

**The Connection Between Employee Health and its Affect on the
Workplace**

Undergraduate Research Thesis in Human Resources

**Presented in Partial Fulfillment of the Requirements for the
Degree of Business Administration of The Ohio State University**

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Abstract

Living a healthy lifestyle can affect your personal relationships, mental state, and overall wellbeing. Companies are beginning to take note of this impact and implementing policies and programs to facilitate healthy living styles for their employees. Whether it's putting a workout facility in the office, offering healthier food options in the cafeteria, or outfitting desks with "stand-up" capabilities, many businesses are trying to improve their employee's health. Fortune magazine estimates that currently only around 7% of US companies have a comprehensive promotion plan to encourage employees to live a healthier lifestyle. Should this percentage be increased? The purpose of this study is to see if employer's actions promoting wellness have been paying off, what health issues should be focused on in a promotion program, and if, in general, healthier employees tend to see more success in the corporate world. The methodology I used to answer to this issue was gathering and analyzing biometric data from a fortune 100 company. This data helped to highlight the core health issues affecting employees in the workplace. Weight, blood pressure, and stress were the overwhelming risks in 77% of locations from which data was received. Along with this there seems to be a strong connection between an employee's health risk level and absentee rates. Employees that were considered "health risks" missed on average 3 more days than those with a low risk level. Overall, an average of \$436,314 in avoidable health care costs was found at each location. Based on these findings my study helps to show that an individual's health does have an impact on personal and corporation-wide achievement. This research can be used to support the implementation of health promotion plans.

Keywords: healthy lifestyle, corporate success, health promotion plan

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Table of Contents

<i>Title Page</i>	1
<i>Copyright Page</i>	2
<i>Abstract</i>	3
<i>Acknowledgments</i>	4
<i>Vita</i>	5
<i>List of Figures and Tables</i>	7
<i>Introduction</i>	8-10
<i>Literature Review</i>	10-14
<i>Hypotheses</i>	14
<i>Methodology</i>	14-17
<i>Results and Conclusions</i>	17-24
<i>Future Research</i>	23-24
<i>Bibliography</i>	25
<i>Appendix 1</i>	26-27
<i>Appendix 2</i>	28
<i>Appendix 3</i>	29

List of Figures and Tables

Table 1. Combined Employee Wellness Study12

Table 2. The Relationship Between Cholesterol and Absenteeism.....12

Table 3. Example Survey Questions and Responses.....17

Figure 1. Avoidable Health Care Costs Across Corporate and Manufacturing Facilities.....19

Figure 2. Average Health Risk Ranking Across Corporate and Manufacturing Facilities.....21

Figure 3. Health Status Indicators.....22

Figure 4. Days Absent Due to Health Reasons for Each Risk Level.....23

Introduction:

This research examines how the implementation of a corporate wellness program can affect both individual and company-wide success, concentrating on if employer's actions promoting wellness have been paying off financially, what health issues should be focused on in a promotion program, and if, in general, healthier employees tend to see more success in the corporate world. A corporate wellness program is defined as any plan implemented by an employer to improve the health of its employees while also having offerings to help individual employees overcome specific health related issues (i.e. chronic smoking, depression). In recent years there has been a trend of companies implementing policies and programs to facilitate healthy living styles for their employees. Whether it is putting a workout facility in the office, offering healthier food options in the cafeteria, or outfitting desks with "stand-up" capabilities, many companies are trying to improve their employee's health. Currently only around 7% of US companies have a comprehensive promotion plan to encourage employees to live a healthier lifestyle (Galinsky, 2008). Should more companies be taking action to raise this number? I wanted to know if taking actions promoting wellness would have a positive effect studied and, more specifically, what these effects would be.

There are a few different areas this research focuses on. The first area is the financial side of wellness program implementation. At the end of the day one of the most, if not the most, important questions for a business is if they are making money or not. In order for a business to be successful and make a profit, they must have productive employees. If employees feel tired at work or worn out before the end of the day, then they won't be as productive as they could be. This lack of efficiency could lead to lower profits in

the long run. Although a wellness program would likely help to decrease this fatigue, one negative impact a wellness program could have on profitability is the cost of its implementation. But, if the cost of the program is offset by increased productivity, then the overhead costs may be worth it. Not only could these upfront costs be offset by increased employee output, but could help decrease company health care costs in other areas as well. A Harvard Business Review study conducted by Cortney Rowan and Karuna Harishanker (2014) found that companies with wellness programs have around 5% lower health care costs than companies that have no plan. If company employees aren't very healthy, then health care costs may be lowered with the implementation of a wellness program. Implementing a program will undoubtedly cost a certain amount of money, but will this cost be offset by increased productivity from workers? Will programs only increase the actual health of an employee and not change productivity at all? Or maybe a program would have zero impact on employee and/or company success.

Second, specific health issues prevalent within the company are studied. Knowing what problems a majority of employees are facing will help a company develop a more personalized health promotion plan. One of the main impacts of a proper plan can be assumed to be a decrease in absenteeism. Absenteeism is an employee's intentional or habitual absence from work. Absenteeism can be caused by many different factors like job hunting, disengagement, and harassment. Even though there are a multitude of reasons an employee may not show up for work, this study focuses on factors relating to health. Some of these include injury, depression, illness, and stress. A corporate wellness program can presumably positively impact all of these reasons for missing work. Trying to curb the number of employees that take sick days should be something that all companies strive to

accomplish. The productivity lost because of these days missed can be very harmful not only to the employee, but to the company as well. Gallup (2013) estimates that US companies lose around \$84 billion each year due to absenteeism. Although, most of this money does come from jobs that require a large amount of physical labor, there are still major losses in white-collar positions as well. It was calculated that \$15 billion is lost from manager/executive absenteeism annually (Investopedia, 2013). These costs can be traced back to a few main areas including wages paid to absent employees, high cost replacement workers, and administrative costs of managing absenteeism.

The last area examined is whether employees who are healthier individuals were actually more successful in the corporate world. Living a healthy lifestyle has many different benefits, such as greater endurance, decreased chance of sickness, and general well being. But, I wanted to know whether being a healthy person goes past basic physical improvements. Do healthier individuals hold higher titled jobs compared to those who aren't healthy? Michael Hyatt (2015), a *New York Times* bestselling author and former CEO, has been quoted as saying "physical health has a direct impact on your professional success". There currently doesn't seem to be any solid data that supports this statement. Is there a correlation between physical health and an employee's ability to move up in management?

Literature Review:

Most of the published articles that compare corporate wellness to work output and general company success have focused on absenteeism and cost savings due to a decreased need for health care coverage (See Baicker, Cutler & Song, 2010; Aldana & Pronk, 2001). Much of this data has been collected through surveys sent to companies. For example,

researchers would send out a survey before a health promotion program begins and again 6 months after the start. This survey would consist of questions relating to employee health. They may ask about eating habits, exercise habits, percentage of employees that smoke, or any other health related question. Another example of a key investigation method that has been used by researchers is comparing a number of company workplace wellness programs (See Baicker, Cutler & Song, 2010). Researchers would do this to figure out the best way to set up wellness programs or figure out ways to combine elements of different programs to create a more effective agenda.

A recent study out of the Journal on Health Affairs (2010) looked at how workplace wellness programs can generate cost savings. Overall, the article talked very positively about the effects of wellness programs that corporations have implemented. For example, one statistic cited in the article was promotional program ROI. The article states that for every dollar spent on wellness programs, there is a decrease of \$3.27 in medical costs (Shown in Table 1). Another interesting statistic was that absenteeism costs fall \$2.73 for every dollar spent. Although these numbers do give good reason for a company to adopt a wellness program, this doesn't mean all programs will necessarily work. There has to be strategy behind it. To build an effective program, there should be prior research on proper implementation. Furthermore, this article says that further exploration and a broader applicability of findings are needed before any concrete statements should be made about wellness programs.

Combined Employee Wellness Study

Study focus	Number of studies	Average sample size		Average duration (years)	Average savings ^a	Average costs ^a	Average ROI ^b
		Treatment	Comparison				
Health care costs	22	3,201	4,547	3.0	\$358	\$144	3.27
Absenteeism	22	2,683	4,782	2.0	\$294	\$132	2.73

Table 1

An article authored by Dr. Steven Aldana and Dr. Nicolaas Pronk (2001) published in the *Journal of Occupational and Environmental Medicine* compares absentee rates to many different health issues including cholesterol, obesity, and psychosocial stress. The results of the comparison for cholesterol are shown below in Table 2. In short, the table shows that workers with higher cholesterol tend to have a slightly higher absentee rate than those with lower cholesterol. Overall, this literature review demonstrates that health issues and failure of employees to participate in fitness and health promotion programs are associated with higher rates of employee absenteeism. When determining how to manage absenteeism, employers should carefully consider the impact that health promotion programs can have on rates of absenteeism and other employee-related expenses (Aldana, 2001).

Cholesterol and Absenteeism*

Study	Purpose	Design/ Sample Size	Evaluation Period	Absenteeism Measure	Summary
Bertera ⁷	Evaluate the impact of behavioral risk factors on absenteeism in a large working population	QE/45,976	Cross-sectional	Self-reported	After control for confounding variables, employees with cholesterol levels above 221 mg/dL had an 11% higher absenteeism rate than employees with cholesterol below 221 mg/dL.
Yen et al ²⁸	Predict absenteeism by using 12 measures of health risk to develop regression models	C/1284	Cross-sectional	Company-reported	When included in a stepwise regression with other health risks and predictors, cholesterol did not make a significant contribution to the model.

* QE, quasi-experimental; C, correlational.

Table 2

Chris (1990) examined the success of health promotion programs in terms of continued participation. Specifically, what keeps an employee on track and ways companies can ensure that all of their employees stick with the program. One issue of lagging employee participation is that it is hard to get an accurate reading of if the program is really working. A sample size must be rather large in order to come to any conclusions. Another big issue about analyzing participation rates and program effectiveness is that most companies don't track numbers revolving around these topics. Overall, the author states that health program participation rates start out high, but see a sharp drop off a few weeks after initiation.

Addley (2001) published an article in the journal of *Occupational Medicine* in Oxford, England that focuses around a study completed in Northern Ireland that evaluated the effectiveness of a 6-month wellness program. The program concentrated on overall health, discussing many different factors like regular exercise, healthy eating, and smoking. Out of all the factors addressed, smoking seemed to be the hardest to change. Only 14% of people who wanted to quit remained abstinent by the end of the six-month period. On the other hand, close to 70% of employees kept a healthy diet and regular exercise routine throughout the program. Overall, the program seemed to be effective, but further research is needed to show the program's effect on absenteeism and productivity. These last two articles provide a good background as to how effective or ineffective wellness programs can be.

No matter the research method used, there was one commonality in almost all of the studies I looked at. Absenteeism was one of the key figures that researchers looked at to measure the effectiveness of wellness programs. Overall, most articles I found have said

that wellness programs are effective, but they aren't sure to what extent. To build an effective program, there should be prior research on proper implementation. Furthermore, additional exploration and a broader applicability of findings are needed before any tangible statements should be made about wellness programs. Because of this lack of confidence in the current research results, a first goal of this research is to help confirm or deny the research that has already been conducted with new data.

Hypotheses:

1. H₀: The health promotion program will not have a tangible impact on the company
H_A: The health promotion program will have a tangible impact on the company
2. H₀: There will be a similar set of health problems across all tested locations
H_A: There will not be a similar set of health problems across all tested locations
3. H₀: Health and fitness level does have an affect on an individual's rank in a company
H_A: Health and fitness level does not have an affect on an individual's rank in a company

Methodology:

Data from a Fortune 100 food and wellness company, referred to as Brand X, was used as the basis for this research. The analysis of this data was not only essential for my research, but it also was very helpful to the human resource department within the company. The firm implemented a new wellness program in 2016 and was looking to examine its effectiveness. This provided real-time data. The company's program fit the stated definition (any program implemented by an employer to improve the health of its employees and has offerings to help individual employees overcome specific health related issues (i.e. chronic smoking, depression)). I had the opportunity to work directly with the Human Resources department to generate a plan to collect both tangible and intangible

health information on a large subset of employees. This data retrieval was broken up into two different segments.

The first step I took allowed me to find answers to the first two topics of my research. I needed to understand how the promotion program financially impacted Brand X. I also wanted to see what the core health issues at Brand X were and based on that decide whether the company should sustain or restructure its current health program. This first part was very tangible data that was already quantified or could easily be quantified. Just before the start of their health promotion program, Brand X began optional annual biometric screenings in 2015. Their health care provider came into both corporate buildings and manufacturing facilities around the nation to collect information relating to core vital signs. They documented information such as blood pressure, stress levels, and cholesterol levels. I was granted access to the two years of data they had collected, so that I could aggregate and analyze it.

Once receiving this data I broke down my analysis into a three-step process. The first of these three steps was to aggregate the raw biometric data I received from the health care company. I needed to have one location where all of the data could easily be manipulated for easier understanding. I transferred the pdf files I received from both 2015 and 2016 into a large excel document. Once I had the raw data from each location from which it was collected, I created visuals to show trends, outliers, and similarities between locations. This second step of analysis was useful to me, but was more so meant for Brand X because it was too specific to draw any overall conclusions. The last and most important step was a second aggregation of information, so that I could see overall trends across the company from pre-implementation (2015) to post-implementation (2016). I brought all

locations together to generate statistics that would be helpful in drawing conclusions for my research. These graphs and conclusions will be detailed in the “Results and Conclusions” portion of the thesis.

The second step I took in my research was to combine with the Brand X HR department to create a series of health related questions. This step helped to give answers related to the third core topic in my research. I wanted to see if healthier individuals tended to be more successful than those that are not as healthy. In order to do this I compared the corporate facility questionnaire results to those of the manufacturing facility. The question we created provided an opportunity to receive information that was more intangible and qualitative. Because it was a mass questionnaire, it not only included health related questions, but general company questions as well. An example of the set of questions sent out and related responses can be seen on page 17 in Table 3. This survey was completely anonymous and did not ask questions about demographics other than gender and age. As stated, it focused on two different topics: company specific questions and general health. Even though some of the questions were unrelated to my desired research, the information I did receive was extremely helpful in generating my conclusions. Also, it is important to note that not all of the questionnaires were complete because any of the questions could’ve been left unfilled if the person didn’t want to answer it.

Example Survey Questions and Responses

		Total Respondents	1358
Order	CATEGORY/ ITEM	% Fav	
NUTRITION, HEALTH, & WELLNESS			
1	My company promotes a healthy work environment.	79%	
2	I feel energized to come into work every morning	68%	
3	I feel motivated to go beyond my formal job responsibilities.	81%	

Table 3

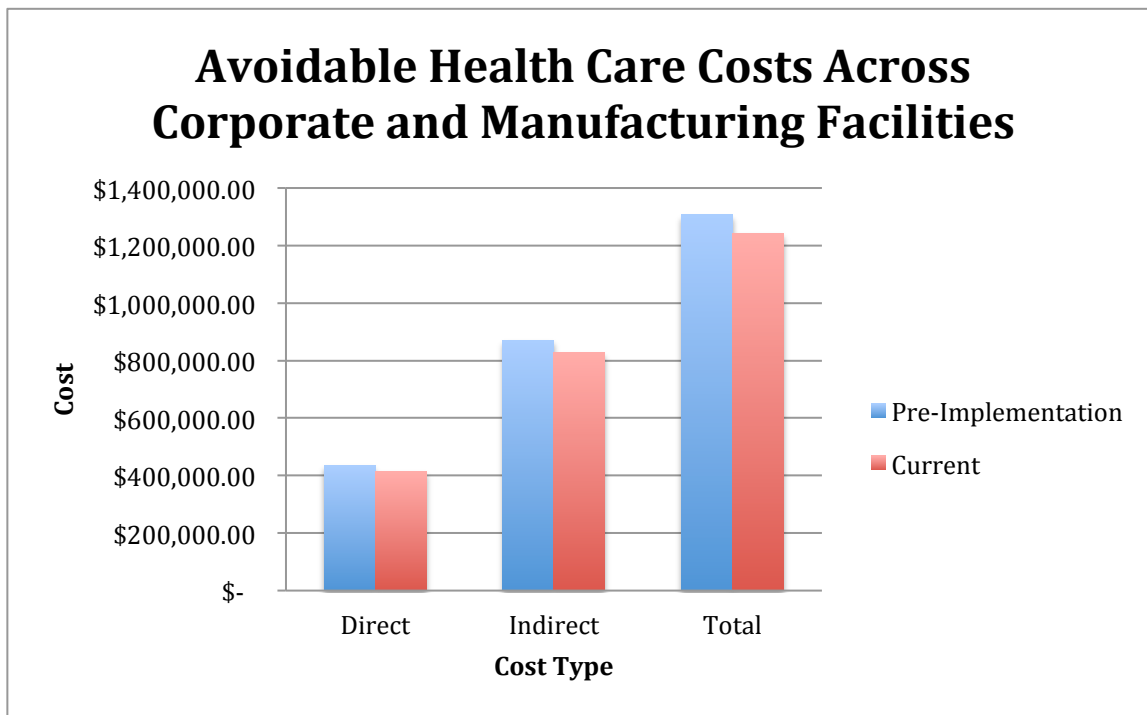
Because the data for the survey was already aggregated and in excel, it was much easier to analyze this data compared to the set of raw biometric information. Once receiving all of the survey results, I filtered out the questions that were unrelated to my project. I was now left with a single excel workbook from which to analyze and find trends. I created a set of visuals and graphs from the 2016 data, which will be fully described in the “Results and Conclusions” segment of the thesis.

As for the timeline for my research, I started the process of data collection in the middle of July 2016 and finished my analysis in February of 2017. The beginning of this process was focused around finding my data source for the research. This took me a few weeks and led into the analysis of the company’s accompanying data. Although there was a large amount of raw data, I was able to aggregate everything into a few excel files which made my analysis much easier. Once I finished the analysis in February, I began interpreting the results and drawing conclusions. This leads me to my final and most important topics of this thesis: “Results and Conclusions” and “Further Research.”

Results and Conclusions:

The first portion of my research was to determine if there was a significant financial impact on Brand X. I received health care cost summaries from 21 different locations that employed a total of 4,377 people. The full summary of the costs at each location can be found in Appendix 1. After averaging these numbers to get a more complete overall summation, it does seem that the wellness program did make an impact on location health care costs. Seventy-six percent of locations had a significant decrease in their avoidable direct health care costs. These costs include any payment made by the company for

employee health care. Each location decreased health care costs by an average of \$21,557. This equates to an annual savings of just under five percent, which is the national average for companies with wellness programs as calculated by the Harvard Business Review (Lebowitz, 2015). These payments don't include any costs made for family members on the health care plan of an employee. When all health care costs are included each location saves an average of \$64,962. This also turns out to be just under a five percent savings, coming in at 4.96%.



Direct: actual employee, Indirect: family members, Pre-Implementation: 2015, Current: 2016

Figure 1

My analysis helps to show that the implementation of a wellness program can have a significant positive financial impact on a business and that my first hull hypothesis (see pg. 14) can be rejected. This statement was statistically supported by a T-Test, from which the

output can be seen below in Figure 2. It shows that there has been a significant reduction in health care costs across the set of tested locations from 2015 to 2016. \$20,000 may not seem like a huge saving, but when you consider the number of locations many large companies have around the globe this number begins to add up. I suspect that this value wouldn't continue to decrease by as much over the next few years because the initial implementation would show the largest change. But, it is important to note that not every individual at the tested sites participated and that the 21 included sites are only a small sample size of the total locations from which Brand X operates. These findings are important data points to help support the claim made by the Harvard Business Review in 2015. Even though HBR completed a similar study in the past it is important to confirm precedent to help provide more evidence in support of the implementation of a wellness program. Overall, these savings are significant and support the effectiveness of health promotion programs.

Paired T-Test and CI: 2015 Costs, 2016 Costs

Paired T for 2015 Costs - 2016 Costs

	N	Mean	StDev	SE Mean
2015 Costs	21	1307229	626867	136794
2016 Costs	21	1242267	569469	124268
Difference	21	64962	84450	18429

95% lower bound for mean difference: 33178

T-Test of mean difference = 0 (vs > 0): T-Value = 3.53 P-Value = 0.001

Figure 2

The second portion of my research was to begin to understand what health issues individuals are affected by the most and how a wellness program could be adapted to relieve these problems. As with the biometric data, I received input from 21 different

locations employing a total of 4,377 individuals. The full summary of the biometric responses related to this topic can be found in Appendix 2. Looking through every location, it does seem that there are three overwhelming health problems that a majority of employees face. Because of these similarities my second null hypothesis (see pg. 14) can't be rejected. Weight, blood pressure, and stress were the three highest employee health risks at 77% of locations tested. It is also important to note that weight was the number one health risk at every single location. Because there were no prior data points to compare these numbers to there is no way to conclude how the promotion program has helped. But, it is important to know where the company should focus its efforts in the future. By knowing that these are the most common health issues, Brand X will be able to adapt their wellness program to help employees facing these health problems. This data could also be used by other companies looking for ideas on how to start up a wellness program.

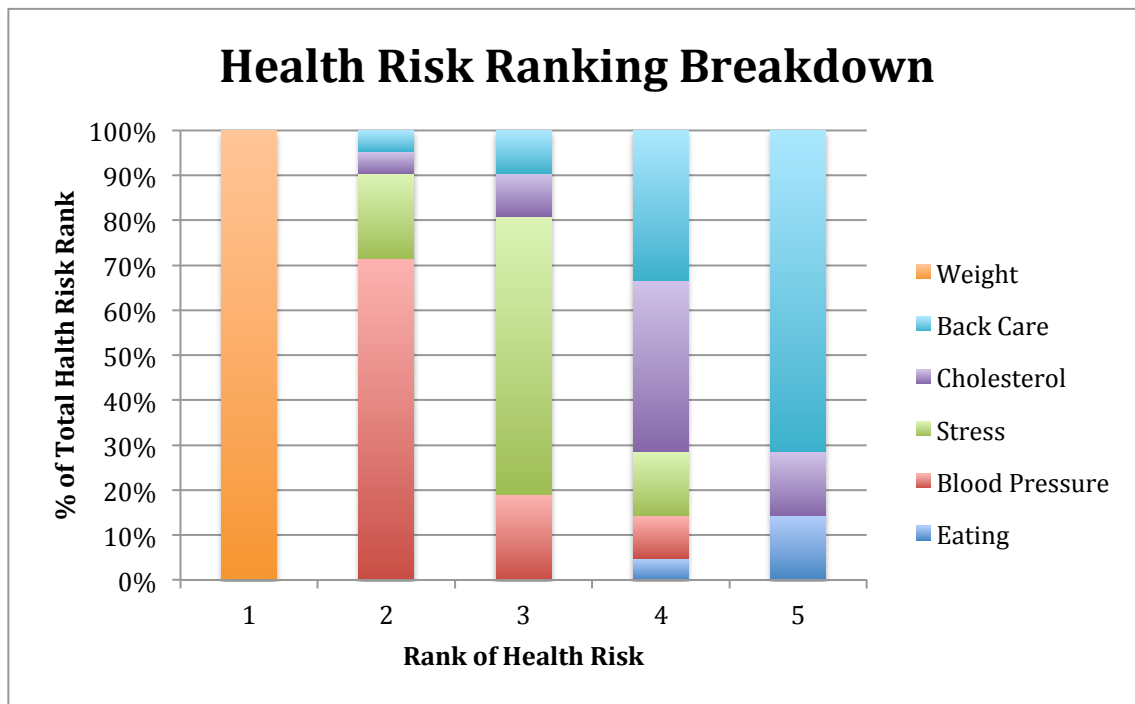


Figure 3

The last topic of interest in my analysis of health promotion programs is if healthier employees tend to be more successful in the workplace. Differing from the first two topics, I obtained my raw data for this topic from the survey that I created along with Brand X. To preface my results, it should be noted that my distinguishing success factor was if an employee worked in a corporate facility or at a manufacturing plant. I do not have specific salary numbers, but it can reasonably be assumed that the average employee salary at a corporate facility is much higher than that of a manufacturing worker. There were two main findings from the analysis of this data. The first related to the number of health risks an employee had. Health risks can be defined as any medical ailment that can be diagnosed by a doctor. A few examples of health risks are high blood pressure and obesity.

Health Status Indicators (Top- Manufacturing, Bottom- Corporate)

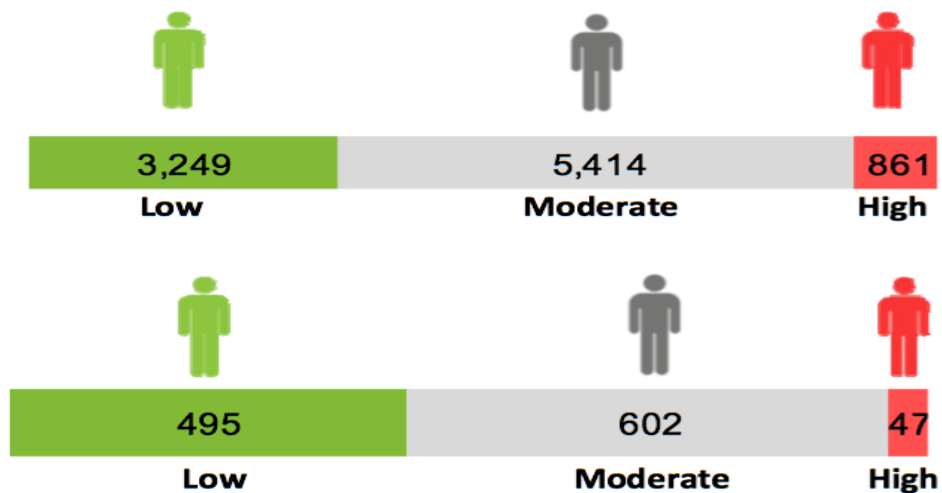


Figure 4

Health risks include any listed medical condition (i.e. high blood pressure). Low=0-2 health risks, Moderate=3-5 health risks, High=6+ health risks. # of corporate employees= 1,144. # of manufacturing employees= 9,524

Figure 4 shows that there are a higher percentage of healthy individuals at corporate locations than manufacturing plants. On average only 4% of employees at corporate

locations are high health risks (6+ diagnosable health issues). Manufacturing facilities employ a higher rate of these individuals, coming in at 9%. Even though the sample sizes are different for manufacturing employees and corporate employees, this data is still reflective of Brand X. The company has 5 times more workers in plants than corporate offices. This data on health risks supports my third null hypothesis (see pg. 14).

Another significant set of statistics received from the survey is the connection between absentee rates and health risk level. It is very important for employees to minimize the number of sick days they take to increase individual and company productivity. Figure 5 on the next page shows the differences in absentee rates between health risk levels. Employees with a high health risk level account for half of the sick days across the company. If you aren't at the office, then you can't be productive. This helps to further prove my null hypothesis that healthier employees are more successful in the workplace. Appendix 3 provides location specific data on absentee rates for each risk level.

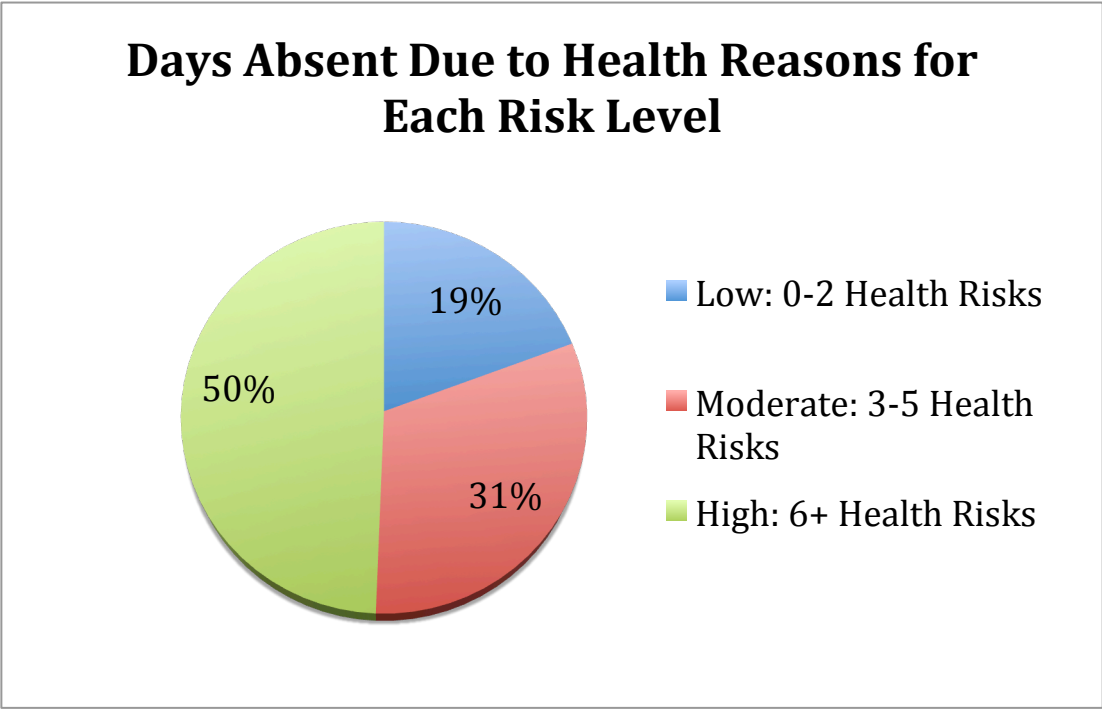


Figure 5

Overall, I can conclude that a health promotion program can be very effective if implemented correctly and employee health does have an impact on a company:

1. Wellness plans can decrease costs by 5% (hypothesis #1 supported)
2. Weight, Blood Pressure, and Stress were the three most common health risk factors at 77% of locations (hypothesis #2 supported)
3. Manufacturing plants have a higher rate of high health risk employees than corporate offices (hypothesis #3 supported)
4. High health risk employees account for half of the sick days at Brand X (hypothesis #3 supported)

Further Research:

There are many different avenues that could be taken to feed off of my initial research. First off, employees at the company from which I received my data will continue my research. Although I generated many impactful results, they will be much more authoritative if a larger sample size of data is analyzed over an extended period of time. I was only able to look at statistics from two years and across 20+ locations. If Brand X can find trends across their hundreds of locations over multiple years it will be an even more credible study. Along with this, if more companies begin to complete similar research, firms across the nation will be able to further confirm or deny my findings.

Another potential source of future research would be to look into how a health promotion plan specifically affects company profits. I was able to gain an understanding of the cost reductions associated with wellness programs, but not the overall impact on the bottom line. One way this could be done is to analyze the productivity gained from a sample program and put a value on this additional completed work. Along with this,

research should be completed looking at how specific health risks affect productivity. For example, how much efficiency is lost from increased stress levels on the job.

The final research extension that I would like to mention occurs more on the medical side of the spectrum. Medical research should be combined with this research to outline specific actions employees and companies can take to improve the core group of health issues impacting employees (weight, blood pressure, and stress). It is very useful for Brand X to know that weight, blood pressure, and stress have negative impacts on a majority of their employees, but there is no simple fix for these ailments. By looking at scientific research, companies would be able to make specific promotion programs for each employee to better their health. This improved health would hopefully have a positive impact on the business.

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Appendix 1: Health Care Costs Summary

	2015 Avoidable Costs by Location		
	Direct	Indirect	Total
Medford	\$574,200	\$1,148,400	\$1,722,600
Little Chute	\$791,200	\$1,575,100	\$2,366,300
Springville	\$791,100	\$1,582,100	\$2,373,200
Solon	\$345,800	\$691,700	\$1,037,500
Mt. Sterling	\$593,300	\$1,174,200	\$1,767,500
Jonesboro	\$524,500	\$1,048,900	\$1,573,400
Gaffney	\$583,100	\$1,166,200	\$1,749,300
Danville	\$381,700	\$763,500	\$1,145,200
Franklin Park	\$273,500	\$546,900	\$820,400
Burlington	\$383,400	\$765,500	\$1,148,900
Bloomington	\$320,700	\$641,400	\$962,100
Waverly	\$266,800	\$527,000	\$793,800
Jacksonville	\$225,100	\$450,200	\$675,300
Freehold	\$159,400	\$318,900	\$478,300
Anderson	\$895,300	\$1,786,100	\$2,681,400
Tulare	\$372,800	\$745,700	\$1,118,500
Laurel	\$370,600	\$741,100	\$1,111,700
Fort Wayne	\$460,400	\$920,800	\$1,381,200
Modesto	\$162,000	\$324,000	\$486,000
Bakersfield	\$477,400	\$954,800	\$1,432,200
Itasca	\$210,300	\$416,700	\$627,000

	2016 Avoidable Costs by Location		
	Direct	Indirect	Total
Medford	\$527,800	\$1,055,600	\$1,583,400
Little Chute	\$747,200	\$1,486,300	\$2,233,500
Springville	\$753,100	\$1,506,300	\$2,259,400
Solon	\$346,400	\$692,800	\$1,039,200
Mt. Sterling	\$568,600	\$1,124,100	\$1,692,700
Jonesboro	\$501,000	\$1,002,000	\$1,503,000
Gaffney	\$582,500	\$1,165,000	\$1,747,500
Danville	\$379,700	\$759,400	\$1,139,100
Franklin Park	\$277,900	\$555,900	\$833,800
Burlington	\$343,400	\$685,200	\$1,028,600
Bloomington	\$279,600	\$559,100	\$838,700
Waverly	\$229,900	\$456,900	\$686,800
Jacksonville	\$234,500	\$468,900	\$703,400
Freehold	\$170,100	\$340,100	\$510,200
Anderson	\$797,000	\$1,582,300	\$2,379,300
Tulare	\$355,000	\$710,000	\$1,065,000
Laurel	\$351,800	\$703,500	\$1,055,300
Fort Wayne	\$411,400	\$822,800	\$1,234,200
Modesto	\$157,000	\$314,000	\$471,000
Bakersfield	\$460,400	\$920,200	\$1,380,600
Itasca	\$235,600	\$467,300	\$702,900

Appendix 2: Health Risk Summary

	Health Risk Ranking by Location				
	1	2	3	4	5
Medford	Weight	Blood Pressure	Stress	Back Care	Cholesterol
Little Chute	Weight	Stress	Blood Pressure	Cholesterol	Back Care
Springville	Weight	Cholesterol	Stress	Blood Pressure	Back Care
Solon	Weight	Blood Pressure	Stress	Back Care	Back Care
Mt. Sterling	Weight	Blood Pressure	Stress	Back Care	Cholesterol
Jonesboro	Weight	Blood Pressure	Back Care	Eating	Back Care
Gaffney	Weight	Back Care	Stress	Blood Pressure	Eating
Danville	Weight	Blood Pressure	Back Care	Stress	Back Care
Franklin Park	Weight	Blood Pressure	Stress	Back Care	Back Care
Burlington	Weight	Blood Pressure	Stress	Back Care	Cholesterol
Bloomington	Weight	Stress	Blood Pressure	Cholesterol	Eating
Waverly	Weight	Stress	Blood Pressure	Back Care	Eating
Jacksonville	Weight	Blood Pressure	Cholesterol	Stress	Back Care
Freehold	Weight	Blood Pressure	Cholesterol	Stress	Back Care
Anderson	Weight	Blood Pressure	Stress	Cholesterol	Back Care
Tulare	Weight	Blood Pressure	Stress	Cholesterol	Back Care
Laurel	Weight	Blood Pressure	Stress	Back Care	Back Care
Fort Wayne	Weight	Blood Pressure	Stress	Cholesterol	Back Care
Modesto	Weight	Stress	Blood Pressure	Cholesterol	Back Care
Bakersfield	Weight	Blood Pressure	Stress	Cholesterol	Back Care
Itasca	Weight	Blood Pressure	Stress	Cholesterol	Back Care

Appendix 3: Location Absentee Rates Based on Health Risk Level

	Days Absent Due to Health		
	Low: 0-2	Moderate: 3-5	High: 6+
Medford	450	750	1100
Little Chute	554	969	1349
Springville	380	1055	1224
Solon	284	269	474
Mt. Sterling	308	504	1120
Jonesboro	568	542	774
Gaffney	718	807	2063
Danville	207	435	890
Franklin Park	110	314	345
Burlington	363	406	392
Bloomington	150	363	288
Waverly	67	230	557
Jacksonville	22	161	51
Freehold	98	320	25
Anderson	449	748	860
Tulare	450	242	934
Laurel	467	861	2189
Fort Wayne	494	475	608
Modesto	124	255	738
Bakersfield	355	858	858
Itasca	118	354	380