Investing In America’s Health:
A STATE-BY-STATE LOOK AT PUBLIC HEALTH FUNDING AND KEY HEALTH FACTS
Cutting Health Care Costs Through Prevention: Manatee County, Florida

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Manatee County has 3,200 employees, or, as we think of it, 6,900 lives, including families.

In early 2000, our health care costs were skyrocketing, mostly due to chronic conditions. At the time, the county was covering the entire share of the employee premium, but this became untenable. We had a decision to make: how do we continue to fund the increase in health care and do we continue to absorb those costs ourselves or do we shift them to the employee through premium increases or require more employee out of pocket expenses through the benefit design?

We knew both choices had their minuses, so we did neither. Starting in 2006, we created the YourChoice Health plan, which ties preventive health care and evidenced-based practices with employee plan level eligibility. The plan is a traditional PPO, but within it, we have four levels. The highest level, or the Ultimate plan, requires only a copay for office visits and hospitalization is paid at 100 percent. Essentially the member pays only approximately six percent of a claim. However, we didn’t allow employees to simply get into the plan. To qualify, employees had to take a comprehensive lab draw, wellness exam, complete a health risk assessment (HRA) and be prescreened for diabetes, nicotine exposure and other health indicators.

If the employee had diabetes, to enter the plan, he/she had to follow the American Association of Diabetes recommendations for treating the condition. If the employee was a tobacco user, they had to complete a four course education program.

After implementing the plan, our former benefits manager was in the elevator. An employee got on the elevator with him and got tears in her eyes. The employee said, “I can’t thank you enough. By you forcing me to get my diabetes test, I now feel better than I have in 20 years. I am more productive and am better at work because, previously, my blood sugar was never under control.” She was ecstatic to be healthy and productive — so much so that she grabbed and hugged him.

The plan worked: 93 percent of our employees did everything asked of them, which is remarkable. Quite simply, it is unheard of for 93 percent of a population to undertake a health risk assessment. (The other seven percent were moved to the alternative higher cost option plan.)

“When my wife and I were first required to qualify for the Good, Better, Best medical insurance, I could not understand why we had to do the age based testing, but due to personal experiences, today I do and I am so GRATEFUL.

—Manatee Employee

That said, we knew we had to continue to provide employees with the resources to help them make the healthy choices. So, we focused on on-site integrated person-to-person coaching and creating access to wellness resources, such as access to fitness equipment. For instance, we use an addiction model to work with our employees who use tobacco. After implementing the plan, only 13 percent of our employees use tobacco — the average in Florida is 20 percent. We saw dramatic decreases in known tobacco users when we implemented the plan. Often, tobacco-users are looking for ways to quit and they credit the plan with giving them a reason. And we know they quit because it is verified by lab tests.

“I am currently taking the Pilates class on Tuesday evening and really enjoying it. I’m looking forward to continuing with something after this 12 week session.

I love the fitness center. Myself and my exercise buddy had been walking the parking garage (YUCK!!!) and had been going over to the old gym which sometimes had WAAAYYYYYY too much man stuff going on. Having the fitness center is a real blessing. I’m also so happy to finally be able to have classes downtown. I live out east and there was nothing for me out that way in the evening so being able to change here and just run downstairs is great.”

—Manatee Employee
**Defining Success**

While we know our methods are improving lives, it can be hard to quantify success, i.e., how do you measure a claim that never occurred. For our plan to be successful, our outcomes needed to show that our plan drives employees to healthier habits and preventive care. We needed to catch and possibly prevent chronic conditions from ever developing.

We can show success through several avenues. For one, we have seen an annual reduction in out of range blood lipids (cholesterol), which indicates we are catching things early and people are getting interventions when they need it. We have a diabetic educator on staff who also ensures that all members with diabetes obtain annual routine eye and foot exams along with regular HbA1C checks. Before we implemented this practice we had $500,000 in diabetes-related hospital fees. Since we created our plan, we spend $70,000 on diabetes-related hospital fees.

In addition, when comparing 2010 to 2011, we achieved a negative trend: we spent approximately 4 percent less (over $2 million) in 2011 than in 2010. We achieved these results by a 9.5 percent reduction in chronic care spending, a 22 percent reduction in inpatient hospitalization and an 11 percent reduction in emergency room costs. These outcomes clearly show that the efforts back in 2006 of directing employees to preventative care and creating our onsite integrated health management and wellness team that guides employees to better health is showing a significant return on investment.

Some people know what to do to get healthy and some people don’t. Our plan helps those who know how to get healthy and those that don’t — we see the plan as a nice blend of the carrot and the stick. We provide rewards but also requirements and it works.

To assist employees in improving their health, we have an on-site, integrated health management and wellness team that works together to deal with the whole person. On-site we have Registered Nurses, Behavioral Health Specialists, Registered Dieticians, Clinical Pharmacists and Exercise Physiologists. Before coming to Manatee, I was a therapist in the community. If I had someone who was depressed and had diabetes, I didn’t have a lot of options to get that person connected with resources to help with the diabetes. At Manatee, if we have a diabetic employee who is depressed, our dietician can connect him with the therapist who is on-site and part of the health management team — we can treat the physical and emotional needs at the same time and prevent further complications.

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“I wanted to comment on the Diabetic Program. My husband was recently diagnosed as diabetic. About two months ago we both met with our counselor and she set my husband up with a diet and exercise program and provided the meter to test his blood daily.

To date, my husband has lost 20 pounds that he needed to lose and has a goal to lose another 20. Additionally, when he went to see his counselor yesterday to download the information from his meter, his sugar had been within the normal range every day for the last 6 weeks. These fantastic results are based on the suggestions for exercise, diet and ‘carb counting’ that our counselor helped with.”

—Manatee Employee