

# How Is Well-being Defined??

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**PURPOSE:** Liking what you do each day and being motivated to achieve goals

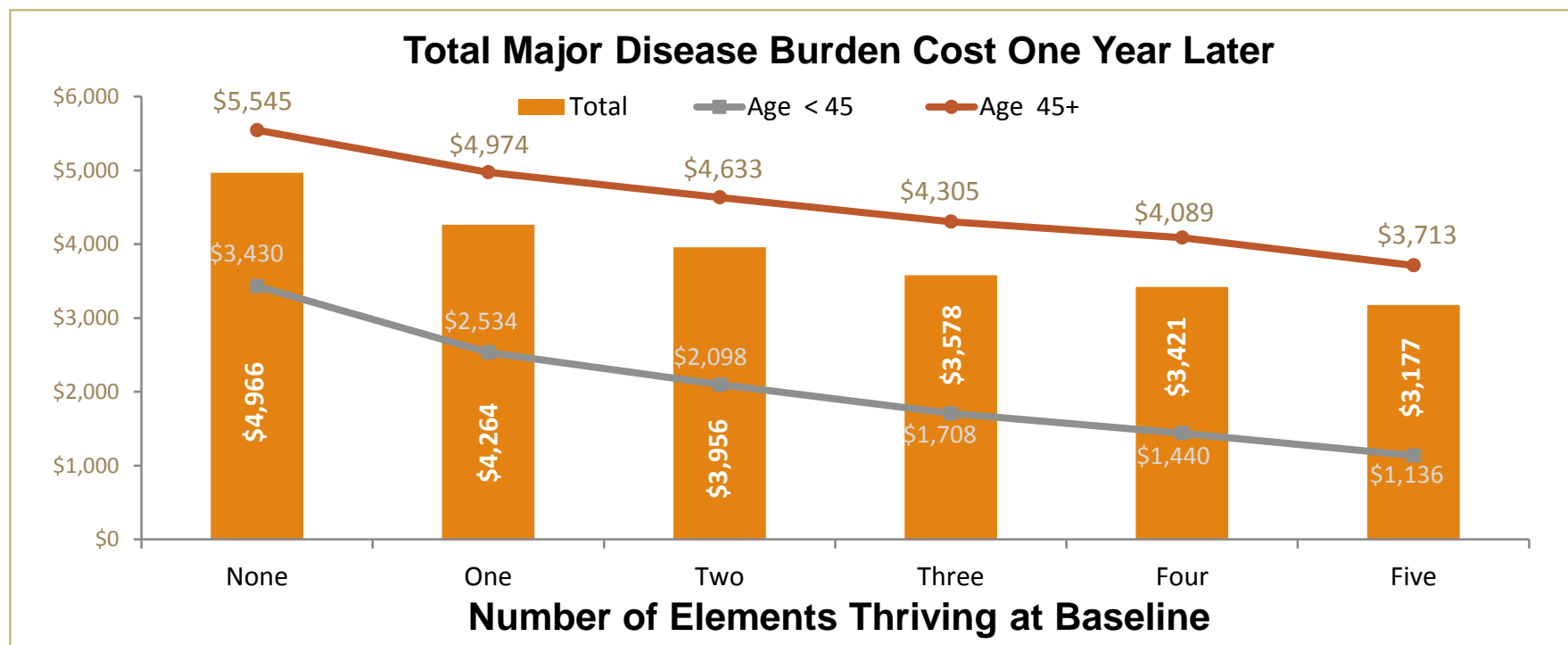
**SOCIAL:** Having supportive relationships and love in your life

**FINANCIAL:** Managing your economic life to reduce stress and increase security

**COMMUNITY:** Liking where you live, feeling safe, and having pride in your community

**PHYSICAL:** Having good health and enough energy to get things done daily

# Employees Thriving in Multiple Elements Have **Substantially Lower** Healthcare Costs One Year Later



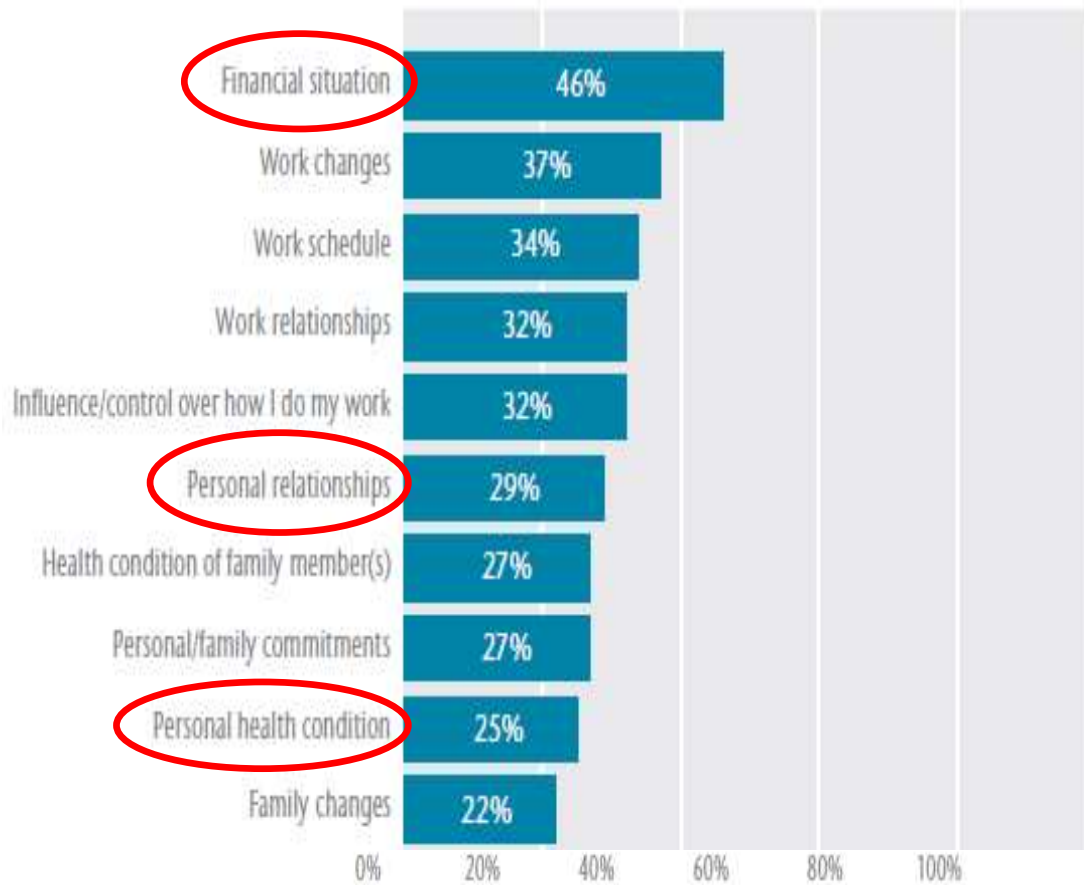
Longitudinal sample of approximately 11,500 Gallup U.S. Panel Members (5,500 employed)  
Controlling for Age, Gender, Income, Education, Region, and Marital Status

# An Opportunity Exists for Organizations To Actively Promote Well-being



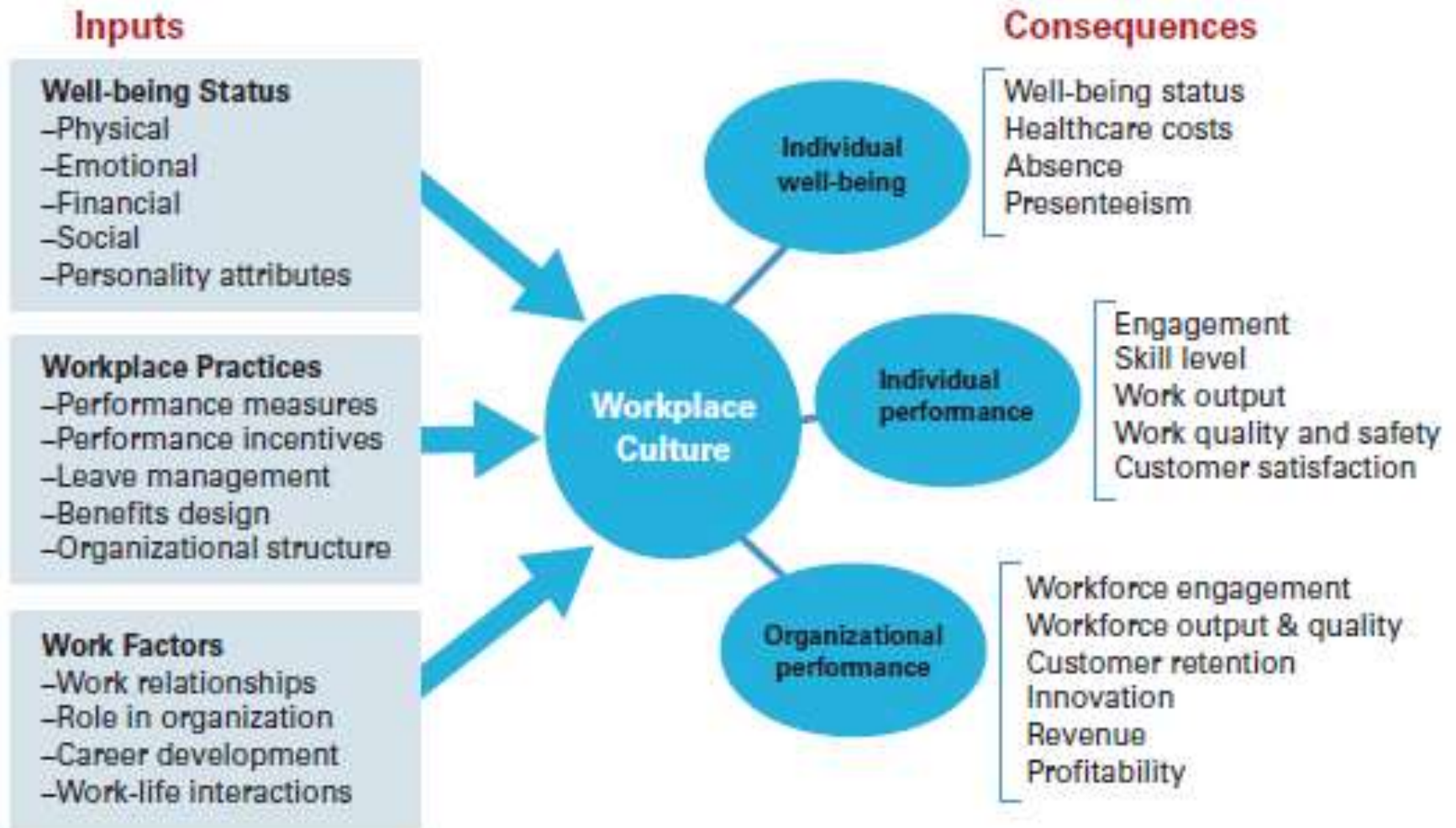
Organizational well-being lies in supporting your employees to do what is in their best interest.

# Addressing Foundational Concerns To Workforce Well-being



What does this mean for prioritization of physical health concerns?

# A Conceptual Framework for Workforce Health and Well-being



# Using Medical Evidence to Design Benefits Improving Care and Bending the Cost Curve

- **Cost growth remains the principle focus of health reform discussions among employers**
- **Despite unequivocal evidence of clinical benefit, Americans systematically underuse high-value services across the spectrum of medical care**
- **Non-medical benefits of a “culture of health” are poorly understood and hard to quantify**
- **Slowdown in healthcare costs may have negative health implications**
- **Attention should turn from *how much* to *how well* we spend our health care dollars**

# Motivation for “Clinically Nuanced” Payment and Benefit Design

- **Ideally provider payment and cost-sharing levels would be set to encourage the clinically appropriate use of health care services**
- **Fee for service payment and “one-size-fits-all” cost-sharing fails to acknowledge the differences in clinical value among medical interventions**
- **A growing body of evidence concludes that increases in consumer cost-sharing leads to a reduction in the use of essential care and in some cases leads to greater overall costs**
- **Effects worse in low-income individuals and beneficiaries with chronic illness**



# A New Approach: Clinical Nuance

1. Services differ in clinical benefit produced



2. Clinical benefits from a specific service depend on:

Who  
receives it



Who  
provides it



Where  
it's provided

