

BenefitsCanada

2017
**HEALTHY
OUTCOMES**
CONFERENCE

Taking action to achieve better health outcomes

At *Benefits Canada's* 2017 Healthy Outcomes conference in June, insurers, providers and plan sponsors discussed how to promote healthy behaviours and reduce chronic disease while also containing costs.

By Moira Potter

KEYNOTE PRESENTATION

Prediabetes among the biggest concerns for employee health

With four out of five Canadians having at least one modifiable risk for a chronic disease, organizations need to place the same importance and resources on improving employee health as they do on ensuring safety, a speaker told *Benefits Canada's* Healthy Outcomes conference.

“Over the past 100 years, vaccines, clean running water and antibiotics have increased our life expectancy by more than 30 years,” said Dr. Alain Sotto, an occupational medical consultant for the Toronto Transit Commission and director of year-round care at Medcan.

“We’re living and working longer, and that means more chronic disease.”

During his keynote address, Sotto said it’s the baby boomers who are seeing the highest rates of chronic disease and are therefore driving drug utilization costs upward.

“Chronic diseases are the leading cause of death worldwide,” he said. “But while rates of heart disease are dropping due to new medications, Type 2 diabetes continues to rise. And that’s a concern, especially because it’s a mostly preventable condition and even reversible.”

Currently, one in four Canadians has diabetes (90 per cent of them have Type 2 diabetes) and 20 more people are diagnosed every hour of every day. Of greatest concern, however, is prediabetes, said Sotto. Six million Canadians have prediabetes or metabolic syndrome and don’t even know it. One quarter of those with prediabetes will develop diabetes within

three to five years.

“Diabetes is not only having an enormous impact on drug plans right now; it will have an even greater impact in the future,” said Sotto.

“Diabetics are two to four times more likely to develop cardiovascular disease and strokes. And people with a chronic illness are much more likely to develop depression. As employers, we need to step it up in preventing disease.”

What exactly can employers do? Studies show it’s possible to reduce the risk for Type 2 diabetes by 58 per cent with two simple actions: 150 minutes of exercise a week and losing five to seven per cent of body weight. Sotto suggested organizations consider:

- Educational programs on chronic disease and modifiable risk factors such as smoking, alcohol, obesity, poor diet and inactivity;
- Access to exercise facilities or programs and nutritionists; and
- Health screenings. Sotto noted that when the TTC tested 1,000 employees, it found 20 per cent of them had prediabetes.

Employers need to make health as important as safety, he said.

“People can’t be safe at work if they’re not healthy. Spending money on health today will reduce costs tomorrow and foster happier, healthier, more engaged and productive employees. Can we change the course of people’s health? Absolutely.”



DR. ALAIN SOTTO



KEY ELEMENTS OF SUCCESSFUL WELLNESS PROGRAMS

- ▶ **Education** to create awareness and provide information and resources.
- ▶ **Engagement** so people can determine their risk factors, be ready to make changes and get early diagnosis and treatment.
- ▶ **Empowering** employees to take ownership of their own health.
- ▶ **Enabling** people to improve their health through lifestyle modifications via programs, health screenings and early intervention strategies, such as exercise options, weight-loss programs, dietary advice and health counselling.

CONFERENCE HIGHLIGHTS

Low-intensity cognitive behavioural therapy touted as an alternative to address depression

Should antidepressants be the first course of treatment for mild to moderate depression?

Not necessarily, said Peter Gove, innovation leader for health management at Green Shield Canada, during the 2017 Healthy Outcomes conference in June.

“Everyone experiences sadness from time to time. It’s normal,” he said.

“Sadness is often a temporary reaction to difficult life events. It’s not illness.”

Yet according to a 2014 editorial in the *BMJ*, the definition of what constitutes depression has widened so much in recent years that it captures just about everyone, he said. “As a result, we’re over-medicating people like crazy,” said Gove.

When Green Shield looked at its drug data, it found only 15 per cent of employees on antidepressants were receiving the correct treatment. The other 85 per cent either received too low a dosage or didn’t stay on the medication because of side-effects or other issues. “We concluded many people probably did not need, or want, medication,” said Gove.

Gove explained that while medication does help people with severe depression, they’re usually too unwell to work. In the workplace, it’s mild or moderate depression that’s having an enormous impact on productivity, drug plans and disability claims. But if most employees experiencing depressive symptoms are receiving unnecessary or ineffective medication, what’s the solution?

“We need to get them psychotherapy,” said Gove. “That’s challenging, because good, evidence-based



psychotherapy is not that available in our health-care system today. Yet psychotherapy results in better outcomes and prevents relapses.”

According to Gove, one of the most effective approaches for treating depression is cognitive behavioural therapy. It helps people understand their thought patterns and challenges them to change their behaviour. However, it can be costly. But there’s a new approach that’s both effective and more affordable: low-intensity cognitive behavioural therapy.

“This involves brief, very structured interventions delivered by paraprofessionals, rather than psychologists or social workers,” said Gove. “The employee then works with this coach over the phone using manuals. The outcomes are terrific, and it’s cost-effective.”

Gove presented some other ways organizations can support employees struggling with depression. They include:

- Regular check-ins between employees and their managers;
- More flexible work schedules;
- Support with workloads;
- Quiet places for timeouts;
- Reducing cognitive demands;
- Peer support programs; and
- Support through employee assistance programs.

“We need to realize that depression is a thought disorder. People are not thinking well,” said Gove.

“As a result, they often don’t recognize they have an illness and so don’t ask for help. But identifying people who may be at risk for, or experiencing, mild depression and getting them appropriate help not only helps keep them at work but can change the course of their illness.”



CONFERENCE HIGHLIGHTS

Setting the standard for mental health



JUDITH PLOTKIN

With mental-health issues reaching crisis levels in Canadian workplaces, employers have options to address the situation as a driver of claims and absences, participants at *Benefits Canada's* Healthy Outcomes conference heard.

“There is a mental-health crisis in our workplaces,” said Judith Plotkin, vice-president of growth and strategy at the ReedGroup. “This week alone, 500,000 Canadians are off work due to mental-health issues, and that translates into huge costs for organizations.”

The challenge for organizations, said Plotkin, is that people don't reach out for help in a timely way. Despite many public awareness campaigns, only 25 per cent of people are comfortable even talking about mental illness.

“One of the reasons people don't seek treatment is stigma. It still exists and it exists in spades,” said Plotkin. “And the most difficult barrier to overcome is how stigma results in self-blame — and that's quite prevalent.”

According to Plotkin, organizations need to view overall health and mental health through the same lens. “The workplace can impact the stigma surrounding mental illness,” she said. “It's not about what we do for them. It's recognizing that it's one in three of us. We've got to remove that us-and-them focus.”

Compounding the crisis is that, unlike other chronic conditions, mental illness affects every age group. It can start during someone's first job and continue throughout a person's career.

At the same time, Plotkin noted there's an increased legal duty for employers to maintain both a physically and a psychologically safe workplace.

“Workers compensation claims can now be based on mental distress or other psychological pains and that's increasing claims,” she said. “There are also increasing examples of liability against the employer for not maintaining a psychologically safe workplace. These can be in the form of civil actions or a human rights complaint in the form of discrimination.”

Plotkin suggested employers can focus on a number of areas, including:

- Transformational leadership;
- Manageable work schedules;
- Manageable workloads and pace;
- Role clarity;
- Autonomy;
- A just workplace;

- Reduced status distinctions; and
- Social environment.

“Too many organizations focus only on employee-level interventions and not on workplace practices and leadership,” she said. “Simply put, you change the culture, you change health outcomes.”

WORKSHOP DISCUSSIONS:

LINKING DRUG PLANS TO EMPLOYEE HEALTH

During the Healthy Outcomes conference, participants discussed ways to better understand the impact of drug plan offerings on employee health.

Four groups of conference participants — moderated by Joe Farago, executive director of health-care innovation at Innovative Medicines Canada; Kirsten Garces, senior manager for value and access at Amgen Canada Inc.; Carmen Hogan, vice-president of sales and service at Green Shield Canada; and Kathy Sotirakos, senior manager of market access private insurance at Amgen — responded to two questions:

1. Do you monitor your drug claims data?
2. Can you connect drug treatment with employee health?

Some of the key points raised by the groups included:

- ▶ Most plan sponsors receive drug utilization data annually or on renewal and use it to develop wellness programs and a wide range of activities. However, the data tends to be a dump of information. While external advisors or vendors help them understand the information, participants would prefer a dedicated person to analyze the data.
- ▶ The reasons for monitoring drug data include forecasting future benefits costs; comparing costs and health trends; deciding on the most meaningful health and wellness programs for employees; due diligence; education; and communication.
- ▶ While it's important to aggregate data for privacy reasons, it would be useful to have information split between employees and dependants when looking at disability rates and employee outcomes.
- ▶ Participants said it's hard to link short- and long-term disability claims to specific diseases and then judge the drug spend. Are there any tools carriers can develop to help with that?
- ▶ Other data, such as information on employees using multiple drugs and adherence statistics, would help create strategies to manage costs.



KIRSTEN GARCES



CARMEN HOGAN

CONFERENCE HIGHLIGHTS

Helping employers navigate the next deluge of rising drug costs

Amidst all of the innovation that's occurring in the drug industry, pharmacists have a role to play in helping employers navigate the changes, a speaker told participants at the Healthy Outcomes conference in June.

"We can expect new medications to come onto the market in the next few years," said Mark Rolnick, vice-president of payor partnerships and plan sponsor innovation at Shoppers Drug Mart.

"As a result, employers and insurers can expect to see drug costs rising again, especially for specialty drugs. In fact, specialty drug costs are expected to rise 600 per cent from 2010 to 2020."



But the cost of new and specialty drugs is just part of the picture, he added. What's also of concern are the rising rates of chronic disease and mental illness that are driving up drug utilization, absenteeism and short- and long-term disability claims.

Despite the various plan management options available to organizations and insurers, costs continue to climb. Rolnick, however, noted the expanding role of pharmacists is another way to help reduce costs.

"The care and case management patients receive in specialty networks, combined with pharmacy patient support programs, help ensure the best outcomes possible while maximizing drug cost dollars," he said.

Rolnick noted the scope of pharmacists is increasing across the country. Pharmacists now administer flu shots and shingles vaccinations, renew prescriptions and provide information. In Alberta they can perform point-of-care testing for possible strep throat. The Canadian Pharmacists Association suggests that, over a 30-year period, the expanded role will result in 130,000 fewer strokes; 260,000 fewer myocardial infarctions; 76,000 fewer cases of angina; and 70,000 fewer cases of heart failure.

"I believe there are many other ways for pharmacists to partner in health care," said Rolnick. "We need to find better ways to collaborate and invest in solutions." 

PLAN SPONSOR PANEL: PARTNERSHIPS KEY TO THE SMALL STEPS FOR ACHIEVING A HEALTHIER WORKFORCE

During the Healthy Outcomes conference, a panel of health and wellness leaders discussed some of the small steps their organizations are taking to achieve a healthier workforce.

Speaking on the panel, Lyne Moussa, manager of wellness, safety and disability at Coast Capital Savings Credit Union, emphasized that it's essential to align health and wellness strategies to corporate ones. "My company's purpose is to empower financial well-being, so I try to mould health and wellness language around that: the cost of poor health to people's families, on their mental health and to the organization," she said. "It's an easy comparison to make."

Moussa added that when creating health and wellness programs, it's also important to consider the ability to introduce them across the organization. "We have small branches across the country where our frontline people work," she said. "We can't disengage these employees by only having events and programs at head office."

Shana Kapustin, Canadian director of human resources and global talent acquisition at Synnex Corp., faces similar challenges.

"To provide programs for all our locations, we partner with local resources and offer bonuses to encourage employees to adopt healthier behaviours," she said.

Panel members agreed that partnerships are key when operating on a tight budget. Lisa Gilmour, manager of health, safety and wellness initiatives at Hamilton Health Sciences, said her organization is able to deliver a variety of health and wellness programs thanks to partnerships throughout the community.

"We look for opportunities to partner," she said. "We have health and fitness students from Mohawk College do health screenings for us – blood pressure, weight, waist circumference – as well as personal training," she said.

"In addition, we invite several massage schools to come and do free massage sessions for our employees."

Moussa noted her team also reaches out to the community. "We regularly invite pharmacists, naturopaths, chiropractors and other people to come in to talk," she said. "We have huge turnouts, and people feel they work for a company that cares about their well-being."

Partnerships are just one part of a successful wellness program for Heather Ricketts, Sleep Country Canada Inc.'s national director of human resources. Participation from senior managers is also critical.

"Our CEO is our mental-health champion," she said.

"Because of his reputation within the company for integrity, he has helped open up conversations. In fact, he receives very personal emails from employees expressing their gratitude for the role he plays. We've had a lot of success." 

FROM LEFT, LISA GILMOUR, SHANA KAPUSTIN, LYNE MOUSSA AND HEATHER RICKETTS



CONFERENCE HIGHLIGHTS

Chronic disease among younger Canadians: Aging population not the only concern

While Canada is facing the health implications of an aging population, younger people are a significant concern as well.

“For the first time, three out of five Canadians will have a chronic disease profile by age 20,” Eileen Dooley, chief executive officer of HealthPartners Canada, told participants at the Healthy Outcomes conference in June. “We need to help millennials develop behaviours that will improve their health and build their resilience to stress.”

Of course, chronic disease remains a significant concern across the generations. And with more than 7,000 new medications currently in development worldwide, the pressures on benefits plans will only intensify.

Speaking during a session with Dooley at the conference, Joe Farago, executive director of health-care innovation at Innovative Medicines Canada, suggested organizations can prepare for the pressures by better understanding their workforce. “Compare your growth and the growth of your carrier with the increase for private plan drug costs of 4.1 per cent seen in 2016. If your drug costs are higher, then ask why. What’s the difference in your population?”

One of the best way to manage future costs, said Farago, is for employers to find new ways to prevent chronic diseases. “That will reduce the need for some medications and create cap space for future innovation.”

Dooley, whose organization is a collaboration of 16 health charities, agreed.

“Nine out of 10 of us are likely to be affected by one or more chronic diseases over our lifetime,” she said. “While it is the individual who is responsible for his or her own health, employers have a responsibility to create conditions for success.”

The challenge for employers is not only reaching



JOE FARAGO

millennials but also the four other generations currently in the workforce. According to HealthPartners, there are several factors that make a difference when creating a multigenerational approach to workplace health. They include:

- 1. Leadership:** Employees must see buy-in from the top.
- 2. Recognizing those who try:** Identify the failures and not just the successes.
- 3. Workplace champions:** People who drive activity and rally support are critically important.
- 4. Thinking creatively:** A one-size-fits-all approach won't reach all employees.
- 5. Incentives.**

“We need to help those people who just don’t know where to start,” said Dooley.

“It’s really about the small steps we can take that can not only engage employees but ultimately help change their behaviour and lead to long-lasting change.”



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