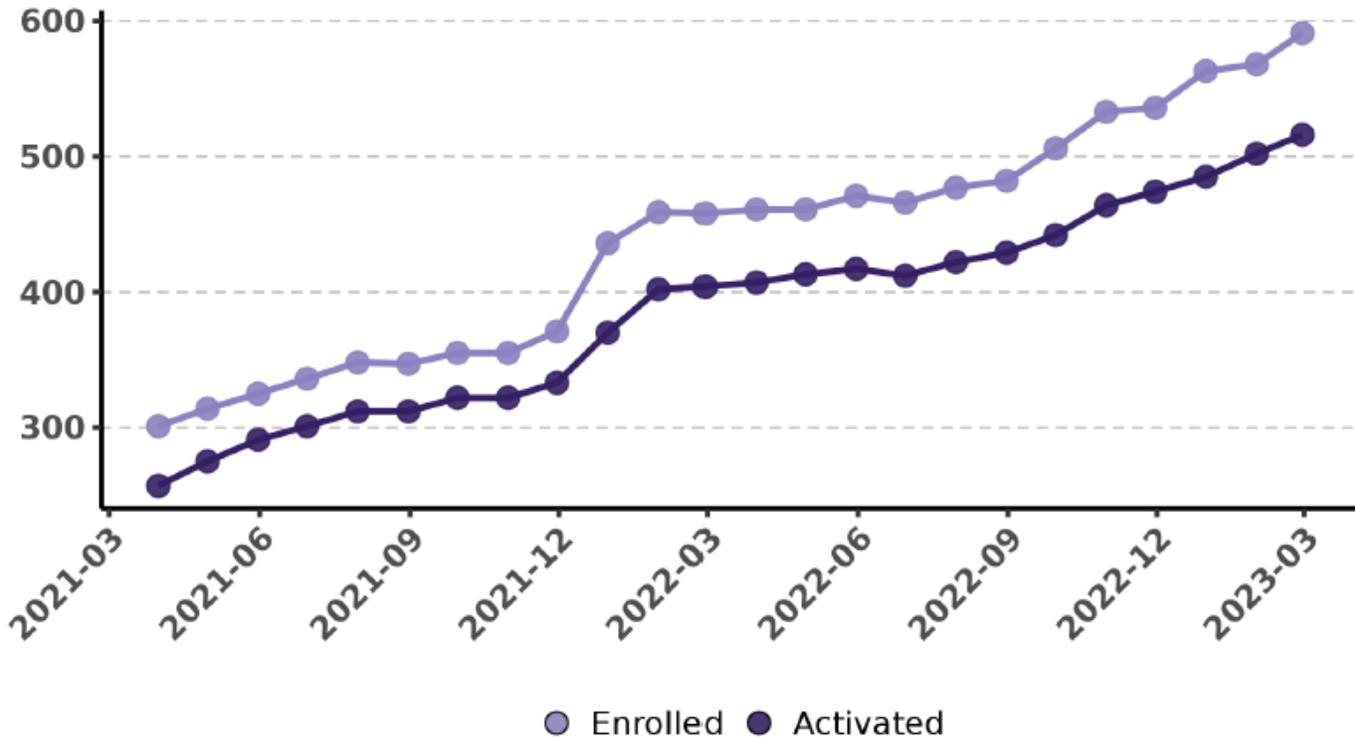
- Diagnosis of Pre-Diabetes
- HbA1c of 5.7% - 6.4%
- Glucose ≥100 and <126 mg/dL
- Previously diagnosed with gestational diabetes
- No physical activity
- Hypertension diagnosis

Livongo Pre-Diabetes Prevention Program

Enrollment & Activation Dashboard



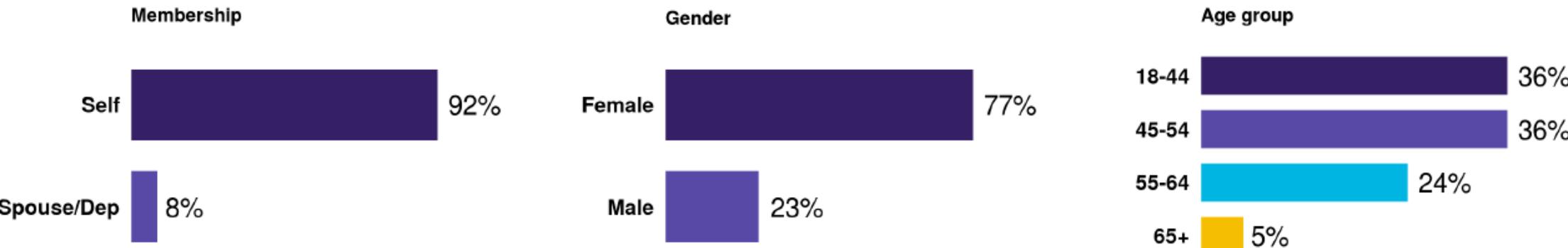
Prediabetes enrollment and activation trends



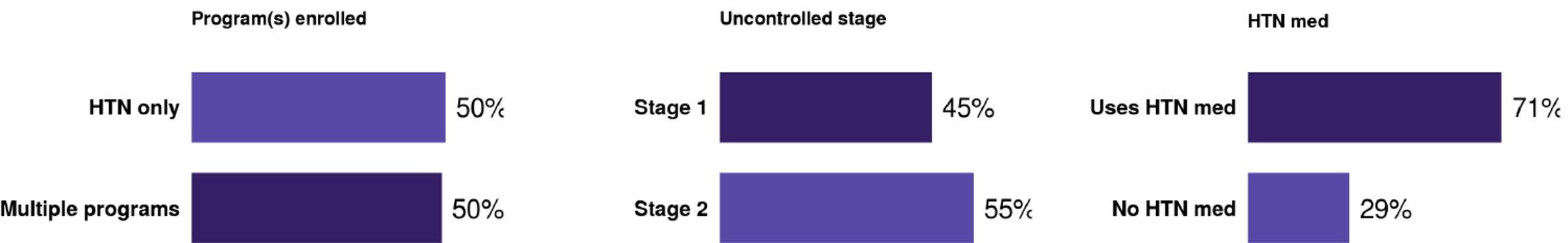
Recruitable: Number of people who are eligible for the program
Enrolled: Number of members who registered and successfully enrolled
Activated: Number of members who used the device for a first weight reading

Livongo Pre-Diabetes Prevention Program

Prediabetes management



Hypertension management



Note: The only program that participants in the Livongo DPP program can participate in besides the Livongo DPP program is the Livongo Hypertension program

Data sources: Livongo Business Review Report March 2023

Livongo Diabetes Prevention Program

Program Engagement Overview

Average 90 day member engagement rates (% of activated)

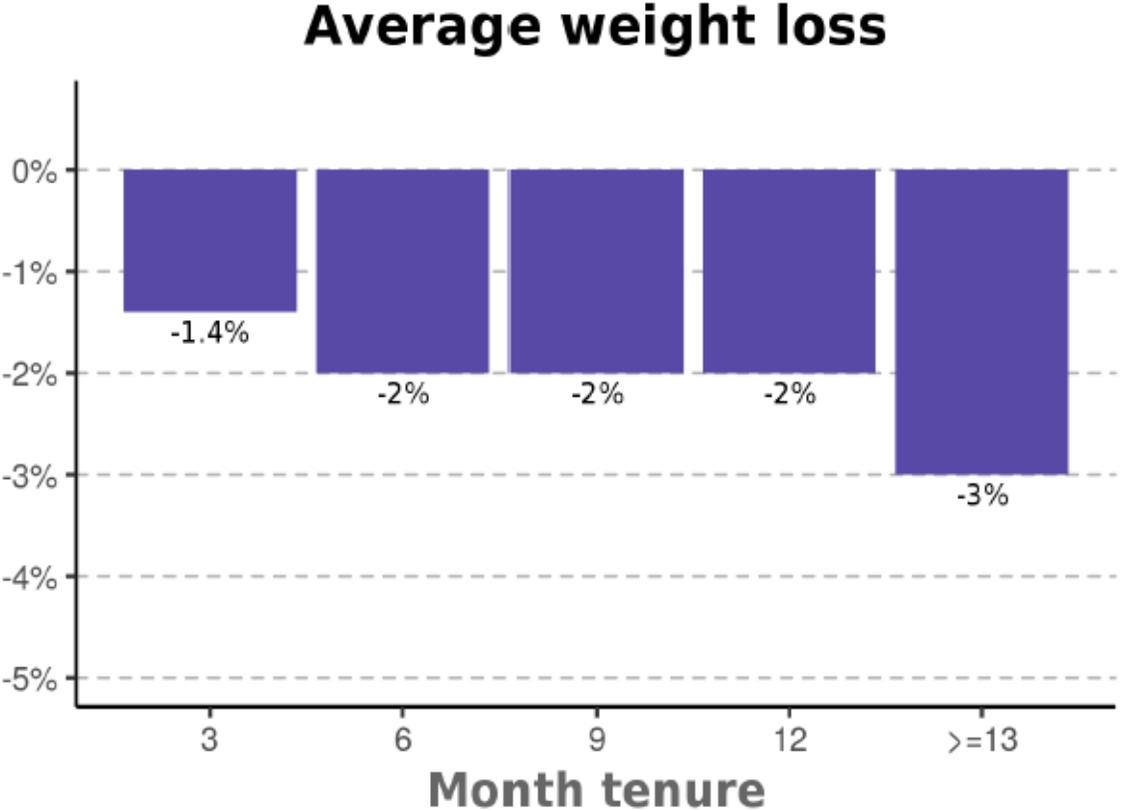
**83%****Device monitoring**

Connected scale

**79%****Self-guided activity**Email opens, log-ins,
lessons, health summary
report sharing, food logs**25%****Digital coaching**Health nudges, 5-day
challenges, action plans**5%****Expert coaching**On-demand and
scheduled coachingMembers engage with the prediabetes management program on average **18** times per month

Livongo Diabetes Prevention Program

Clinical Outcomes: Average Weight Loss



Members enrolled in the prediabetes management program start their journey in a weight loss program. Members interact with the program by using connected device, participating in CDC guided curriculum, logging meals, connecting with coaches, participating in action plan activities and tasks, and using many other features in the program.

After the first 12 months, the goal of the program is to help members maintain the weight loss they have achieved. These efforts are imperative, because with the adaptive mechanisms of the body's metabolism, **as many as 8 out of 10 who try to lose weight will regain it beyond year 1.**

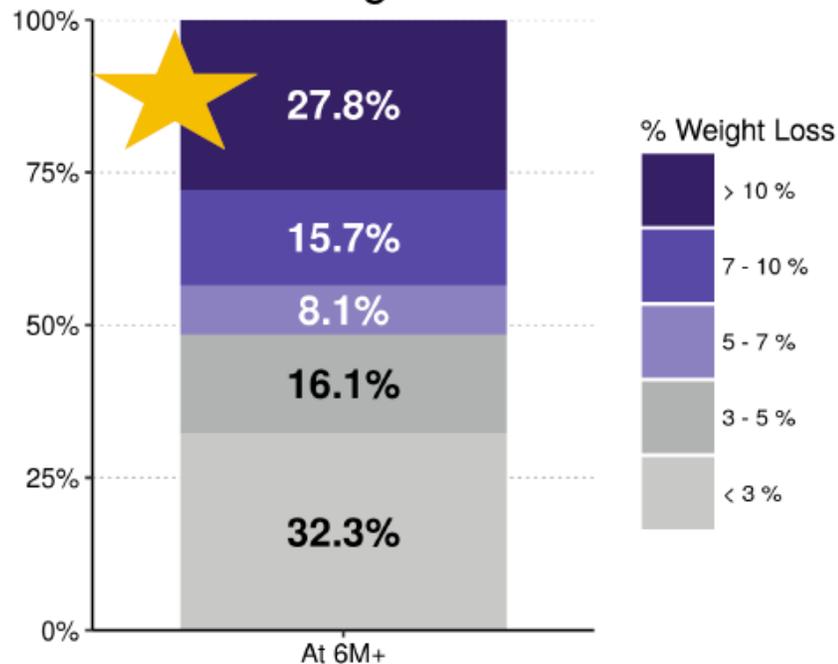
The prediabetes management program experiments and iterates on ways to encourage positive engagement and longstanding behavior change with members to help them keep the weight off.

Livongo Diabetes Prevention Program

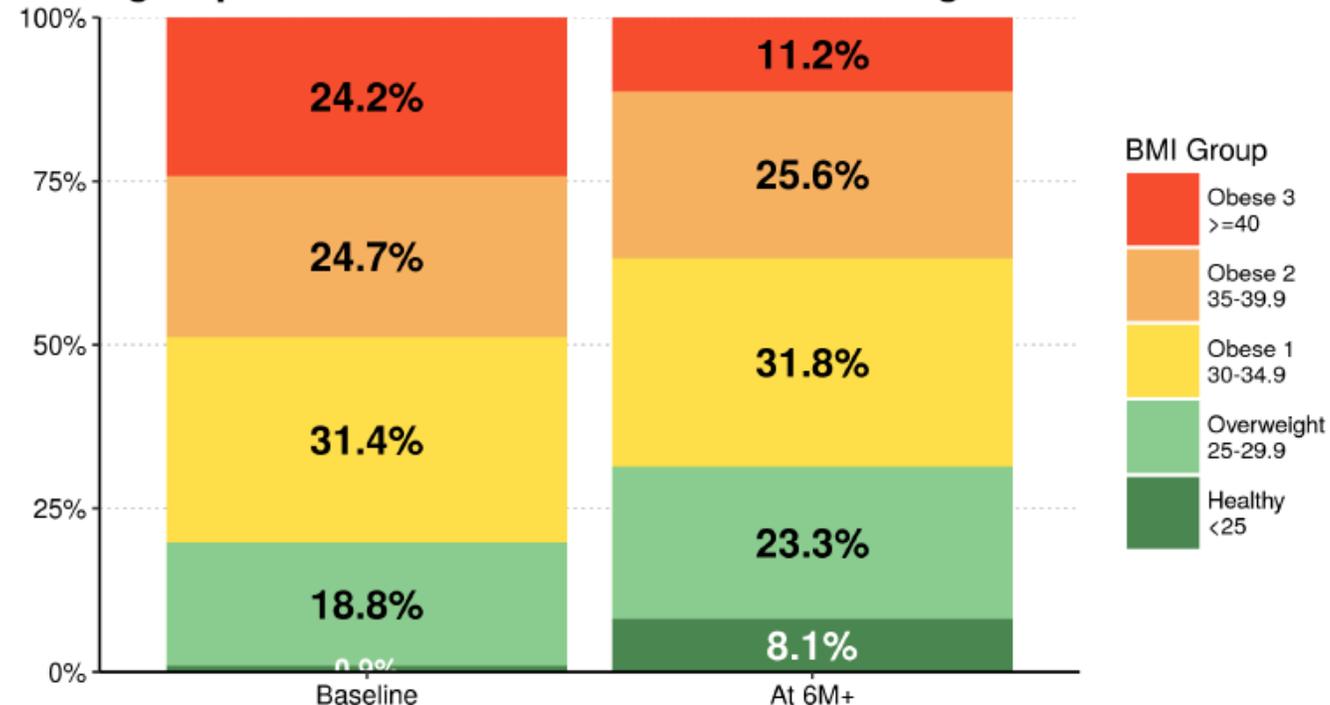
Prediabetes management

Clinical Outcomes: BMI Movement

Distribution of activated members who lost weight at 6M+



BMI groups of activated members who lost weight at 6M+

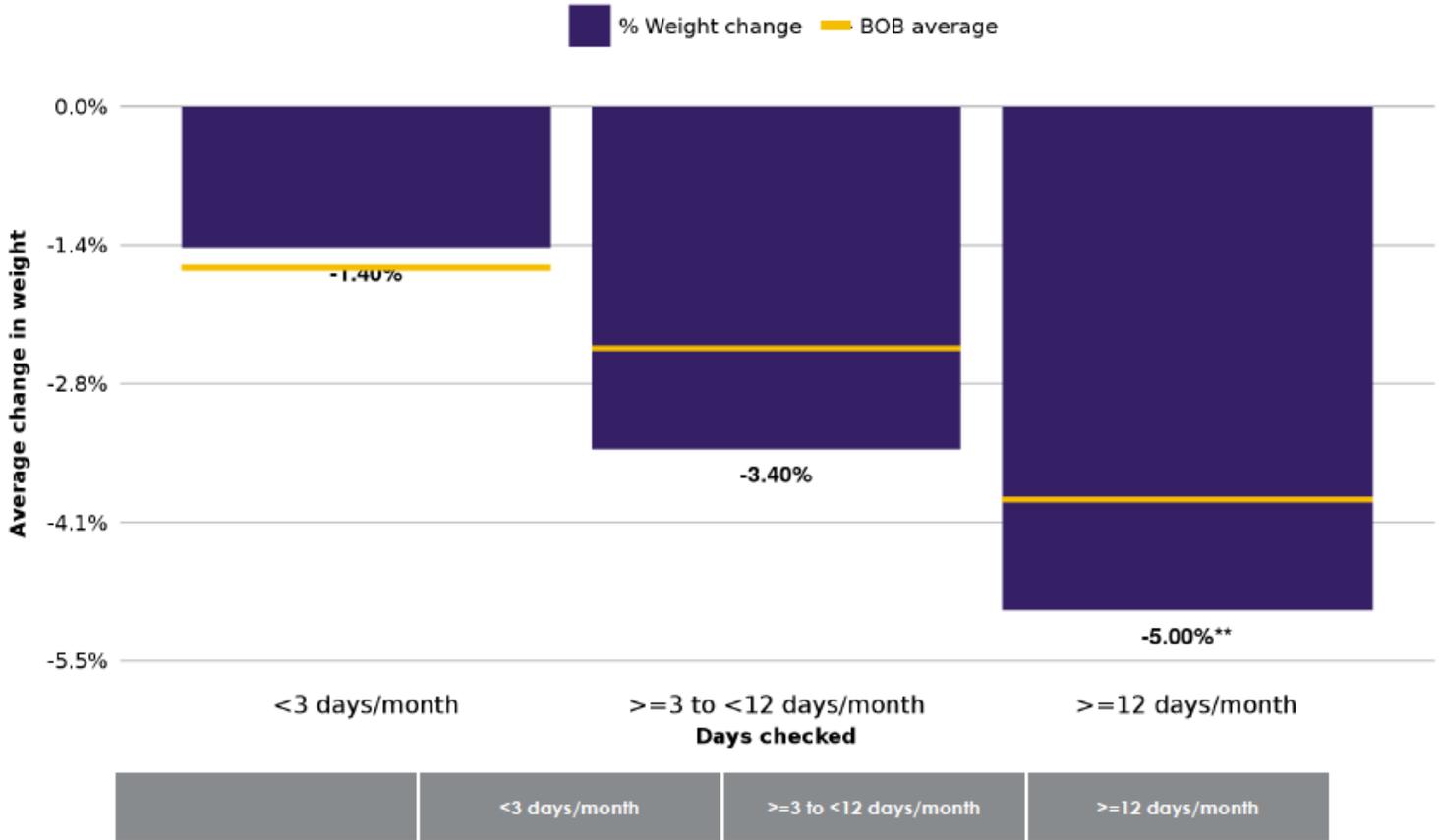


60.8% Activated members lost weight

Livongo Diabetes Prevention Program

Device Monitoring: Average Weight Loss Compared To Checking Frequency

(Last 6 months)



Prediabetes management

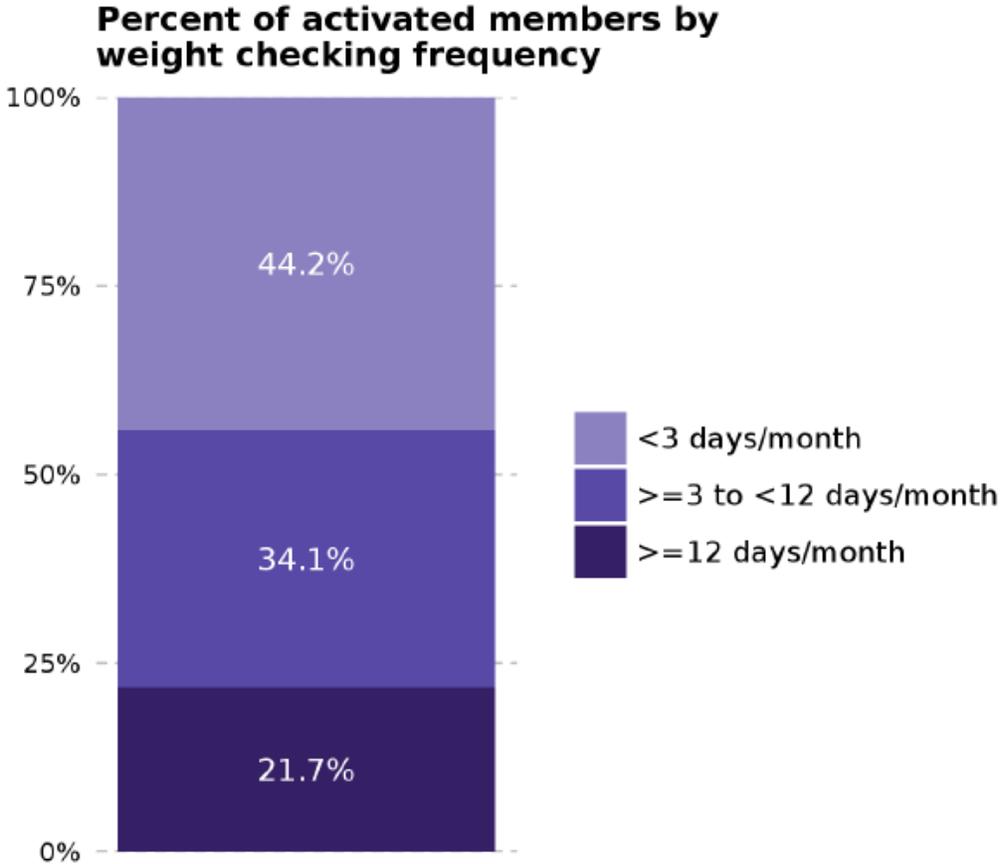
Members achieve **reductions in weight** regardless of checking frequency, but **higher checking frequency is associated with greater reductions.**

60.23% of activated members check more than three days per month, which is associated with weight reductions of **-5%** for those who check **>=12 days** per month, and **-3.4%** for those who check between 3 to 12 days per month. **39.77%** of activated members check less than three days per month, which is associated with an average reduction of **-1.4%**.

Livongo Diabetes Prevention Program

Prediabetes management

Device Monitoring Dashboard
(Last 90 days)

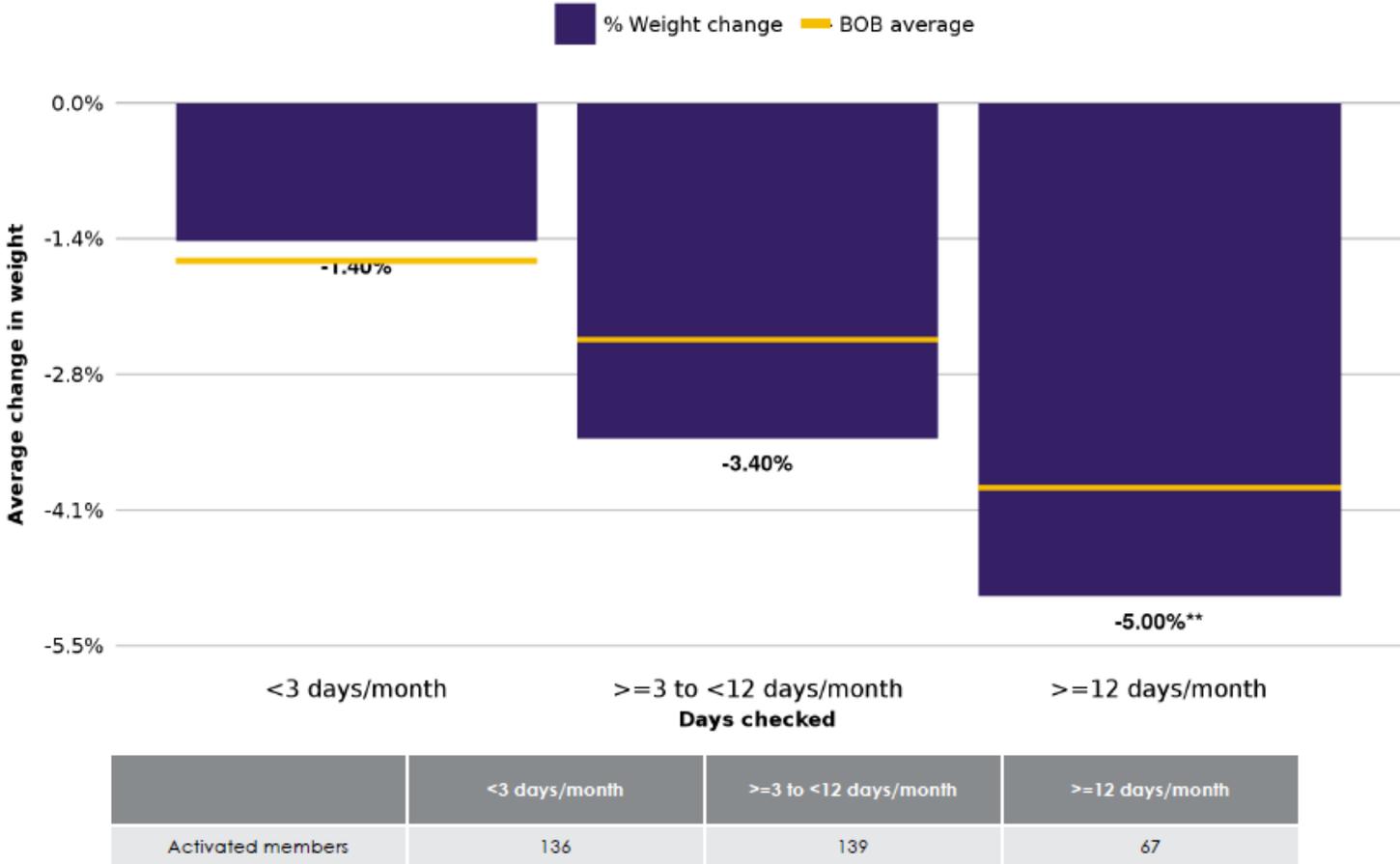


29x Average weigh-ins per member

Across members who checked their weight at least once in the last 90 days

Livongo Diabetes Prevention Program

Device Monitoring: Average Weight Loss Compared To Checking Frequency (Last 6 months)



Prediabetes management

Members achieve **reductions in weight** regardless of checking frequency, but **higher checking frequency is associated with greater reductions.**

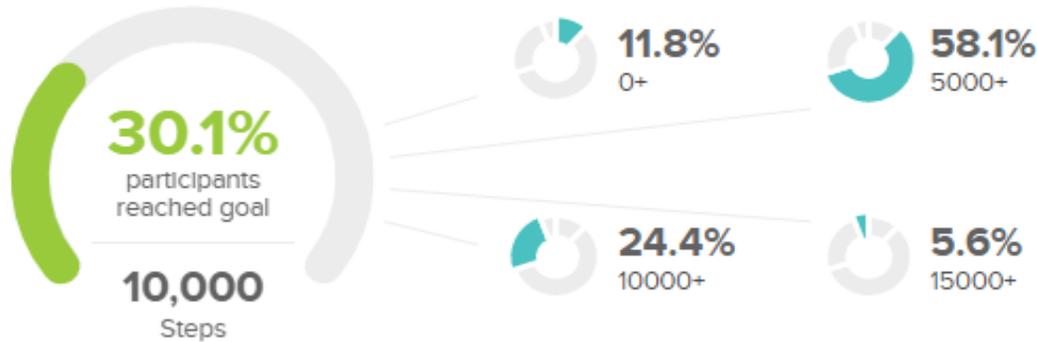
60.23% of activated members check more than three days per month, which is associated with weight reductions of **-5%** for those who check **>=12 days** per month, and **-3.4%** for those who check between 3 to 12 days per month. **39.77%** of activated members check less than three days per month, which is associated with an average reduction of **-1.4%**.

Fitbit Program

Fitbit Program Overview

Participants breakdown

DAILY STEPS



ACTIVITY



2153 participants were active, 1583 of which had enough activity data to be included into this breakdown.

All Participants  Sep 1, 2021 – Aug 31, 2022 

DAILY AVG	8991 ↓1% STEPS	10 ↑25% FLOORS	33m ↓2.9% ACTIVE MINUTES	5h 51m ↓1.4% TIME ASLEEP	TOTAL	2M ↓7.8% DISTANCE, MI
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Fitbit Program Overview

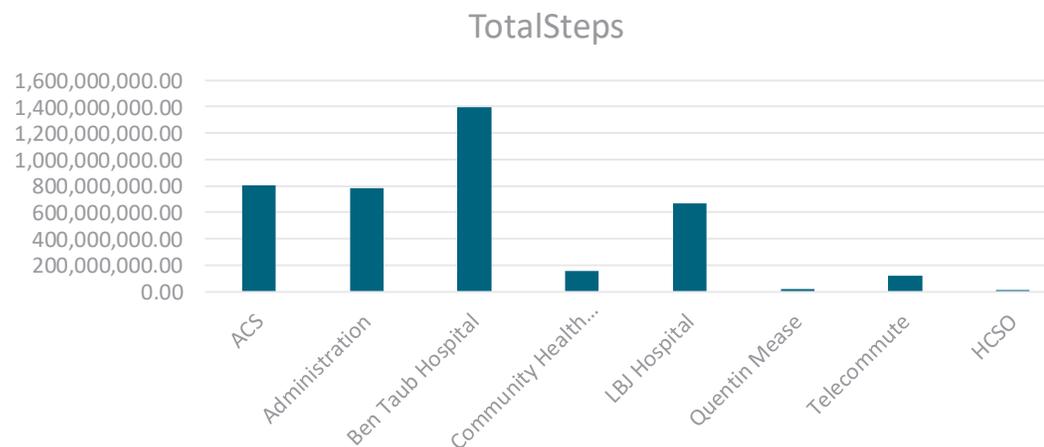
Fitbit Program - September 2021-August 2022	
Total # unique participants Active/Included	2153/1583
Average Steps	8,663.08
Average Distance	3.67
Average Floors	10.13
Average Active Minutes	30.59
Total Steps	3,956,291,210
Total Distance	1,679,512.28
Total Floors	2,665,225.00
Total Active Minutes	14,542,255
Days Above Goal – Average Steps	0

Fun Facts:

- Participants went 67.45 times around the earth
- Participants went 7.03 times to the Moon
- Participants went 131,830 times up Mount Everest (Base Camp to Summit)
- Participants completed 48,474 Five-Hour marathons

Total Steps by Location:

1. Ben Taub – 1,397,707,899.00
2. ACS – 805,632,615.00
3. Administration – 784,518,515.00
4. LBJ – 670,205,634.00
5. CHC – 155,790,230.00
6. Quentin Mease – 16,494,085.00
7. Telecommute – 116,310,940.00
8. Harris County Sheriff's Office - 9,631,292.00



Fitbit Program Overview

Fitbit Program Data September 1, 2021 through August 31, 2022

	Total Steps	Total Distance	Total Floors	Total Active Minutes	Total Active Zone Minutes
ACS	805,632,615.00	340,508.31	521,218.00	3,019,650.00	2,185,817.00
Administration	784,518,515.00	337,279.31	539,161.00	3,243,940.00	2,520,832.00
Ben Taub Hospital	1,397,707,899.00	592,831.87	984,761.00	4,951,893.00	3,371,245.00
Community Health Choice	155,790,230.00	66,844.17	103,793.00	667,537.00	496,793.00
LBJ Hospital	670,205,634.00	283,019.41	433,105.00	2,122,235.00	1,707,874.00
Quentin Mease	16,494,085.00	7,216.19	7,336.00	50,229.00	32,053.00
Telecommute	116,310,940.00	47,607.42	70,854.00	458,493.00	296,409.00
HCSO	9,631,292.00	4,205.60	4,997.00	28,278.00	19,751.00

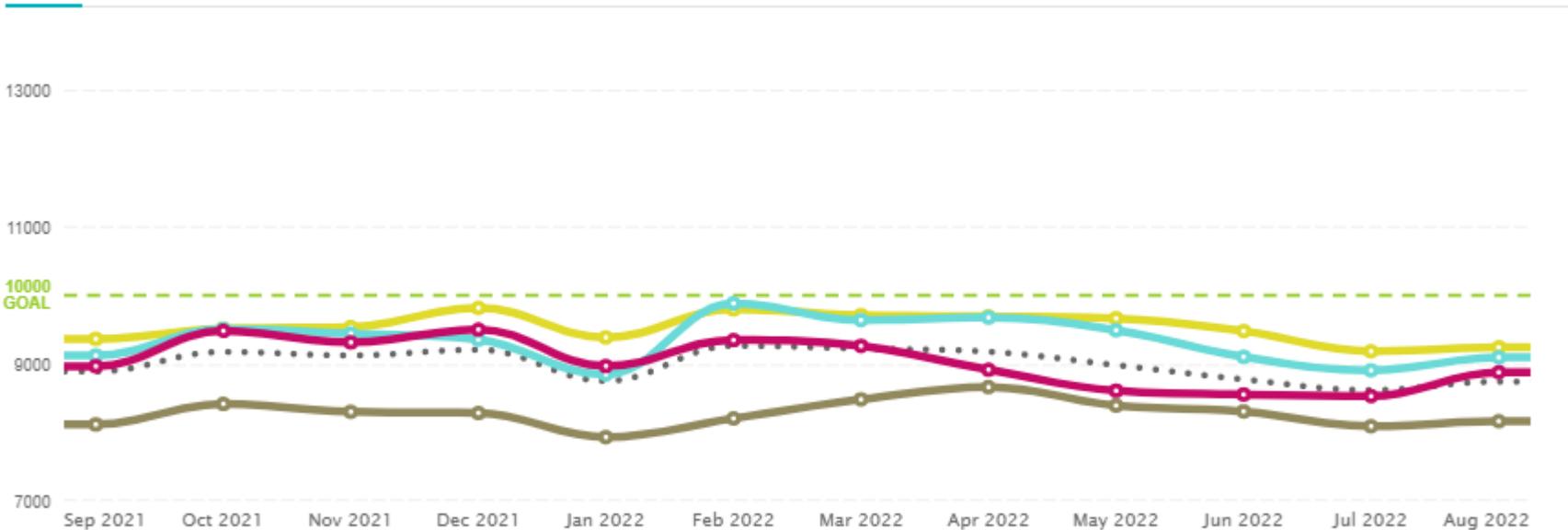
	Average Steps	Average Distance	Average Floors	Average Active Minutes	Average Active Zone Minutes
ACS	9,333.95	3.95	10.70	35.21	22.67
Administration	8,278.93	3.56	9.55	34.27	23.96
Ben Taub Hospital	9,530.41	4.04	11.84	33.85	19.90
Community Health Choice	7,712.92	3.31	7.33	33.09	21.96
LBJ Hospital	9,025.16	3.81	9.01	28.62	20.08
Quentin Mease	9,292.49	3.85	9.56	24.94	19.27
Telecommute	7,869.67	3.22	9.18	30.99	16.33
HCSO	8,261.13	3.59	13.90	23.71	13.09

Fitbit Program Overview - Trends

Filter: All [Reset filters](#)

Sep 1, 2021 – Aug 31, 2022

STEPS FLOORS ACTIVE MINUTES



1	Ben Taub Hospital	9,530	2	ACS	9,334	3	LBJ Hospital	9,025
4	Administration	8,279	5	Harris County Sheriff's Office	8,261	6	Telecommute	7,870
7	Community Health Choice	7,713	... Program average		8,991			

Data source: Fitbit Dashboard and Reporting September 2021 - August 31, 2022.

Fitbit Program Overview

Ben Taub Hospital:

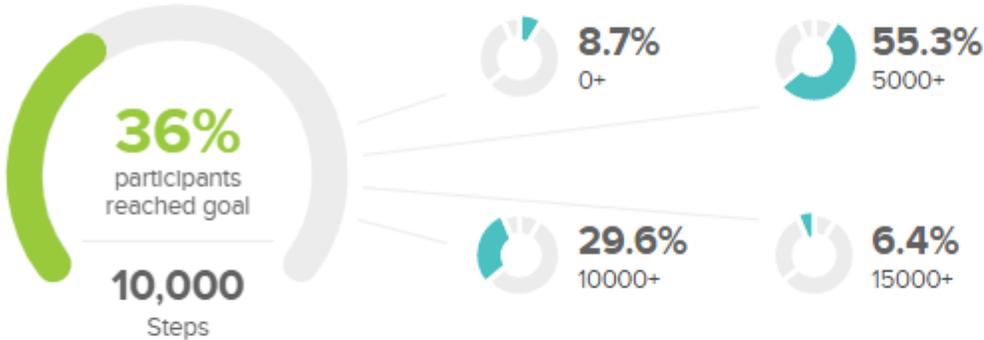
Filter: Ben Taub Hos... [Reset filters](#)

Sep 1, 2021 – Aug 31, 2022

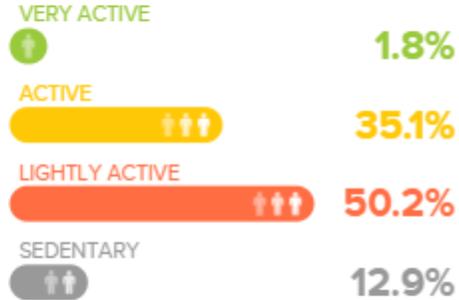
DAILY AVG	9530 ↑0.6%	12 ↑33.3%	34m	5h 37m ↓0.6%	TOTAL	593K ↓12%
	STEPS	FLOORS	ACTIVE MINUTES	TIME ASLEEP		DISTANCE, MI

Participants breakdown

DAILY STEPS



ACTIVITY



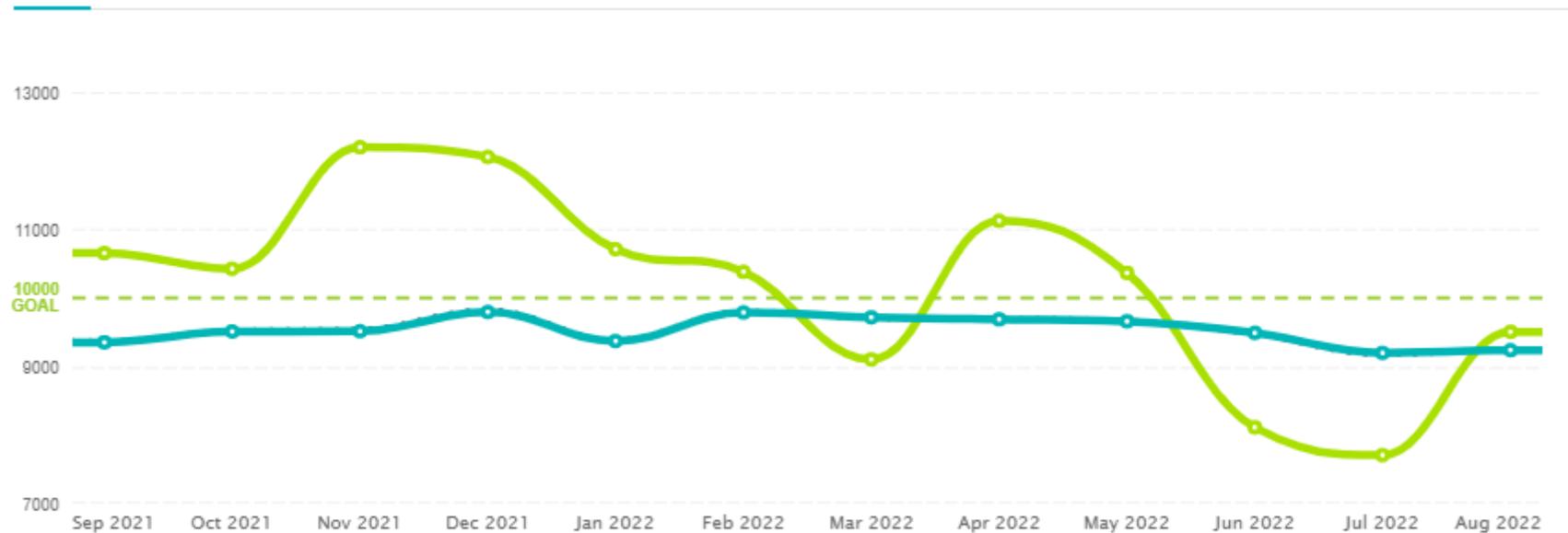
754 participants were active, 550 of which had enough activity data to be included into this breakdown.

Fitbit Program Overview – Step Trends Ben Taub Hospital

Filter: Ben Taub Hos... [Reset filters](#)

Sep 1, 2021 – Aug 31, 2022

STEPS FLOORS ACTIVE MINUTES



1 Psychiatric Unit	10,191	2 Ben Taub Hospital	9,525	... Ben Taub Hospital average	9,530
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Fitbit Program Overview

ACS:

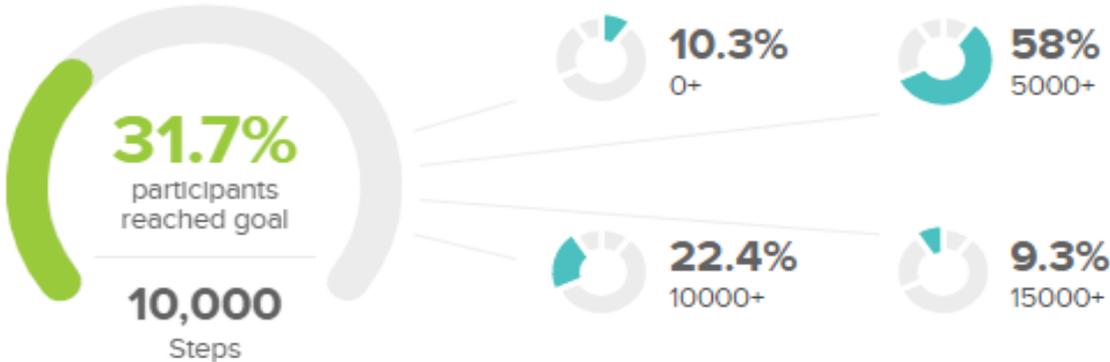
Filter: ACS [Reset filters](#)

Sep 1, 2021 – Aug 31, 2022

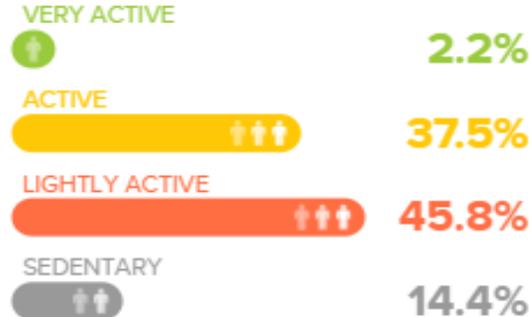
DAILY AVG	9334 ↓2.1%	11 ↑22.2%	35m ↓7.9%	5h 54m ↓1.4%	TOTAL	341K ↓8.2%
	STEPS	FLOORS	ACTIVE MINUTES	TIME ASLEEP		DISTANCE, MI

Participants breakdown

DAILY STEPS



ACTIVITY



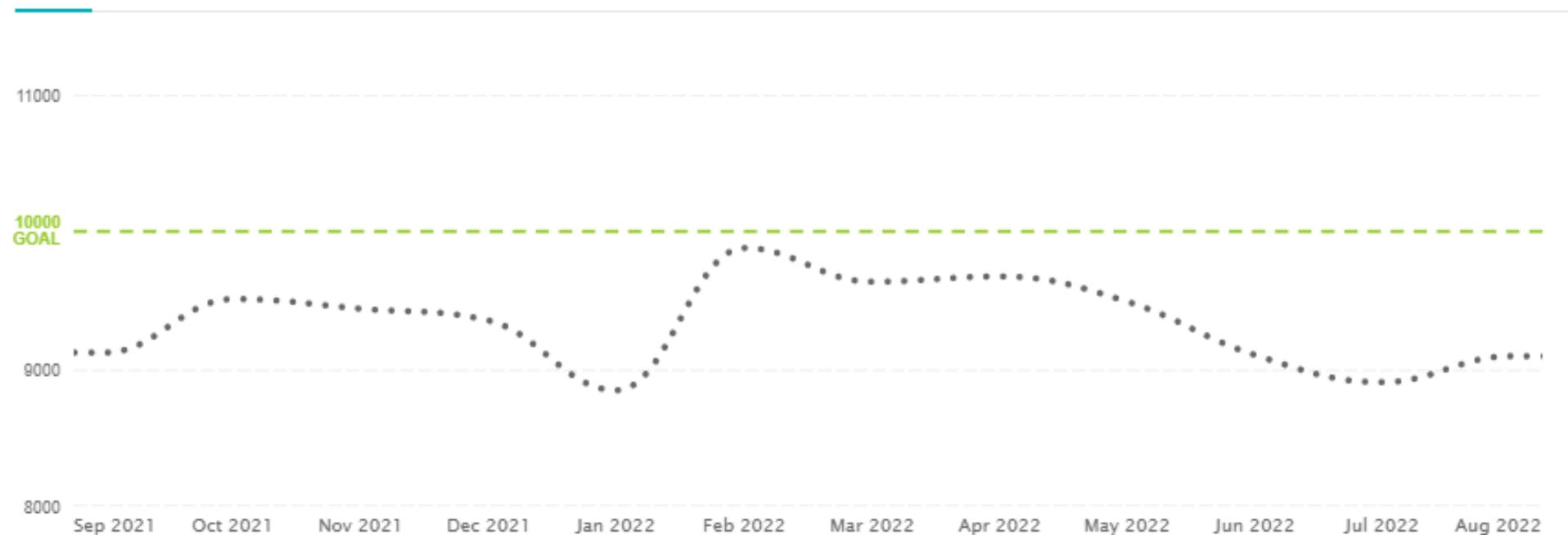
410 participants were active, 312 of which had enough activity data to be included into this breakdown.

Fitbit Program Overview – Step Trends ACS

Filter: ACS  Reset filters

Sep 1, 2021 – Aug 31, 2022 

STEPS FLOORS ACTIVE MINUTES



Fitbit Program Overview

Administration:

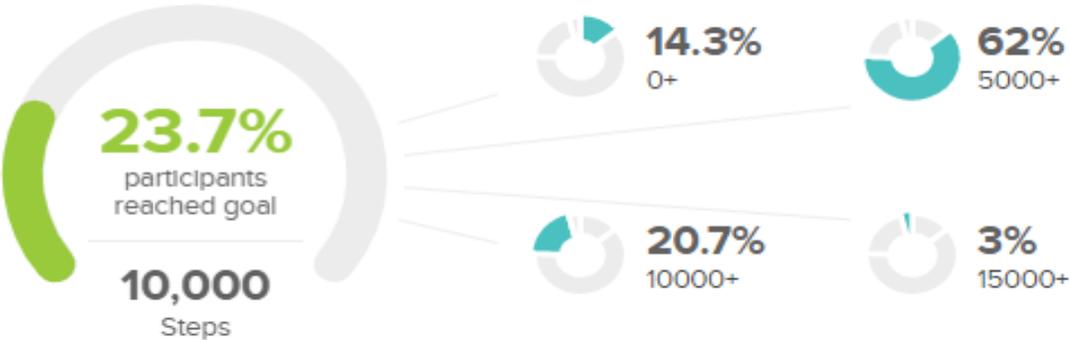
Filter: Administration Reset filters

Sep 1, 2021 – Aug 31, 2022

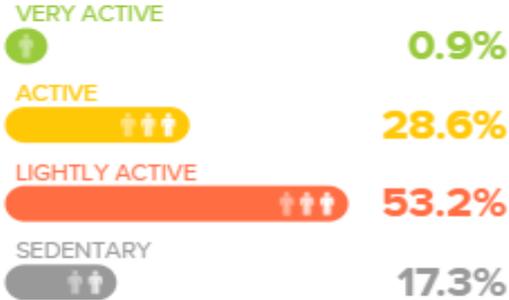
DAILY AVG	8279 ↓1%	10 ↑25%	34m ↓2.9%	6h 8m ↓0.3%	TOTAL	337K ↓1.6%
	STEPS	FLOORS	ACTIVE MINUTES	TIME ASLEEP		DISTANCE, MI

Participants breakdown

DAILY STEPS



ACTIVITY



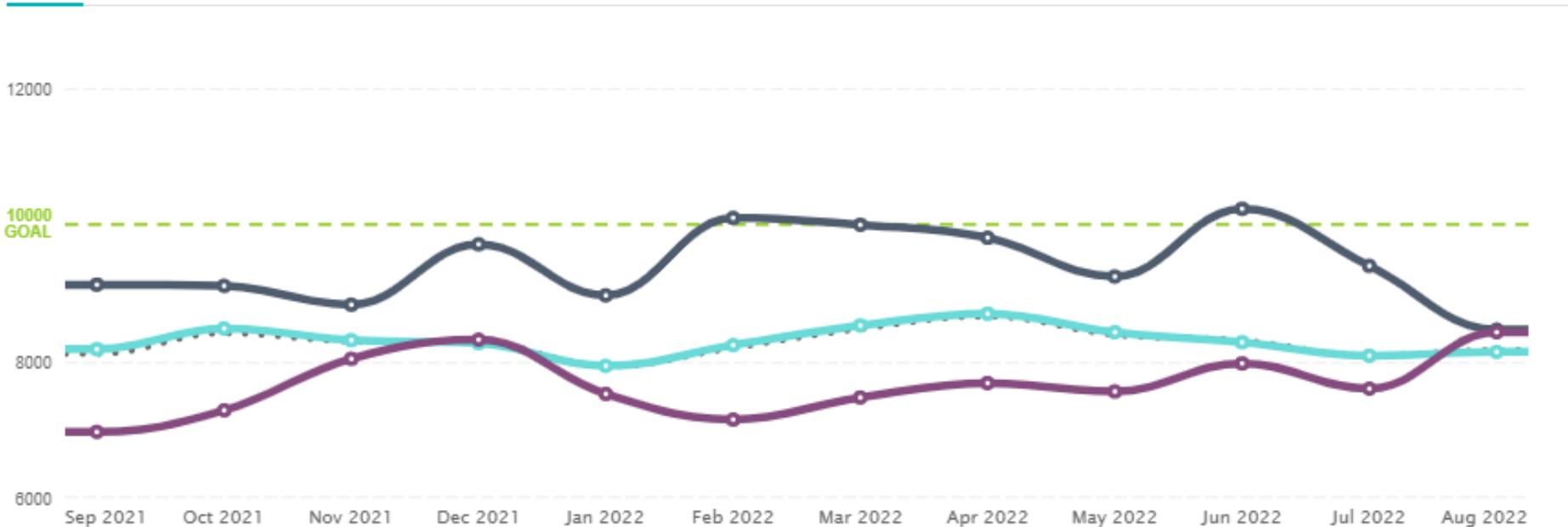
462 participants were active, 329 of which had enough activity data to be included into this breakdown.

Fitbit Program Overview – Step Trends

Filter: Administration Reset filters

Sep 1, 2021 – Aug 31, 2022

STEPS FLOORS ACTIVE MINUTES



1	Administration	9,411	2	Administration Fournace	8,299	3	Loop Central	7,673
...	Administration average	8,279						

Data source: Fitbit Dashboard and Reporting September 2021 - August 31, 2022.

Fitbit Program Overview

LBJ Hospital:

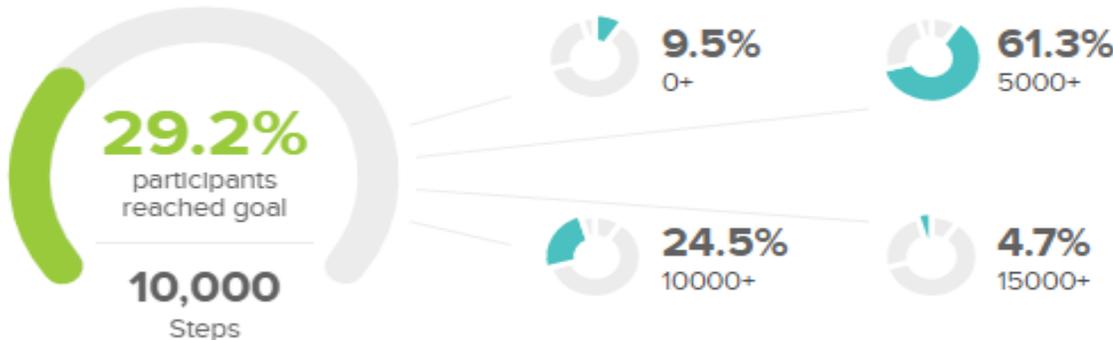
Filter: LBJ Hospital Reset filters

Sep 1, 2021 – Aug 31, 2022

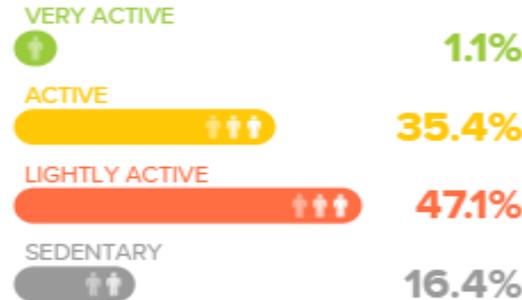
DAILY AVG	9025 ↓1.8%	9 ↑28.6%	29m	5h 37m ↓4%	TOTAL	283K ↓8.7%
	STEPS	FLOORS	ACTIVE MINUTES	TIME ASLEEP		DISTANCE, MI

Participants breakdown

DAILY STEPS



ACTIVITY



401 participants were active, 274 of which had enough activity data to be included into this breakdown.

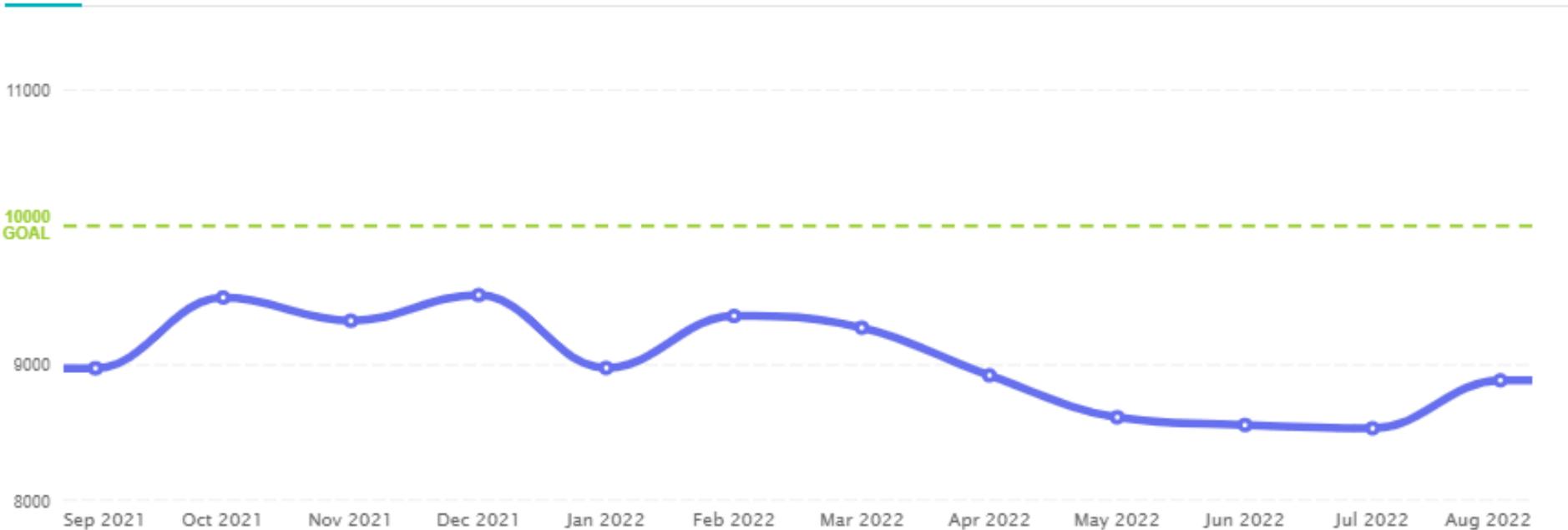
Fitbit Program Overview – Step Trends

LBJ Hospital

Filter: LBJ Hospital  Reset filters

Sep 1, 2021 – Aug 31, 2022 

STEPS FLOORS ACTIVE MINUTES



1 LBJ Hospital 9,025

... LBJ Hospital average 9,025

Data source: Fitbit Dashboard and Reporting September 2021 - August 31, 2022.

Fitbit Program Overview

Community Health Choice (CHC):

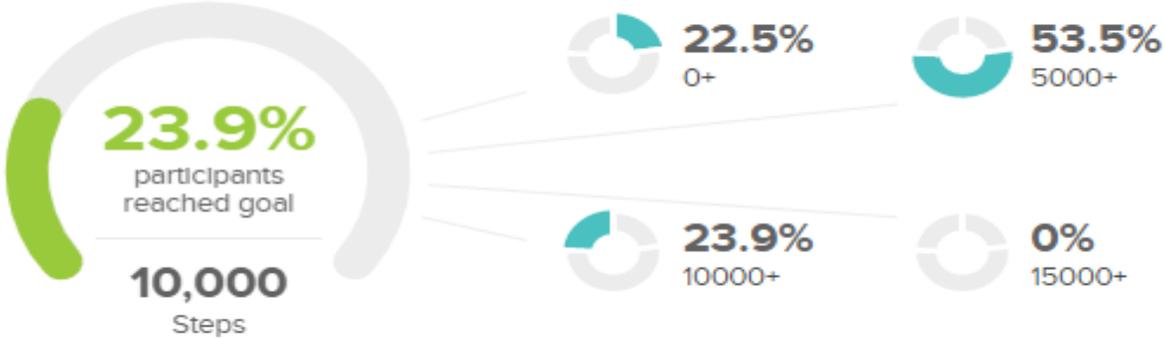
Filter: Community H... [Reset filters](#)

Sep 1, 2021 – Aug 31, 2022

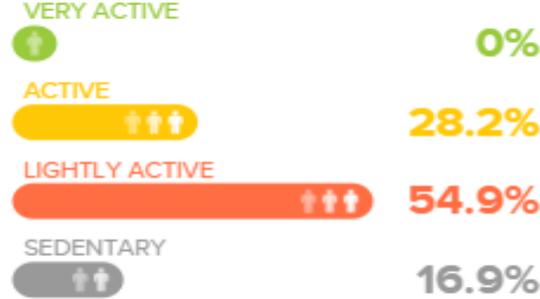
DAILY AVG	7713 ↑9.3%	7 ↑16.7%	33m ↑13.8%	6h 2m ↓5.5%	TOTAL	67K ↑0.1%
	STEPS	FLOORS	ACTIVE MINUTES	TIME ASLEEP		DISTANCE, MI

Participants breakdown

DAILY STEPS



ACTIVITY



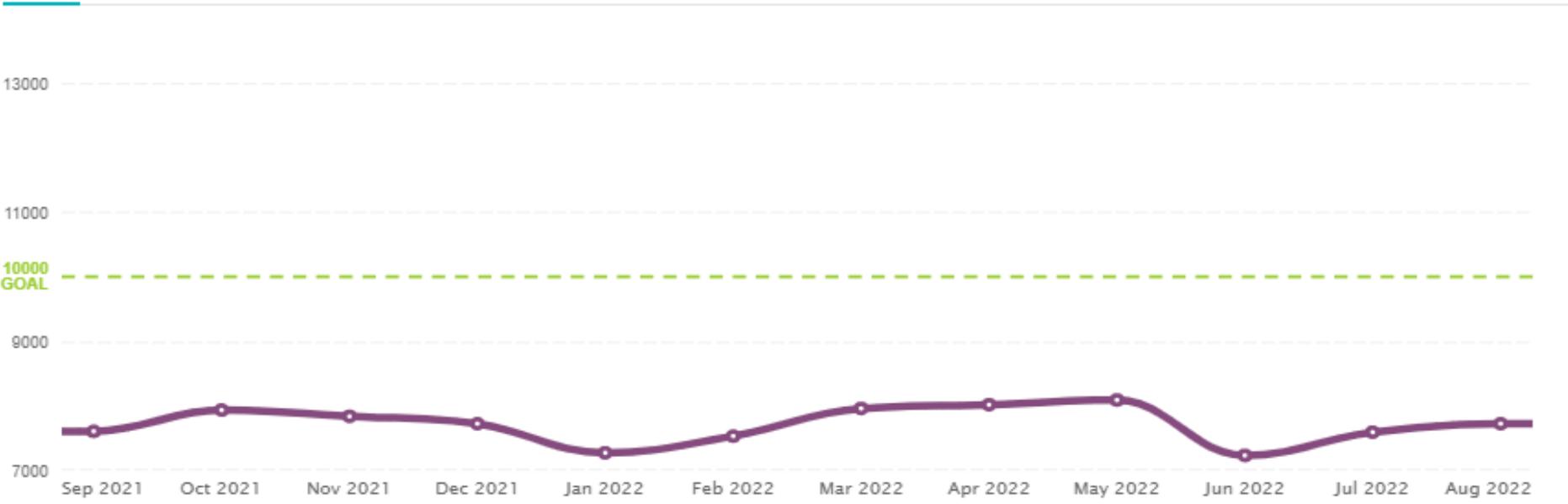
99 participants were active, 71 of which had enough activity data to be included into this breakdown.

Fitbit Program Overview – Step Trends Community Health Choice

Filter: Community H...  Reset filters

Sep 1, 2021 – Aug 31, 2022 

STEPS FLOORS ACTIVE MINUTES



1	CHC S. Loop	7,713	...	Community Health Choice...	7,713
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Data source: Fitbit Dashboard and Reporting September 2021 - August 31, 2022.

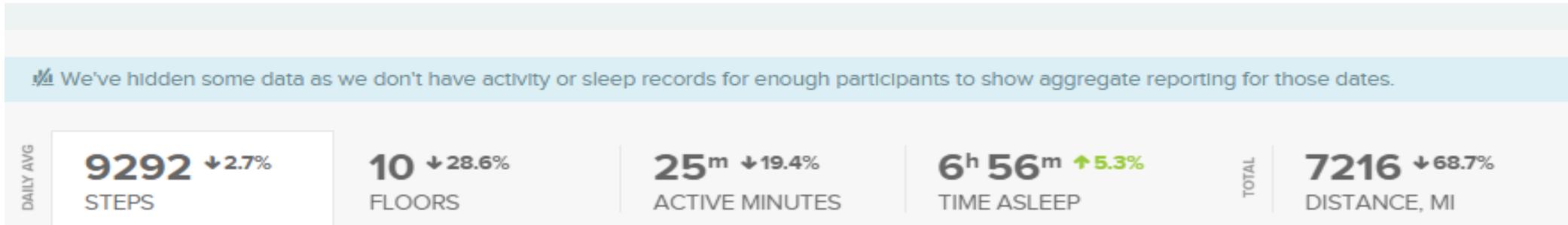
Fitbit Program Overview

Quentin Mease:

Filter: Quentin Mease [Reset filters](#)

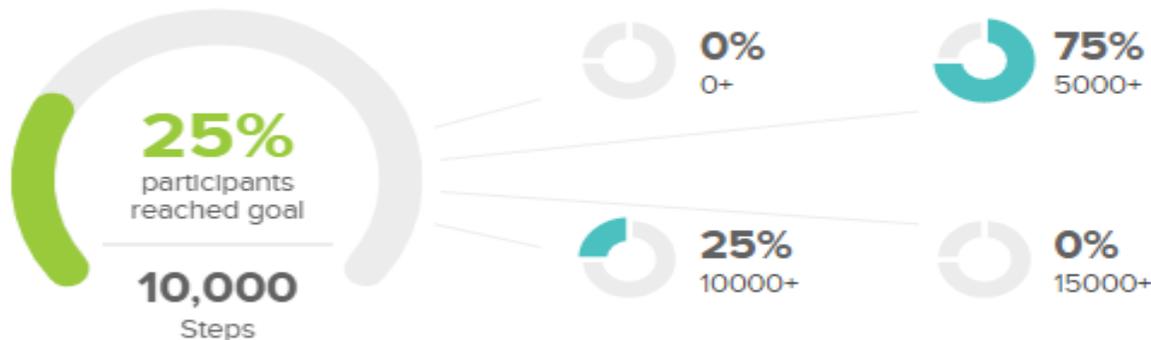
Sep 1, 2021 – Aug 31, 2022

We've hidden some data as we don't have activity or sleep records for enough participants to show aggregate reporting for those dates.

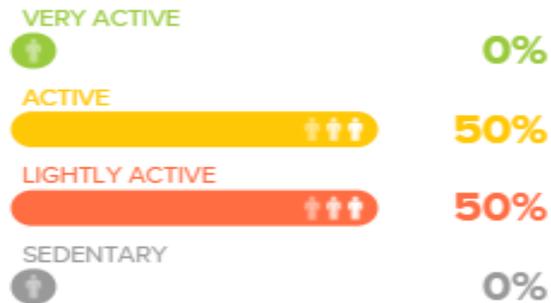


Participants breakdown

DAILY STEPS



ACTIVITY



23 participants were active, 4 of which had enough activity data to be included into this breakdown.

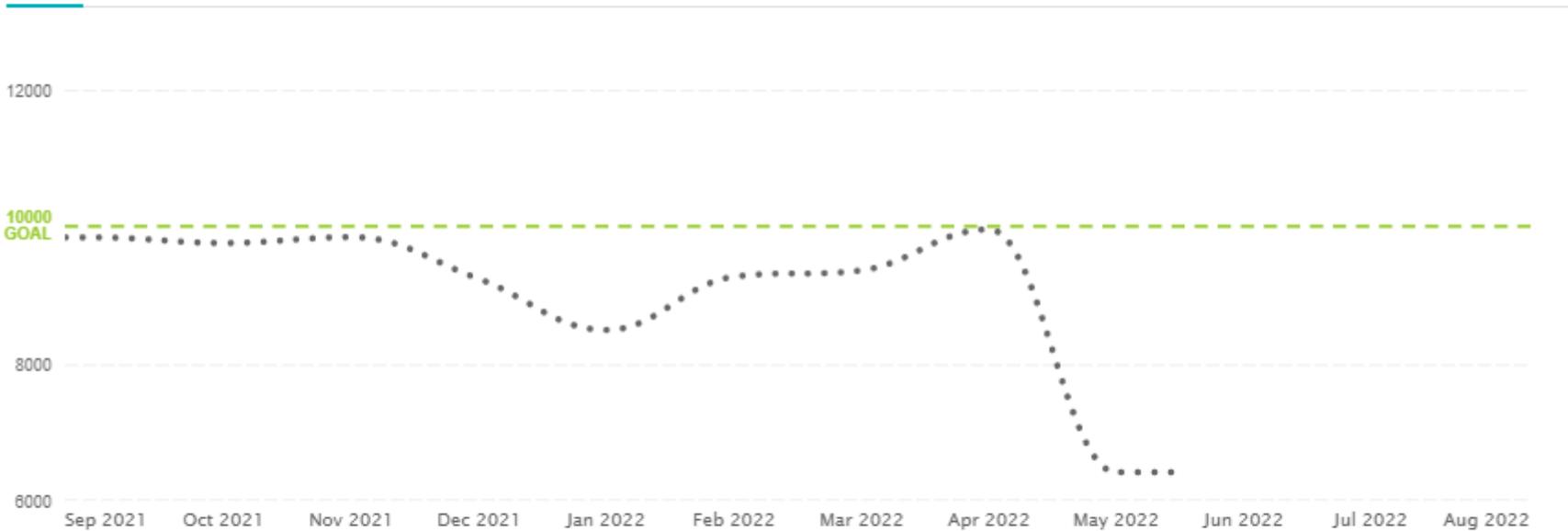
Fitbit Program Overview – Step Trends

Quentin Mease

Filter: Quentin Mease  [Reset filters](#)

Sep 1, 2021 – Aug 31, 2022 

STEPS FLOORS ACTIVE MINUTES



#	GROUP	DAILY AVG STEPS	BEST DAY	DAYS GOAL MET	DATA LOGGED
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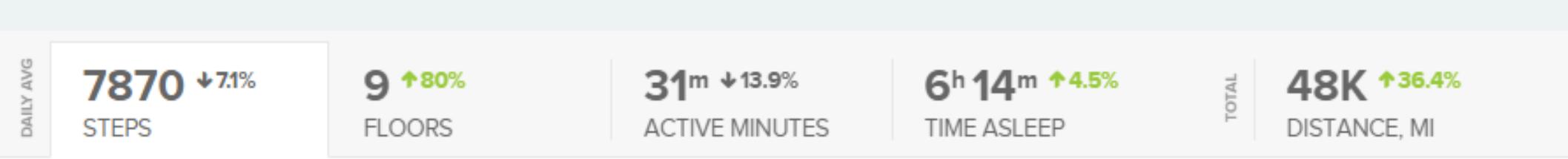
Data source: Fitbit Dashboard and Reporting September 2021 - August 31, 2022.

Fitbit Program Overview

Telecommute:

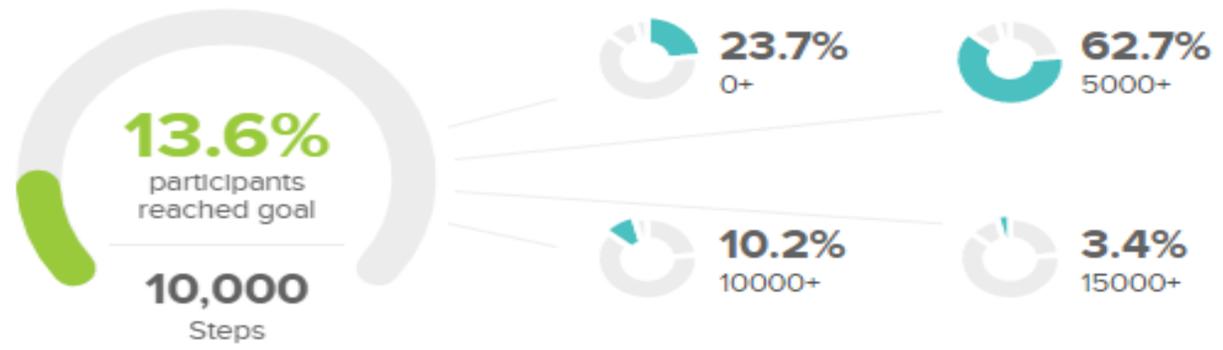
Filter: Telecommute [Reset filters](#)

Sep 1, 2021 – Aug 31, 2022

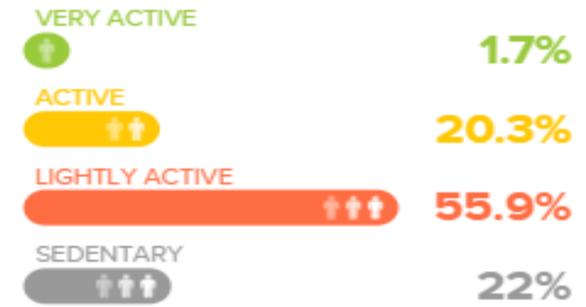


Participants breakdown

DAILY STEPS



ACTIVITY



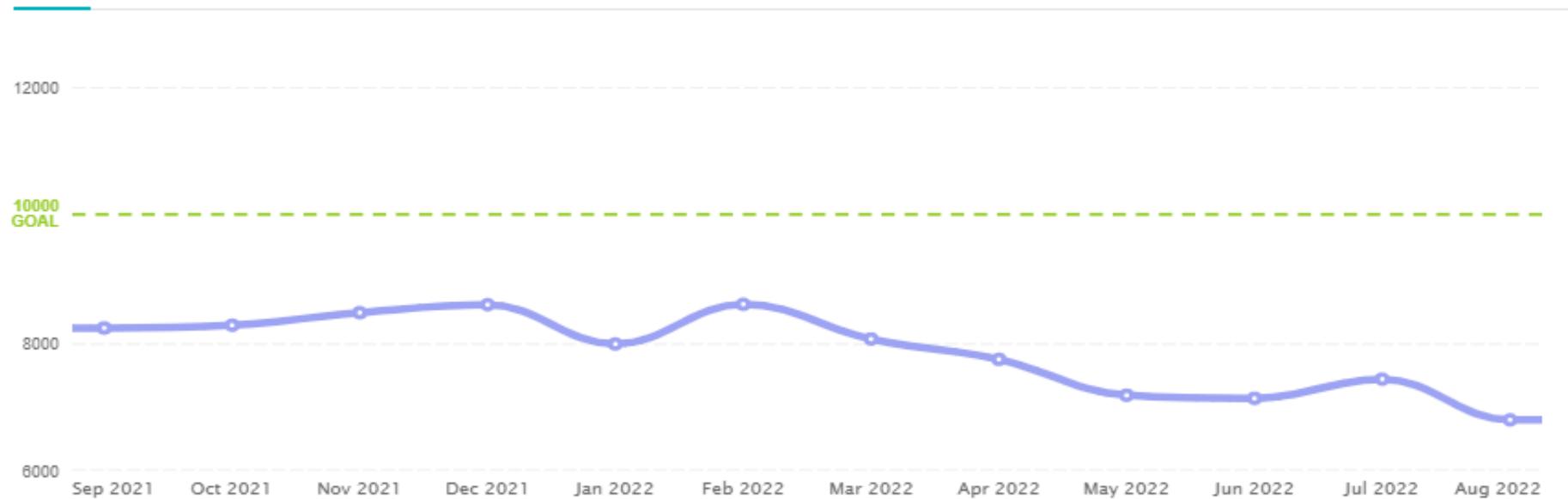
101 participants were active, 59 of which had enough activity data to be included into this breakdown.

Fitbit Program Overview – Step Trends Telecommute

Filter: Telecommute Reset filters

Sep 1, 2021 – Aug 31, 2022

STEPS FLOORS ACTIVE MINUTES



1 Telecommute 7,870

... Telecommute average 7,870

Fitbit Program Overview

Harris County Sherriff's Office:

Filter: Harris County ... [Reset filters](#)

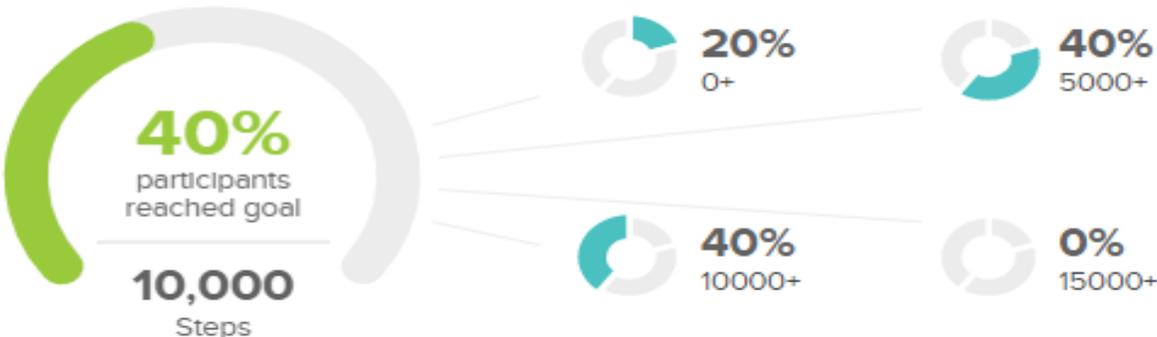
Sep 1, 2021 – Aug 31, 2022

We've hidden some data as we don't have activity or sleep records for enough participants to show aggregate reporting for those dates.

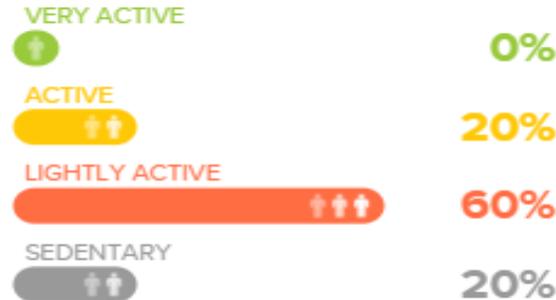
DAILY AVG	8261 STEPS	14 FLOORS	24^m ACTIVE MINUTES	— TIME ASLEEP	TOTAL	4206 DISTANCE, MI
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Participants breakdown

DAILY STEPS



ACTIVITY



21 participants were active, 5 of which had enough activity data to be included into this breakdown.

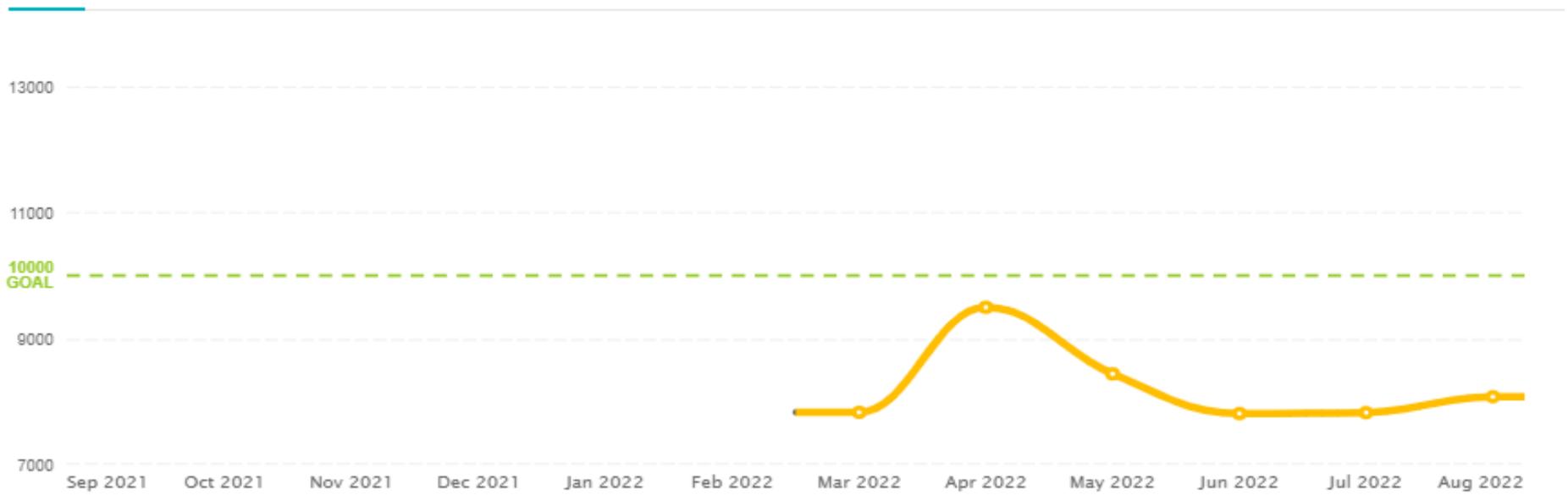
Fitbit Program Overview – Step Trends

Harris County Sheriff’s Office

Filter: Harris County ... [Reset filters](#)

Sep 1, 2021 – Aug 31, 2022

STEPS FLOORS ACTIVE MINUTES



1 Harris County Sheriff's Office 8,261

... Harris County Sheriff's Off... 8,261

Challenges

Step to the Beat of Your Heart – Fitbit Challenge

February 1st – February 28th

- Team Challenge by Scorecard Location
- ACS: 279,927
- Ben Taub Hospital: 276,951
- LBJ Hospital: 265,332
- Quentin Mease: 259,577
- Telecommute: 244,879
- Administration: 231,682
- Community Health Choice: 215,773

Coast to Coast - Health Enhancement Systems

August 15th – September 25th

- 156 participants
- Goal is to earn 150 points by recording physical activity, plus meditation and acts of kindness.
- 33% Achievement Rate

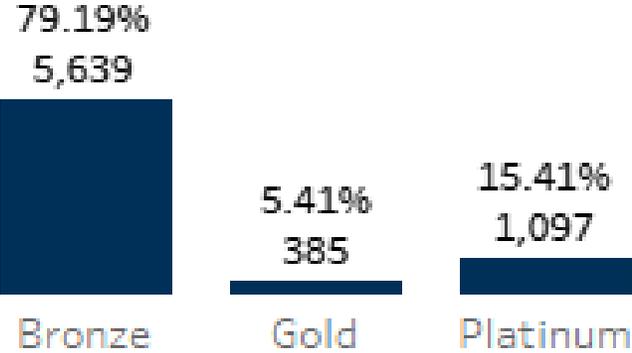
- Health Behaviors - Behaviors and total times recorded
- 1. Physical Activity -3335
- 2. 1 Meditation Session-2139
- 3. 1 Act of Kindness-2295

Medal Level Analysis

Medal Level Analysis

Wellness Rewards Program 9/1/21-8/30/22

Medal Levels for Completed Participants



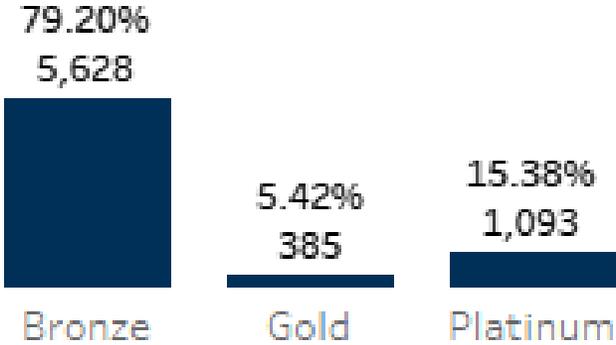
Program-Eligible Population = Regular, full-time and part-time employees (on and off of the medical plan) and spouses on the medical plan with a hire or coverage date from September 1, 2021 – April 30, 2022

Completion status and medal level are individual designations for eligible employees and spouses. Since premium rates consider employees and spouses combined, the Employee Premium Rates graph only includes employees.

73.11% of all Employees and Spouses Earned Wellness Rewards

Premium Rewards Program 9/1/21-8/30/22

Medal Levels for Completed Participants



Premium Reward-Eligible Population = Regular, full-time and part-time employees on the medical plan and spouses on the medical plan with a hire or coverage date from September 1, 2021 – April 30, 2022

Completion status and medal level are individual designations for eligible employees and spouses. Since premium rates consider employees and spouses combined, the Employee Premium Rates graph only includes employees.

80.08% of Employees & Spouses Earned Premium Rewards; 77.63% earned full reward; 2.45% earned partial reward.)

Medal Level Analysis

Medal Level Analysis

Incentive Eligible Population

Results by medal level

Cost & Trend	Platinum	Gold	Bronze	No Award
Member Count	1,197	393	5,845	2,341
PMPM	\$569	\$629	\$666	\$851
Total Medical Trend	16%	27%	16%	21%
Non-Cat. Medical Trend	16%	17%	12%	18%

Engagement Metrics	Platinum	Gold	Bronze	No Award
Health Engagement %	97%	95%	86%	49%
Gaps in Care Compliance	86%	85%	84%	80%
Preventive Care %	97%	95%	93%	64%
% ID'd for Chronic Coaching	68%	69%	65%	57%

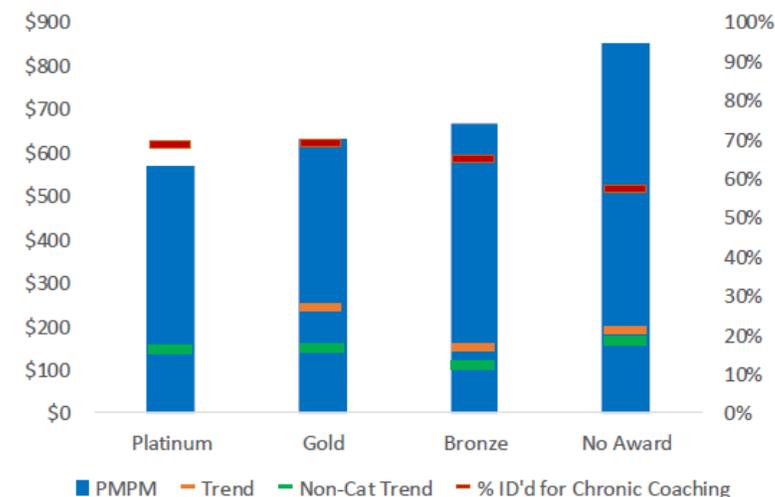
Health Risk Assessment	Platinum	Gold	Bronze	No Award
Low Risk % (0-2 risks)	62%	57%	57%	52%
Medium Risk % (3-4 risks)	27%	33%	30%	29%
High Risk % (5+ risks)	11%	10%	13%	19%

Condition: Gaps Compliance	Platinum	Gold	Bronze	No Award
Hypertension	94%	92%	91%	86%
Hyperlipidimia	94%	93%	93%	92%
Obesity	94%	94%	93%	93%
Diabetes	90%	88%	88%	84%
Asthma	96%	98%	95%	94%

Category: Gaps Compliance	Platinum	Gold	Bronze	No Award
Achieve Targets	88%	87%	86%	84%
Appropriate Monitoring	94%	92%	93%	88%
Medication Adherence	66%	71%	62%	62%



Cost, trend, and coaching identification by medal

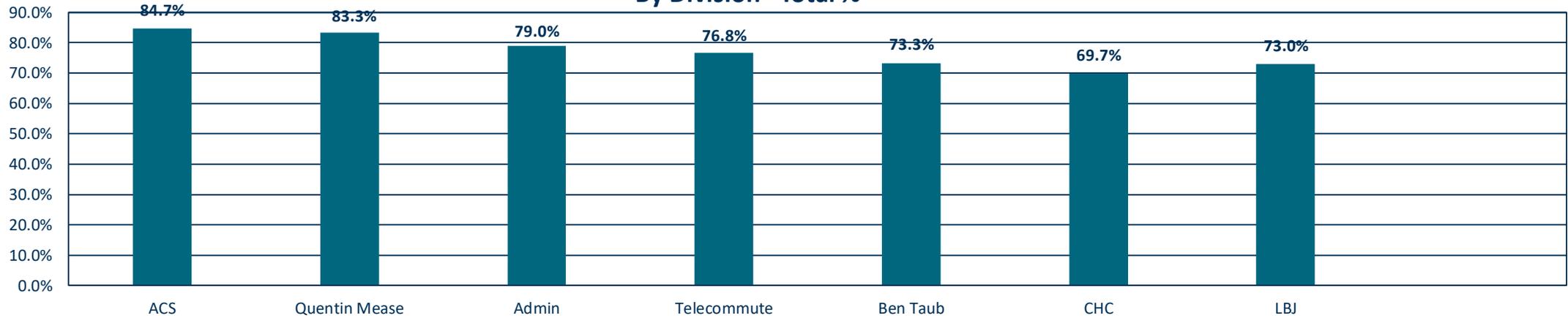


Medal Level Analysis Insights

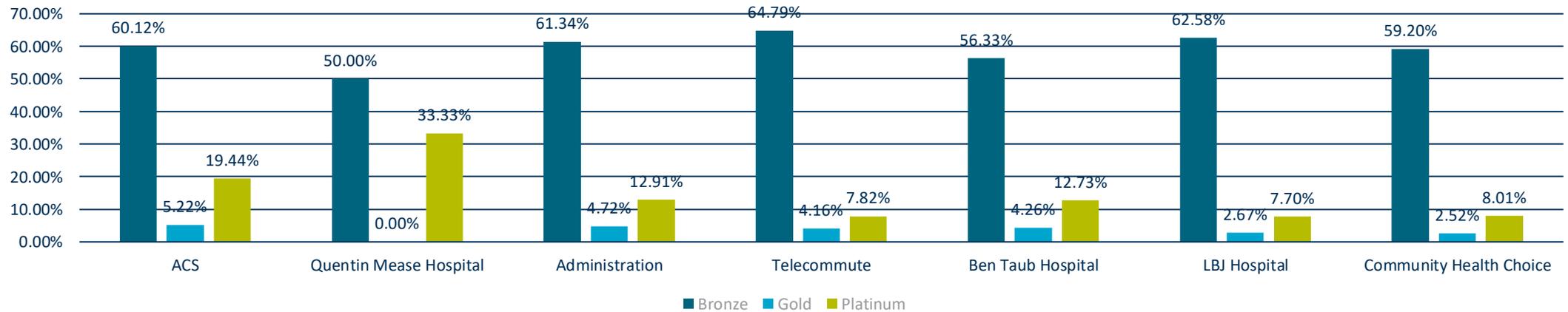
- 7,435 members earned a medal
- Compared to non-earners, award earners had:
 - Lower non-catastrophic medical spend on a PMPM basis
 - Higher health engagement rates
 - Higher preventive care utilization
 - Better Gaps in Care Compliance
 - Higher identification rates for chronic condition coaching
 - Higher percentage of members considered to be low risk

Medal Level Analysis

Premium Reward Program / Medal Level Completion
By Division - Total %



Medal Level By Division



ACS (84.78%) had the largest percentage of Premium Rewards Program /Medal Level Status completions followed by Quentin Mease (83.33%), Admin (78.97%), Telecommute (76.77%), Ben Taub (73.33%), LBJ (72.95%). and CHC (69.73%)

Employee Assistance Program

Employee Assistance Program

UTILIZATION RATE SUMMARY

Type	Count	%	Serviced	%	Activities	%
EAP Files	465	68.6%	465	18.2%	2478	74.4%
Information Calls	33	04.9%	33	01.3%	33	01.0%
Organizational Service/CISD	19	02.8%	1451	56.9%	20	00.6%
Member Portal Web Traffic	0	00.0%	441	17.3%	518	15.6%
Supervisor Referral	1	00.1%	1	00.0%	29	00.9%
Organization Consultation	2	00.3%	2	00.1%	2	00.1%
Work/Life Files	158	23.3%	158	06.2%	251	07.5%
Total	678	100%	2551	100%	3331	100%

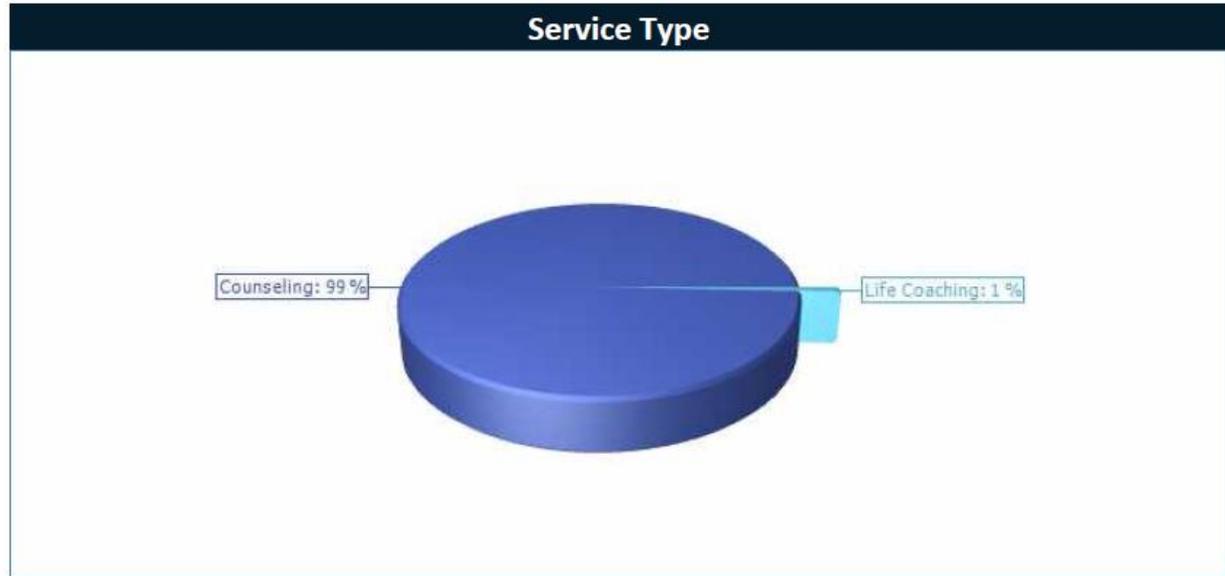
26.94%
Annualized Impact Rate of Total Services including the Member Portal Visits.

- **Subscribers (Monthly Average): 9,467**
- 7.15% total Annualized utilization rate of all EAP files.
- 1,154 total participants in live or recorded webinars; an average of 175 people per webinar
- 4,018 total participants in EAP eLearning webinars; an average of 105 people per webinar

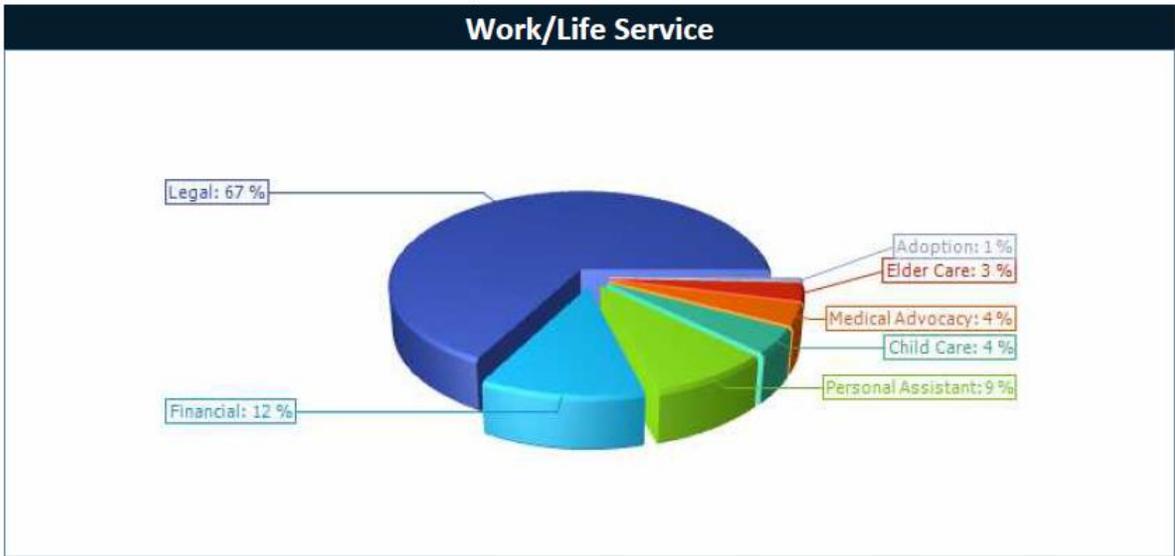
Count	Serviced	Activities
The total number of files: EAP, Organizational Services, Information Calls, etc. that fall within the reporting period.	The total number of service users within files along with Member Portal unique user visits that fall within the reporting period.	The total number of activities from files along with the total Member Portal visits that fall within the reporting period.

Population / Utilization Rate	9467
Annualized Rate for Count of all Files.	7.15%
Annualized Impact Rate of Total Serviced including Member Portal visits.	26.94%

Employee Assistance Program



Service Type	1/1 - 3/31		4/1 - 6/30		7/1 - 9/30		10/1 - 12/31		1/2022 - 12/2022	
	#	%	#	%	#	%	#	%	#	%
Counseling	132	99.25%	135	98.54%	106	100.00%	90	100.00%	463	99.36%
Life Coaching	1	0.75%	2	1.46%	0	0.00%	0	0.00%	3	0.64%
Total	133	100 %	137	100 %	106	100 %	90	100 %	466	100 %



Work/Life Service	1/1 - 3/31		4/1 - 6/30		7/1 - 9/30		10/1 - 12/31		1/2022 - 12/2022	
	#	%	#	%	#	%	#	%	#	%
Adoption	0	0.00%	1	2.50%	0	0.00%	0	0.00%	1	0.63%
Child Care	1	2.17%	2	5.00%	0	0.00%	4	12.50%	7	4.43%
Elder Care	2	4.35%	1	2.50%	0	0.00%	2	6.25%	5	3.16%
Financial	2	4.35%	4	10.00%	11	27.50%	2	6.25%	19	12.03%
Legal	36	78.26%	29	72.50%	20	50.00%	21	65.63%	106	67.09%
Medical Advocacy	2	4.35%	1	2.50%	0	0.00%	3	9.38%	6	3.80%
Personal Assistant	3	6.52%	2	5.00%	9	22.50%	0	0.00%	14	8.86%
Total	46	100 %	40	100 %	40	100 %	32	100 %	158	100 %

Employee Assistance Program

Primary Presenting Problem

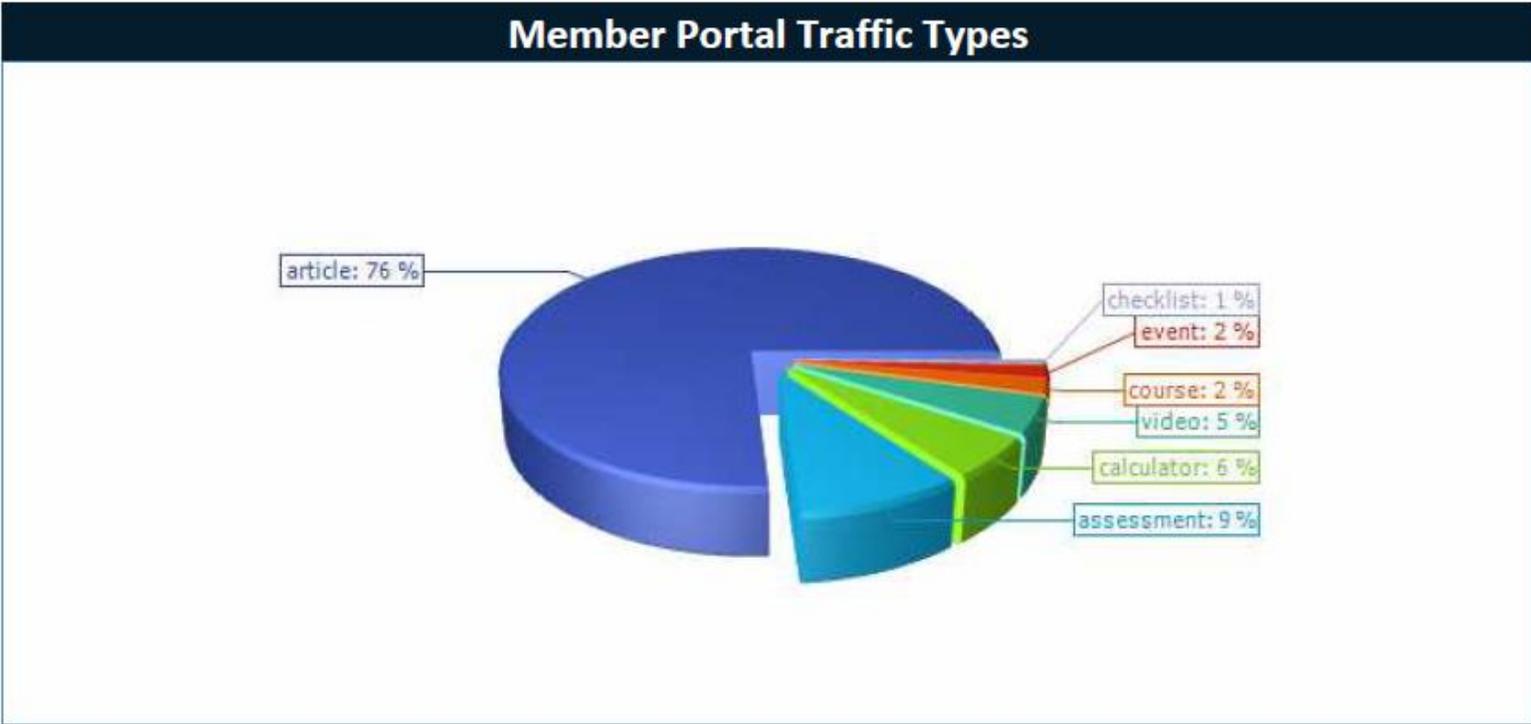


Employee Assistance Program

Primary Presenting Problem	1/1 - 3/31		4/1 - 6/30		7/1 - 9/30		10/1 - 12/31		1/2022 - 12/2022	
	#	%	#	%	#	%	#	%	#	%
Adoption	0	0.00%	1	0.56%	0	0.00%	0	0.00%	1	0.16%
Alcohol	0	0.00%	1	0.56%	0	0.00%	0	0.00%	1	0.16%
Anger Related Issues	5	2.79%	4	2.26%	0	0.00%	0	0.00%	9	1.44%
Anxiety Symptoms	14	7.82%	20	11.30%	13	8.90%	11	8.87%	58	9.27%
Assault	1	0.56%	0	0.00%	0	0.00%	0	0.00%	1	0.16%
Child Care	1	0.56%	2	1.13%	0	0.00%	4	3.23%	7	1.12%
Claims	0	0.00%	1	0.56%	0	0.00%	0	0.00%	1	0.16%
Conflict With Coworker	1	0.56%	0	0.00%	1	0.68%	0	0.00%	2	0.32%
Conflict With Supervisor	1	0.56%	2	1.13%	0	0.00%	2	1.61%	5	0.80%
Couples Issue	12	6.70%	11	6.21%	7	4.79%	7	5.65%	37	5.91%
Depressive Symptoms	19	10.61%	14	7.91%	11	7.53%	8	6.45%	52	8.31%
Domestic Violence	1	0.56%	1	0.56%	3	2.05%	2	1.61%	7	1.12%
Drug	1	0.56%	0	0.00%	1	0.68%	0	0.00%	2	0.32%
Eating	1	0.56%	0	0.00%	0	0.00%	0	0.00%	1	0.16%
Elder Care	2	1.12%	1	0.56%	0	0.00%	2	1.61%	5	0.80%
Emotional	14	7.82%	21	11.86%	10	6.85%	13	10.48%	58	9.27%
Family Issue	11	6.15%	6	3.39%	9	6.16%	6	4.84%	32	5.11%
Financial	2	1.12%	3	1.69%	15	10.27%	2	1.61%	22	3.51%
Grief	8	4.47%	12	6.78%	12	8.22%	8	6.45%	40	6.39%
Interpersonal Issue	17	9.50%	28	15.82%	16	10.96%	14	11.29%	75	11.98%
Legal	36	20.11%	29	16.38%	20	13.70%	22	17.74%	107	17.09%

Primary Presenting Problem	1/1 - 3/31		4/1 - 6/30		7/1 - 9/30		10/1 - 12/31		1/2022 - 12/2022	
	#	%	#	%	#	%	#	%	#	%
Life Coaching	0	0.00%	2	1.13%	0	0.00%	0	0.00%	2	0.32%
Medical Advocacy	2	1.12%	0	0.00%	0	0.00%	2	1.61%	4	0.64%
OC - Performance Issue	0	0.00%	0	0.00%	0	0.00%	1	0.81%	1	0.16%
Other Addiction Related Concern	0	0.00%	0	0.00%	0	0.00%	1	0.81%	1	0.16%
Parenting Issue	0	0.00%	0	0.00%	3	2.05%	0	0.00%	3	0.48%
Personal Assistant	3	1.68%	3	1.69%	9	6.16%	0	0.00%	15	2.40%
Physician/Health Provider	0	0.00%	0	0.00%	0	0.00%	1	0.81%	1	0.16%
Stress	22	12.29%	9	5.08%	12	8.22%	11	8.87%	54	8.63%
Threat to Self	0	0.00%	1	0.56%	0	0.00%	1	0.81%	2	0.32%
Wellness Coaching	1	0.56%	0	0.00%	0	0.00%	0	0.00%	1	0.16%
Work Related Stress	4	2.23%	5	2.82%	2	1.37%	6	4.84%	17	2.72%
Workplace Related Traumatic Event	0	0.00%	0	0.00%	2	1.37%	0	0.00%	2	0.32%
Total	179	100 %	177	100 %	146	100 %	124	100 %	626	100 %

Employee Assistance Program



Member Portal Traffic Types	1/1 - 3/31		4/1 - 6/30		7/1 - 9/30		10/1 - 12/31		1/2022 - 12/2022	
	#	%	#	%	#	%	#	%	#	%
article	255	77.04%	40	71.43%	68	82.93%	36	65.45%	399	76.15%
assessment	33	9.97%	4	7.14%	4	4.88%	8	14.55%	49	9.35%
calculator	15	4.53%	6	10.71%	4	4.88%	4	7.27%	29	5.53%
checklist	2	0.60%	0	0.00%	0	0.00%	1	1.82%	3	0.57%
course	5	1.51%	3	5.36%	2	2.44%	0	0.00%	10	1.91%
event	8	2.42%	0	0.00%	1	1.22%	0	0.00%	9	1.72%
video	13	3.93%	3	5.36%	3	3.66%	6	10.91%	25	4.77%
Total	331	100 %	56	100 %	82	100 %	55	100 %	524	100 %

Employee Assistance Program-Healthy Knowledge Seminars

Summary of September 2021 – August 2022:

- Total live webinars: 11
 - Total participants for live webinars: 1,154
 - Average attendance per webinar: 175

- Total recorded eLearning webinars: 23
 - Total recorded eLearning Webinars: 23
 - Total participants for recorded webinars + quiz: 4,018
 - Average attendance per recorded webinar: 105

Rewards & Recognition

Awards & Accolades

The Healthy@Harris program has been honored with the following awards and accolades:

- Achieved #1 in Top 100 Healthiest Workplaces in America 2022 (#1), 2021 (#45), 2020 (#6), 2019 (#2), 2018 (#64)**
 - Harris Health System ranked **#1** in the Top 100 Healthiest Workplaces in America
 - The winning organizations were honored for their exceptional achievement and leadership in building a healthy and productive workplace committed to employee and community health. Over 1,000 of America's top wellness programs were evaluated for this award across the country.
 - Award applicants were evaluated across six key categories: Culture and Leadership Commitment, Foundational Components, Strategic Planning, Marketing and Communications, Programming and Interventions, and lastly, Reporting and Analytics. Applicants were evaluated with the proprietary Healthiest Employers® Index, a 1-100 rubric for wellness programming. The Top 100 organizations have achieved lasting success through a wide array of employee wellness initiatives and corporate wellness programs.
- Achieved #1 Healthiest Employer in Texas (#1 in 2022, #6 in 2021, #1 in 2020, #1 in 2019 & #1 in 2018)**
 - Harris Health System was ranked **#1** among the Healthiest Employers within the Large Companies category (5,000 – 9,999 employees); up from #6 in 2021.
 - The score is based on a 75-question survey given by Springbuk Health Analytics System that scored each company in six categories: culture and leadership commitment, foundational components, strategic planning, communications and marketing, programming and interventions, reporting and analytics. Healthiest Employers Inc. ranks the companies by total score and Healthiest Employer Index.
- American Heart Association Workplace Health Achievement Gold Award (2021, 2020, 2019, 2018, 2017)**
 - The American Heart Association has defined best practices for employers to use to build a culture of health for their employees in the workplace. The American Heart Association's Workplace Health Achievement Index measures the extent to which the company has implemented those workplace health best practices. Companies recognized at the Gold level have achieved an Index score of 175- 217 out of a maximum 217 points.
 - Harris Health System has earned the designation for our evidence-based, scientific, best-practice Wellness program that is improving our employees' overall health and well-being.

#1 in America



#1 in Texas



Awards & Accolades Continued

The Healthy@Harris program has been honored with the following awards and accolades:

- Achieved the Platinum Well Work Place Award through the Worksite Wellness Council of America (2021 & 2023)**
 - To earn the highest level Platinum Award, an employer must establish programs to improve employee health and well-being using the Seven Benchmarks: 1) Committed and Aligned Leadership, 2) Collaboration in Support of Wellness, 3) Collecting Meaningful Data, 4) Crafting an Operating Plan, 5) Choosing Initiatives that Serve the Whole Employee, 6) Creating Supportive Environments, Policies and Practices and 7) Conduct Evaluation, Communicate, Celebrate and Iterate.
- Achieved re-accreditation of the CEO Cancer Gold Standard (2012-2022)**
 - To earn *Gold Standard* accreditation, an employer must establish programs to reduce cancer risk by taking concrete actions in five key areas known as the Five Pillars: 1) Prevention, 2) Screening, 3) Cancer Clinical Trials, 4) Quality Treatment and Survivorship, and 5) Health Education and Health Promotion.
- Cigna Healthy Workforce Designation Gold Level (2022)**
 - Prior Year: Cigna Well-Being Award for Outstanding Culture of Health (2022, 2021, 2020, 2019, 2018, 2017)
 - The Cigna Well-Being Award was presented to Harris Health System for actively and positively impacting the overall health and well-being of their population. Applicants are evaluated on various components of their well-being program including overall infrastructure (management support, goals, branding of the program), workplace environment, policies, program implementation, data collection, incentives and overall participation.
- Healthiest Employers Hall of Fame Designation (2022)**
 - Harris Health System was inducted in the Healthiest Employers Hall of Fame. Inductees regularly demonstrate an ongoing commitment to their employees by regularly modifying and altering programs to best fit their populations' needs.



Current and Future Strategies

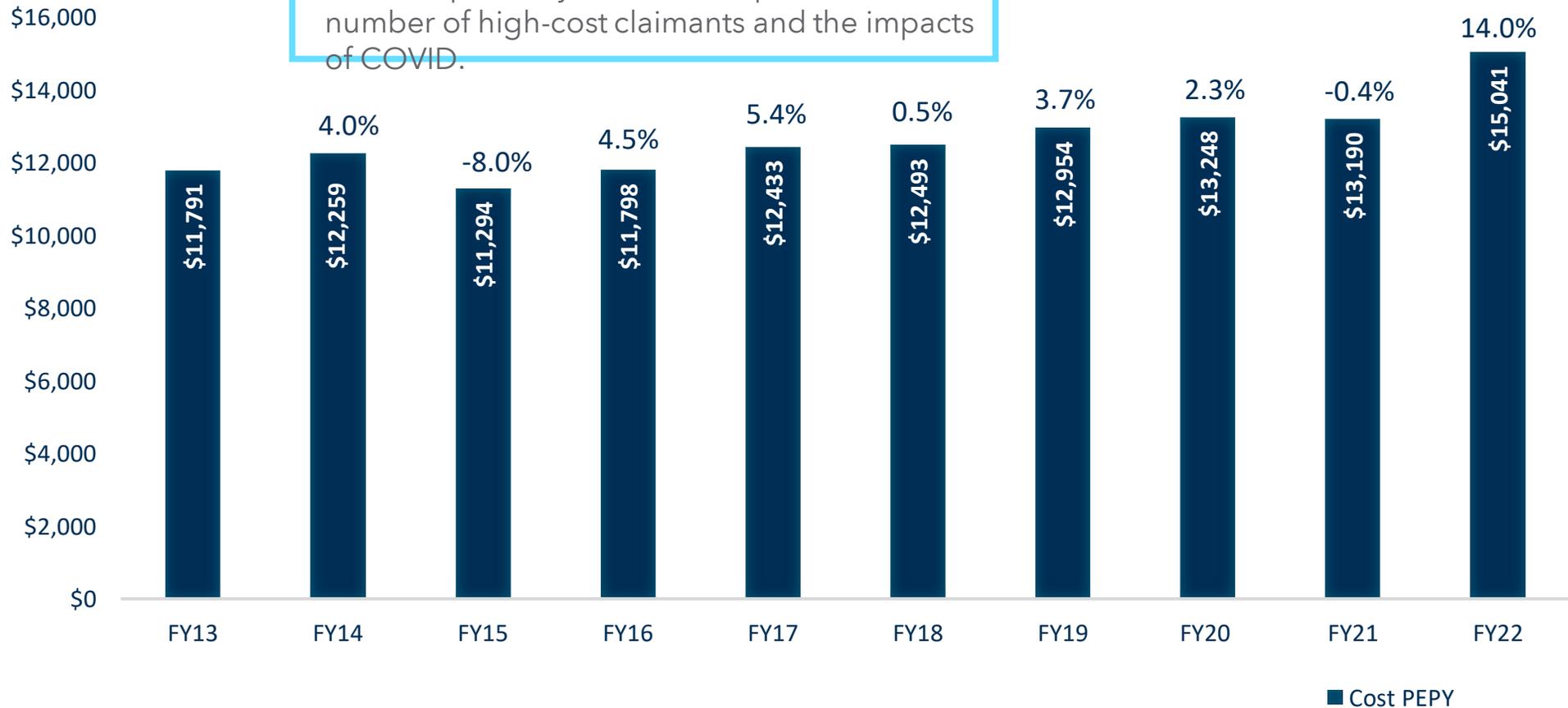
Summary of Program Year Strategies

- Pivoted to online employee wellness classes, workshops and special events to make programs and services more accessible.
- Created over 24 custom employee wellness workshops, implementing a minimum of two per month
- Created 4 new wellness class series
- Implemented 1 Fitbit Challenge and 1 HES Challenge
- Implemented a variety of special events including the annual Relaxathon with new experiences
- Continued to focus on pre-diabetic, diabetic, hypertension, weight management and metabolic syndrome population
 - Enhanced data analytics established for benchmarking against
- Continue to engage and reward spouses to drive participation in Wellness programs
 - The 2021-2022 Wellness Reward Program: Both the employee and covered spouse must individually complete the annual physical, health assessment and achieve 1,000 points to earn the full premium reward.
- Added non-medical plan participants to the Wellness Rewards Program. Non-medical plan participants are now able to complete the program requirements and earn Amazon eGift cards.
- Continued with the Rx copay and deductible waiver for diabetes medications and supplies including insulin for individuals actively engaged in Livongo Diabetes Management Program. Brand medications are covered for medications in which no generic equivalents are available.
- Continued with Rx copay and deductible waiver for generic Rx, brand Rx in which there are no generic equivalents are available, and supplies for individuals actively engaged in Livongo Hypertension Management Program.
- Expanded Saba eLearning opportunities to enhance access to education for employees and spouses. Saba allows for an enhanced and aligned experience for both employees and spouses to participate in a mobile friendly, internet based application available from anywhere. Added all workshops, classes, healthy knowledge seminars and webinars to eLearning for easy accessibility.
- Continued with tiered status rewards via Amazon eGift Cards to drive enhanced engagement in wellness and prevention beyond achievement of Wellness Rewards
- Continued with discounts and subsidy on Fitbits to encourage physical activity and reduce risks
- Simplified Fitbit group enrollment process to drive engagement.
- Promoted discounted Gym memberships to encourage physical activity through participation at local gyms, fitness facilities etc.
- Continued to promote Livongo Diabetes Prevention Program to provide a multi-modal resource and reduce risk of Diabetes in our workforce and reduce weight.
- Drive engagement in EAP to assist in mental and emotional well-being
- Expanded onsite presence at clinics and offsite locations
- Increased onsite opportunities post Covid-19.

Appendix A

Historical & FY22 Year-End Financial Snapshot

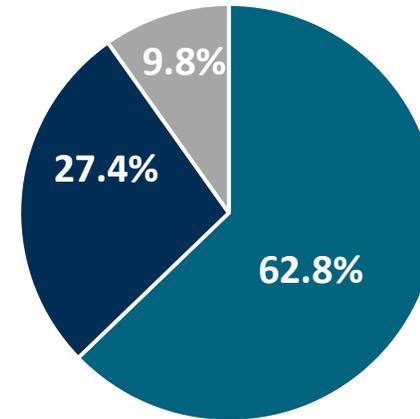
Harris Health
 FY22 is the 1st time in 9 years that Harris Health did not run below national healthcare trend. This was primarily due to an unprecedented number of high-cost claimants and the impacts of COVID.



Data source: Harris Health System Strategy Report by Alliant Insurance Services, Inc. July 2022.

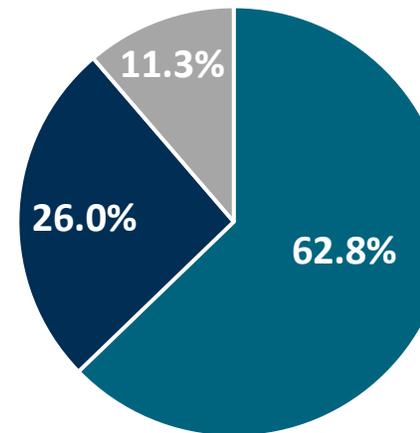


February 2022 Enrollment



■ Kelsey ■ CDHP ■ Value

March 2022 Enrollment



■ Kelsey ■ CDHP ■ Value

Contact Us!

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Caring for ourselves so we can care for others

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