## There's good news for Wisconsin employers:

There's a healthcare service that ...

- Decreases total healthcare costs
- Increases workplace productivity
- Reduces workplace injuries
- · Is recommended by numerous national and Wisconsin healthcare and business authorities
- Is reimbursed by most health plans



**BSI** would save \$895 per employee - and that's just in the first year!

## It's called: BSI - Behavioral Screening and Intervention



- All patients complete a brief, annual lifestyle questionnaire on tobacco, alcohol, drugs, depression, diet, and exercise
- Those with positive screens meet with an on-site health educator who conducts additional assessment
- For most patients, the health educator delivers an on-site intervention and continues to support behavior change
- Some patients are referred for additional services

BSI improves employee health and benefits employers, because it ...

- Increases smoking quit rates from 3% to 28%
- Decreases ED visits by 20% and hospitalizations by 37% by reducing binge drinking
- Helps attain quicker and more complete resolution of depression and lower recurrence rates

## The bad news is that few healthcare settings systematically deliver BSI

Many conduct behavioral screening, but few deliver recommended interventions. Their physicians and nurses simply don't have time.

## Please help us change that, so you can reap the benefits of BSI

- · Ask your healthcare providers to hire health educators to deliver evidence-based, cost-saving BSI – as recommended by the CDC, the Joint Commission, the National Business Group on Health, NIH, the US Preventive Services Task Force, the Wisconsin Medical Society, and many other authorities
- Recommend that they contact WIPHL to learn how they can deliver BSI, improve health outcomes, meet quality measures, satisfy medical home criteria, and submit claims for BSI
- Ensure that your health plan reimburses for BSI when delivered by a health educator

Please visit us, learn more, and show your support at www.wiphl.org/employers





# Here's How BSI Would Bolster the Bottom Line for Wisconsin Employers

## Projected Year-One Savings For a Company with 100 Employees

	Alcohol	Depression	Tobacco
Per	Risky drinker	Depressed employee	Employee who quits smoking
Healthcare	\$523a	\$841 <sup>d</sup>	\$192 <sup>f</sup>
Productivity	\$1,200 <sup>b</sup>	\$991°	\$1,897 <sup>f</sup>
Absenteeism	?	\$310e	\$479 <sup>f</sup>
Injury	?	?	\$2,013 <sup>f</sup>
Savings per employee	\$1,723	\$2,142	\$4,581
Number of Employees	<b>30</b> <sup>c</sup>	<b>7</b> <sup>c</sup>	5g
Savings for 100 Empl.	\$51,690	\$14,994	\$22,905
Total Savings for 100 Employees			\$89,589
<b>Total Savings per Employee</b>			\$895

### Likely sources of additional savings:

- Reductions in alcohol use beyond Year I and associated changes in healthcare costs, productivity, absenteeism, injury, and turnoverh
- Continued improvements in depression, associated changes in healthcare costs (total decrease of \$2,522 in Years 2 to 4<sup>d</sup>), productivity, absenteeism and injury
- Reductions in tobacco use in Years 2 to 10 and escalating healthcare savings as risks increasingly decline for cardiovascular disease, lung disease, and cancer
- · Reductions in drug use in Year I and beyond, and associated changes in healthcare costs, productivity, absenteeism, injury, and turnover
- Changes in diet, exercise, and weight
- Changes in family members' stresses and illness eg, fewer respiratory illnesses from second-hand smoke, fewer stress-related illnesses in family members of individuals who decrease their drinking or drug use, fewer risky behaviors in teens and young adults whose parents model low-risk behaviors

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#### **Data Sources and Notes**

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   b. Osilla KC, dela Cruz E, Miles JNV, et al. Exploring productivity outcomes from a brief intervention for at-risk drinking in an employee assistance program. Addictive Behaviors 2010; 35:194-200.
   c. SAMHSA. National Survey on Drug Use and Health, 2008.
   d. Unutzer J, Schoenbaum M, Harbin H. Collaborative care for primary/co-morbid mental disorders; brief for CMS meeting (updated August 4, 2011). Llopublished manuscript.

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- 2012. According to the CDC's 2010 Behavioral Risk Factor Surveillance System, 19.1% of Wisconsin adults use tobacco. According to the US Agency for Healthcare Research and Quality's 2008 update of Treating Tobacco Use and Dependence, optimal screening and intervention would increase one-year quit rates from 3% to 28%. Thus, of 100 employees, 19 would smoke, and 5 would quit with
- optimal intervention.
  Fleming MF, Mundt MP, French MT, Manwell LB, Stauffacher EA, Barry KL. Brief physician advice for problem drinkers: long-term efficacy and benefit-cost analysis. Alcoholism: Clinical and Experimental Research 2002;26:36-43.