The Consumer Health Mindset

Turn Good Intentions into Great Outcomes
Turn Good Intentions into Great Outcomes

Looking for ways to get the people in your organization healthier? If so, you are not alone. Business and HR leaders across the country are looking for ways to motivate their “consumers”—employees as well as family members in their health plans—to engage in healthier actions. Why?

First, there are costs. Health care insurance and claims costs continue to rise at unaffordable rates. Meanwhile, organizations have exhausted most, if not all, of the foundational strategies that can minimize cost increases—such as redesigning their plan offerings, negotiating rate reductions with providers, and increasing employees’ cost share—while staying competitive in the marketplace for talent.

Then, there is performance. The real price employers pay for health goes well beyond direct health care costs. A workforce in better health performs at higher levels because employees are gone fewer days from work, are more productive when they are there, and enjoy stronger levels of engagement.

So what is left? It is behaviors. Research shows there are eight risks and behaviors, all of which can be modified, that lead to 15 chronic conditions that account for 80% of total costs for all chronic illnesses worldwide.1 Bottom line: Better behaviors. Better health. Better outcomes.

Now, if only success were as easy as setting up a program and simply having everyone follow it. After all, everyone wants to be healthier and happier. The main problem is the people in your health plans, as with all of us, have a lot of good intentions when it comes to changing their health behaviors. But these intentions are sidetracked with real-life obstacles—like lack of time and money, and the stress that goes with it—along the way.

So how can you succeed? Keep reading. This report captures the hearts, minds and voices of health care consumers across the U.S. Our learnings will help you better understand their unique health attitudes, motivators and daily barriers to the most common and emerging employer health and wellness strategies. We bring it all together into practical actions you can take to harness the consumer health mindset, benefiting both you and your people by turning their Good Intentions into Great Outcomes.

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1 2010 World Economic Forum.
The Consumer Health Mindset

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LIVING Well is a trademark of The Futures Company.
The Consumer Health Mindset Summary

Aon Hewitt has partnered with the National Business Group on Health (The Business Group) and The Futures Company to conduct The Consumer Health Mindset study. This study explores perspectives, attitudes and behaviors that employees and dependents hold toward health and health care as they interact with their employer-sponsored health plans and wellness programs. Throughout this report, we refer to all survey respondents as “consumers” and distinguish between employees and dependents where appropriate. The numbers on all the charts in this report may not add up to 100% because of rounding or multiple responses selected.
Survey Findings Snapshot

What do consumers have to say about how employers can positively influence change in the four areas most critical to executing a successful health program: improving health and workforce performance, engaging participants, designing with intent and reducing unnecessary expense?

Employers Want to…

 Consumers Say…

Improve Health and Workforce Performance

Equip Me
Consumers say they know what they need to do to be healthy. However, more often than not, life gets in the way of actually doing it or sustaining it. Consumers continue to report they experience a fair amount of stress, especially from finances and work, and often deal with it in sedentary ways. As they deal with stress, they believe they are on their own since they do not believe they receive much support from their employers.

Engage Participants

Guide Me
Consumers say they are not getting the guidance they need to make the best health-related decisions. As for the communication channel they prefer, they say email is the best medium to efficiently guide them to important information. Many consumers also report that a health risk questionnaire (HRQ) led them to make a change that improved their health.

Design with Intent

Enlighten Me
Consumers often do not have a clear picture of how much their health care costs—particularly the employers’ share—regardless of which type of plan they choose. For those who have chosen a CDHP, they are slightly less likely to be satisfied with their plan than last year and say it can be confusing. But they are willing to stick with it and even say it often impacts their health behaviors in positive ways.

Reduce Unnecessary Expense

Reward Me
Consumers say it does not take much to get them into wellness programs. However, they believe their employers should reward good health outcomes (instead of penalize bad health outcomes). As far as incentives, cash works best.

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Action Highlights for Employers: How to Turn Good Intentions into Great Outcomes

**Focus**

**Find Your Highest-Return Health Areas**
Concentrate your efforts on the few areas that will align with your overall health strategy, reinforce your culture and give you the best return.

**Open Communication Channels with Your Employees’ Families**
Reach dependents as directly as possible by tailoring communication to them and sending it to their homes.

**Curate a Healthy Environment**
Remove the obstacles to a healthy working environment, replace them with healthy alternatives and find creative ways to help employees better manage stress in their work environment and beyond.

**Use the Few Minutes Consumers Give You**
Make the most of the brief time your people are willing to give you to help them make the best decisions.

**Send Your People a Clear Signal**
Get to know as much about your employees and their family members as possible so you can send a clear signal to them that your organization is serious about health and they should be, too.

Want more specifics on these ideas? Turn to the end of this report.
What’s on Consumers’ Minds

The report takes you on a journey through the mindset of today’s health care consumer. You will find the most notable findings of our survey in each of the following areas as well as recommended actions that can drive great outcomes.
Equip Me

Employers Want to...
Improve Health and Workforce Performance

Consumers Say...
Equip Me

When it comes to the employer strategy to improve *health and workforce performance*, consumers say they know what they need to do to be healthy. However, more often than not, life gets in the way of actually doing it or sustaining it. Consumers continue to report they experience a fair amount of stress, especially from finances and work, and often deal with it in sedentary ways. As they deal with stress, they believe they are on their own since they do not believe they receive much support from their employers.
Most consumers (83%) intellectually know what they need to do to be healthy—eat right, exercise and not smoke—and believe good health comes from making these decisions daily. More than half (58%) also believe getting regular preventive care is important, but this figure is down significantly from last year (68%). Also down from last year is the importance of having good doctors. Together these declines may indicate a trend away from depending on health professionals as an avenue to good health and more toward self-accountability.

As further evidence of this potential trend, we see an increase in the value of wellness-oriented characteristics such as positive thinking (43%, up from 23%) and continued importance of living and/or working in a healthy environment (consistent at 40%).

**Actions That Lead to Good Health**

<table>
<thead>
<tr>
<th>Action</th>
<th>2011</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Having enough money to pay for all the care I need to stay healthy</td>
<td>22%</td>
<td>21%</td>
</tr>
<tr>
<td>Having good doctors</td>
<td>27%</td>
<td>18%</td>
</tr>
<tr>
<td>Having good genes</td>
<td>34%</td>
<td>38%</td>
</tr>
<tr>
<td>Living and/or working in a healthy environment</td>
<td>40%</td>
<td>40%</td>
</tr>
<tr>
<td>Getting regular preventive care (e.g., regular checkups and tests)</td>
<td>68%</td>
<td>58%</td>
</tr>
<tr>
<td>Having a positive attitude</td>
<td>23%</td>
<td>43%</td>
</tr>
<tr>
<td>Making smart health choices in my daily life (e.g., eating right, exercising, not smoking)</td>
<td>85%</td>
<td>83%</td>
</tr>
</tbody>
</table>
A Perception Gap

However, the results show that consumers’ perceptions of their own health may not fully match reality. Consumers are confident in their health status, with nine out of ten (87%) saying their health is at least good. Just under one-quarter (23%) say they are overweight or obese. However, nearly three times as many (66%) report height and weight that would categorize them in the body mass index (BMI) overweight and obese categories. In fact, more than half (53%) of those who report being in good health are actually overweight or obese. This result supports the behavioral economics impact of overconfidence in driving health behaviors.

Unique Health Views of Younger Consumers

Younger consumers (ages 25 to 39) are more likely to seek greater control over their health choices and view their work and home environments as important factors in their ability to gain more control. Younger consumers also believe a healthy environment has about the same influence on their health as getting preventive care. By contrast, older consumers are much more likely to cite doctors as influential health and wellness sources, while younger consumers are more likely to cite friends and family as important.

3 Centers for Disease Control and Prevention. BMI is a number calculated from a person’s weight and height. BMI provides a reliable indicator of body fatness for most people and is used to screen for weight categories that may lead to health problems.

Because most consumers have an overly rosy perception of their health, at least from a BMI standpoint, they may not believe they need to improve their health. So, what else gets in the way? Consumers admit they face obstacles when it comes to getting healthy. In particular, they say they do not have enough time to eat right, exercise or go to the doctor (49%), lack time to focus on health (39%) and are unwilling to make personal sacrifices (38%). For many consumers, health is not a top priority. The behavioral drivers of inertia, preferring present versus future rewards, and following social norms are also likely contributing to the prevalence of “sacrifice avoidance.”

**Obstacles That Keep Me from Getting Healthy**

( Ranked 1, 2 or 3)

<table>
<thead>
<tr>
<th>Obstacle</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lack of time to eat right, exercise, go to the doctor, etc.</td>
<td>49%</td>
</tr>
<tr>
<td>Lack of time to focus on health</td>
<td>39%</td>
</tr>
<tr>
<td>Unwilling to sacrifice</td>
<td>38%</td>
</tr>
<tr>
<td>Affordability</td>
<td>36%</td>
</tr>
<tr>
<td>Work environment</td>
<td>30%</td>
</tr>
<tr>
<td>Confusing coverage</td>
<td>19%</td>
</tr>
<tr>
<td>Lack of cost information</td>
<td>18%</td>
</tr>
<tr>
<td>Too much health information</td>
<td>17%</td>
</tr>
<tr>
<td>Do not know enough</td>
<td>15%</td>
</tr>
<tr>
<td>Do not know right type of preventive care</td>
<td>14%</td>
</tr>
<tr>
<td>Access to doctor</td>
<td>12%</td>
</tr>
<tr>
<td>Do not know right type of providers</td>
<td>10%</td>
</tr>
</tbody>
</table>

* Among consumers who report they have obstacles
Nearly 50% of consumers feel their stress level is at least moderately high. Somewhat encouraging is that only one-third of consumers report their stress level has gone up in the past year. This percentage is down from the 47% who reported increased stress from 2010 to 2011.

The main culprits of consumers’ stress are finances (46%) and work—specifically work changes (37%), work schedule (34%), work relationships (32%) and influence or control over how they do their work (32%).

“I’m stressed—particularly with money and work concerns—and most often deal with it in sedentary ways.”
Although one-quarter report they exercise more, five of the top six ways consumers cope with stress are sedentary: watching TV, listening to music, talking to someone, reading and getting more sleep. About one-quarter cite more concerning ways such as withdrawing from others and indulging in their favorite foods. Consumers may more often feel the need to offset stress caused by continued economic uncertainty and tension with unhealthy indulgences—like choosing a treat over healthy food, or relaxing on the couch instead of exercising.
The business impact of high stress levels is well documented. In particular:

- The American Institute of Stress reported that stress is a major factor in up to 80% of all work-related injuries and 40% of workplace turnover.\(^5\)

- Fifty-one percent of employees said they were less productive at work as a result of stress.\(^6\)

- Health care expenses were nearly 50% higher for workers who reported high levels of stress.\(^7\)

- In the United States, more than half of the 550 million working days lost each year because of absenteeism were stress-related.\(^8\)

**The Added Stress of Management**

Workers in management positions are 20% more likely to report high stress than workers who do not have direct reports. However, compared with front-line workers, many more of these managers are blind to the impact this elevated stress has on their own job performance, which makes change more difficult for this group. On the other hand, employees with lower stress levels place a higher value on leaving work problems at work. They exercise several times a week, feel more in control of their health and try to keep a positive attitude.

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**Fun...What Is That?**

Why I’m not having more fun in life these days:

- I’m too busy!
- I’m too tired and don’t have enough energy!

<table>
<thead>
<tr>
<th>Why I’m not having more fun in life these days:</th>
<th>I’m too busy!</th>
<th>I’m too tired and don’t have enough energy!</th>
</tr>
</thead>
<tbody>
<tr>
<td>53%</td>
<td>41%</td>
<td></td>
</tr>
<tr>
<td>55%</td>
<td>29%</td>
<td></td>
</tr>
</tbody>
</table>


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“I’m on my own when it comes to managing my stress since I don’t get much support from my employer.”

About three out of five consumers (64%) say stress creates a significant negative impact on at least one of six areas of their lives—starting with physical health (42%) and then personal relationships, personal activities and overall outlook on life (each 40%).

However, nearly one-fourth (23%) do not believe their employer offers any programs or services to deal with stress, and another 17% do not know. An employee assistance program (EAP) is most often cited (45%) as being offered. Only 35% report that their employer encourages them to take their vacation time, and only one-fourth say their employer encourages flexible work arrangements. Consumers receiving coverage from large employers (those with 10,000 or more employees) report they have access to more stress-related programs, on average, than those covered by smaller employers (those with 1,000 to 2,999 employees).

Areas of Life Impacted by My Stress
(Ranked 1, 2 or 3)

<table>
<thead>
<tr>
<th>Area</th>
<th>Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical health</td>
<td>42%</td>
</tr>
<tr>
<td>Personal relationships</td>
<td>40%</td>
</tr>
<tr>
<td>Personal activities</td>
<td>40%</td>
</tr>
<tr>
<td>Overall outlook on life</td>
<td>40%</td>
</tr>
<tr>
<td>Work performance or requirements</td>
<td>37%</td>
</tr>
<tr>
<td>Work relationships</td>
<td>37%</td>
</tr>
</tbody>
</table>

Women More Stressed

More women than men tell us they suffer from high stress, and women are 23% more likely to feel more stressed this year than last. Compared to men, women worry more about money and personal health, and this worry negatively affects their outlook on life.

Truth

It is true that stress is prevalent, cannot be completely eliminated, and is often destructive to health, productivity and performance when it is too high. There are healthy ways to deal with stress. Teach employees to recognize stress, reframe it in more positive ways and focus on what they can control. And, positioning your health initiatives—such as exercise and social connection—in the context of stress relief may help achieve these two goals simultaneously.
How Employees Are Reducing Stress

Despite their perceived lack of encouragement from their employers, 66% of consumers say they are taking advantage of vacation time to help them reach a healthier work-life balance and reduce their stress. In addition, 52% who have flexible work arrangements available participate in them for the same reason. Group activities with coworkers are also popular, though less prevalent.

Stress-Relief Programs and Benefits: Availability Versus Participation

<table>
<thead>
<tr>
<th>Program</th>
<th>Offered (employee-reported)</th>
<th>Participated (among those to whom offered)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vacation time or paid time off to achieve healthy work-life balance</td>
<td>35%</td>
<td>66%</td>
</tr>
<tr>
<td>Flexible work arrangements (where reasonable)</td>
<td>24%</td>
<td>52%</td>
</tr>
<tr>
<td>Group activities with coworkers</td>
<td>15%</td>
<td>42%</td>
</tr>
<tr>
<td>Volunteer activities</td>
<td>21%</td>
<td>34%</td>
</tr>
<tr>
<td>Reading material on stress and related management</td>
<td>25%</td>
<td>33%</td>
</tr>
<tr>
<td>Yoga, meditation, massage or relaxation sessions</td>
<td>11%</td>
<td>28%</td>
</tr>
<tr>
<td>Stress management challenges</td>
<td>9%</td>
<td>28%</td>
</tr>
<tr>
<td>Online stress management education/classes</td>
<td>13%</td>
<td>26%</td>
</tr>
<tr>
<td>Back up/Emergency child and/or elder care</td>
<td>8%</td>
<td>24%</td>
</tr>
<tr>
<td>In-person stress management education/classes</td>
<td>11%</td>
<td>21%</td>
</tr>
<tr>
<td>Resources to help with daily commitments</td>
<td>13%</td>
<td>18%</td>
</tr>
<tr>
<td>Stress management counseling (one-on-one)</td>
<td>18%</td>
<td>17%</td>
</tr>
<tr>
<td>Employee assistance program (EAP)</td>
<td>12%</td>
<td>45%</td>
</tr>
<tr>
<td>No programs offered</td>
<td>23%</td>
<td>17%</td>
</tr>
<tr>
<td>Don’t know if programs offered</td>
<td>17%</td>
<td></td>
</tr>
</tbody>
</table>
Guiding Consumers towards better health decisions.

**Employers Want to...**

Engage Participants

**Consumers Say...**

Guide Me

When it comes to the employer strategy to engage participants, consumers say they are not getting the guidance they need to make the best health-related decisions. As for the communication channel they prefer, they say email is the best medium to efficiently guide them to important information. Many consumers also report that a health risk questionnaire (HRQ) led them to make a change that improved their health.
When it comes to helping employees and dependents understand their health coverage and healthy actions, virtually all U.S. employers who offer health care coverage must provide some level of health communications. However, more than one-third of consumers believe they are not getting any general wellness and health benefit information. And, even fewer believe they are getting help in choosing a health plan (33%) or a personalized wellness plan (23%). The silver lining is that a significant portion wants more general (43%) and personalized (41%) wellness and health benefit information, as well as more guidance in choosing a plan (39%). All in all, consumers want more guidance that is relevant to their lives, and the biggest gap they identify is personalized information.

“"I’m not getting the guidance I want to make the best health-related decisions for me and my family.”"
When it comes to whom they want to inform or guide them, consumers believe they are just as capable of monitoring their own health as their health care providers are, both when assessing how they feel and when they have a health decline. Their own view of their health and advice from doctors are their top preferred sources (both 65%). They also are prompted to gather information and guidance when they have a decline in their health (49%), and look to friends and family for advice (26%) as well as to general health websites (20%). However, they are much less likely to prefer that the information comes from their health insurers, who rank seventh (12%), or their employers, who rank ninth (8%).

“Keep me informed in a variety of ways, but email works best for now.”

Email is by far the preferred communication channel (50%) for receiving general health benefit and wellness information, because it is a channel that “pushes” information to consumers and often efficiently guides them to the most important details and actions. To a much lesser degree, they also like another “push” communication, receiving mailings at home (16%), and they cited being able to “pull” information from a website (11%) at their convenience. These communication channels—plus in-person meetings or health fairs (6%) and mail they receive at work (3%)—are the ways that consumers would most like to get access to information.
Surprisingly, at this point consumers do not prefer some of the emerging communication channels relative to their top preferences. Only 1% of consumers preferred each of these channels: text message, webinar, mobile phone application, voice mail, short video, becoming a fan of a specific Facebook page and subscription to a specific blog. Their preference for these channels could increase once employers start using them more often.

The reason, however, is not that consumers avoid these channels. On the contrary, most consumers (71%) report using social media platforms like Facebook, Twitter and blogs. In addition, mobile device applications (apps) are gaining popularity as tools consumers would use for health and wellness activities. Thirty-six percent of app users would use apps for health and wellness activities. And, for app users in management positions, this percentage is even higher (47%).

The deciding factor here seems to be consumers do not necessarily want to receive health information from their employers through external social media and mobile device channels. Most consumers report they do not want to interact with brands (which may include employers) through external social media. Fifty-seven percent are greatly annoyed with the amount of advertising and branded pages already on social networking sites. In addition, only 13% of consumers say employers should use social media to reinforce good health behaviors and actions with participants. Social media platforms can, however, be effective avenues for dialoguing with consumers about community-related health activities.

Though social media may not be highly preferred yet, consumers desire personalized information. Nearly one-half say employers should offer free tools to raise awareness of their personal health status and risks (48%). They also think employers should provide a personalized, on-line summary of health information and the health care they use (33%). Among consumer-driven health plan (CDHP) consumers, 43% want this personalized summary.

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I Think Employers Should...*  
(%, Strongly agree or agree)

- Reward participants for achieving specific, controllable outcomes (e.g., improved BMI): 50%
- Offer free tools to participants to raise awareness of personal health status and risks: 48%
- Provide programs to participants to help achieve/maintain a healthy lifestyle: 47%
- Provide participants with a personalized, aggregated on-line view of health care usage and health information: 33%
- Direct participants to certain hospitals or physicians for specific procedures or conditions for best care at most appropriate cost: 27%
- Target certain communications based on a participant’s individual health condition: 24%
- Target certain communications based on demographic information about participants: 18%
- Impose consequences on participants for less-than-healthy conditions: 15%
- Impose consequences on participants if participants do not use health awareness tools: 14%
- Use social media to reinforce good health behaviors and actions with participants: 13%

*Without compromising privacy
Dependents differ in several areas when it comes to communication preferences and what channels are most influential. Compared to employees, dependents are more likely to believe health-related media programming (e.g., television and video) influences their health actions. In addition, they are less likely to view information from the employer providing their health coverage as influencing their health choices.

Dependents are also less likely to feel they know how much their family spends on medical care and how much the employer pays. When it comes to health-related information from the employer plan sponsor, 41% of dependents say they get no information at all, compared to 30% of employees. More specifically, dependents are significantly less likely than employees to receive general wellness and health benefit information, guidance on how to choose a health plan, health tips or reminders, or personal wellness information and plans from employers.

When it comes to information about choosing a health plan or a provider, dependents cite U.S. postal mail as often as email as their preference (compared to employees who much prefer email over postal mail). And, not surprisingly, because of the access issues they are less likely than employees to prefer employer intranet sites as an information source. Though not necessarily for health-related information, dependents are much more likely than employees to be regular users of social networks like Facebook (64% versus 56%) and media-sharing networks like Pinterest (13% versus 8%).

Sixty-six percent of employers are currently offering targeted communications based on an individual’s specific health conditions, and an additional 27% plan to offer this type of communication in the near future.

However, according to this study, only one-quarter (24%) of consumers agree or strongly agree that employers should target certain communications based on a participant’s individual health condition. Even fewer agree or strongly agree (18%) that employers should target certain communications based on demographic information about participants.

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Sixty-eight percent of employers offer HRQs to their employees. The goal of HRQs is to give consumers information about their health risk factors as well as specific guidance about actions they can take to improve their health. Of the consumers who took an HRQ (50% of those who said it was available), one-third reported the assessment recommended no follow-up action. Of those who received suggested action steps based on their results, four out of five (86%) consumers took some action. Two-thirds (65%) of those who received suggested actions report they made at least one lifestyle improvement as a result. Another 21% enrolled in a condition management program or began a treatment plan.

One could argue that consumers taking an HRQ should share the results with a health care practitioner. However, only one-quarter (27%) of those who received a suggested action from an HRQ report sharing the results with a health care practitioner. Perhaps consumers perceive this as an inconvenience, or may not have a primary provider.

**Actions I Took After Completing an HRQ**
(Among those taking HRQ and getting a suggested improvement action)

- Made at least one lifestyle improvement (more exercise, better diet) 65%
- Shared results with a health care practitioner 27%
- Enrolled in a condition-management program 10%
- Began drug/pharmaceutical treatment 7%
- Began non-drug treatment 4%
- Other 3%
- Action was suggested but I did not take action 14%
- No action was suggested and I did not take action 32%

**Myth**
No one reads the emails we send.

**Truth**
Although it is evident that employees can often feel overwhelmed with email, emails are consumers’ number one preferred channel for general health benefit and wellness information. To get consumers’ attention, it may be necessary to make these emails more impactful.

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Enlighten Me

Employers Want to...
Design with Intent

Consumers Say...
Enlighten Me

When it comes to the employer strategy to design with intent, consumers often do not have a clear picture of how much their health care costs—particularly the employers’ share—regardless of which type of plan they choose. For those who have chosen a CDHP, they are slightly less likely to be satisfied with their plan than last year and say it can be confusing. But they are willing to stick with it and even say it often impacts their health behaviors in positive ways.
Employers are projected to pay an average of $10,522 per employee on health care in 2012. Of that amount, on average, $8,318 (79%) is projected to be the employer share of the premium cost. Consumers estimate their employers are paying much less than this. While consumers recognize that the employer pays more if they cover family members, consumers guess the employer’s annual contribution to their employee-only health care is about half—$4,648, on average—of the $8,318 per-employee projection for 2012. Also of note is that consumer estimates do not rise along with an increase in the number of covered members, as we might expect. In other words, if consumers estimate $4,648 on average for single coverage, we might expect estimates of near $9,300 for employee plus spouse or partner (about double). But consumers only estimate an increase of about 48% (or $2,240).

As far as the employee-paid portion of health care costs, in 2012 the average total cost per employee is projected to be $4,404—$2,204 in premium costs plus $2,200 in out-of-pocket costs consumers pay for services and prescriptions during the year. When asked how much they think their annual out-of-pocket costs are, 13% percent of consumers are so unsure they will not venture an estimate. Of those who do estimate out-of-pocket health care costs for themselves and family members (excluding health care insurance premiums), their estimate of approximately $2,287 is quite close to the actual out-of-pocket average of $2,200 per employee—showing they are fairly aware of their direct out-of-pocket costs.
We see a slight decrease in the percentage of consumers satisfied with consumer driven health plans (CDHPs), but it is still high (78% satisfied versus 83% last year). Even though CDHP satisfaction has slipped, 89% of consumers who are currently in a CDHP and have a choice of plans expect to re-enroll in this type of plan. This expectation is especially true for those who have been in a CDHP for more than two years. Ninety-seven percent of this group plan to re-enroll in a CDHP.

**How Satisfied I Am with My CDHP**

<table>
<thead>
<tr>
<th></th>
<th>2011</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Completely satisfied</td>
<td>15%</td>
<td>12%</td>
</tr>
<tr>
<td>Satisfied</td>
<td>51%</td>
<td>44%</td>
</tr>
<tr>
<td>Slightly satisfied</td>
<td>17%</td>
<td>22%</td>
</tr>
<tr>
<td>Slightly dissatisfied</td>
<td>6%</td>
<td>10%</td>
</tr>
<tr>
<td>Dissatisfied</td>
<td>7%</td>
<td>7%</td>
</tr>
<tr>
<td>Completely dissatisfied</td>
<td>3%</td>
<td>5%</td>
</tr>
</tbody>
</table>

**Myth**

People do not like CDHPs, and CDHPs do not really encourage positive change.

**Truth**

Nearly four in five consumers enrolled in CDHPs are satisfied. Moreover, 60% of consumers cite making at least one positive behavior change since being enrolled in a CDHP.
How Likely That I’ll Re-enroll in a CDHP*

*For consumers whose employers offer one or more CDHPs as well as at least one other type of health plan.
Of consumers in a CDHP, 74% report their employer offers a health savings account (HSA), versus 23% who report their employer offers a health reimbursement account (HRA) with the CDHP. Of those offered an HSA, 84% say their employer contributes to their HSA, and 80% say they contribute to it.

Consumers who open an HSA report they struggle with managing certain aspects of the account. In fact, more consumers this year cite having each of the difficulties listed below over last year. Two forces may be at work here. First, as these accounts have become more prevalent, consumers are raising their expectations for service and features. Second, this greater prevalence has brought newer consumers to the account plans and they are early in the learning curve on how to use them.
Women Want More Help with CDHPs
Women are more likely to report having difficulty with CDHPs. Compared to men, they want more help deciding how much money to contribute, more information about how HSAs and health care flexible spending accounts (HCFSAs) work together, and clarity on how to use these accounts to pay for services.

Health Correlates with Engagement
Beyond reducing health costs, being healthy is also important to employee engagement. Employees who are more motivated to be healthy, as well as those who report they feel healthy, are significantly more likely to be engaged.13

Employer Perspective14
More than half of employers now offer CDHPs. And those who do offer CDHPs report lower health cost trends for these plans compared to all other plan designs. To encourage employees to enroll in them, 36% of employers report they subsidize premiums at a higher level than other plan options. An emerging trend is offering elective benefits—like critical illness coverage (47% offer it now and 41% more may offer it in the next three to five years) and extra cancer coverage (35% offer it now and 44% more may offer it in the next five years). The purpose of adding these coverage offerings is to reduce consumers’ short-term fears that they will not be able to afford a catastrophic illness in the longer term if they are in a CDHP.

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13 2012 Employee Engagement Database Analysis, Aon Hewitt.
“Being in a CDHP impacts my health behaviors—often for the better.”

Since enrolling in a CDHP, more than two-thirds of consumers say they have changed some behaviors related to their health—60% of them citing positive behavior changes (behaviors other than postponing or sacrificing care). In particular, 28% say they receive routine preventive care more often (particularly women), 23% seek lower-cost options more often (down from 30% last year) and 19% research health costs more often. Unfortunately, 23% report they’re postponing care, and 17% say they are sacrificing care (down from 26% last year)—behaviors that are not necessarily conducive to long-term health.

*In 2012, 32% reported no changes. In 2011, 27% reported no changes.*
Reward Me

Employers Want to...
Reduce Unnecessary Expense

Consumers Say...
Reward Me

When it comes to the employer strategy to reduce unnecessary expense, consumers say it does not take much to get them into wellness programs. However, they believe their employers should reward good health outcomes (instead of penalize bad health outcomes). As far as incentives, cash works best.
When asked if they would participate in a wellness program, only 10% to 18% (depending on the program type) of consumers refused to participate regardless of any reward. That means getting 80%+ participation is an achievable target. But at what cost? Depending on the program type, one-third (37%) to one-half (54%) of consumers who would consider participating would do so just for the benefit of doing it. In other words, no incentive is necessary. Another 18% to 37% (depending on the program type) would do it for $50 or less. The key, however, is getting employees to overcome the obstacles (like lack of time or perceived inconvenience) that get in the way of participation.

The programs most likely to benefit from some form of reward include those that take more time and effort—like taking an HRQ (63%) or participating in a healthy eating or weight management program (62%). With both these activities, about two-thirds would participate for a reward of $50 or less (including for no incentive but just the benefit of doing it).

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**Activities I’d Only Do for a Monetary Reward**

- Complete an HRQ: 63%
- Participate in a healthy eating or weight management program: 62%
- Talk to a health coach during work hours about ways to improve health: 58%
- Participate in fitness program: 56%
- Participate in a medically sponsored program to help me manage a medical condition: 48%
- Have my blood drawn and tested for cholesterol, glucose, etc.: 46%

*Among those who would consider participating in each program
Incentives More Crucial for Those Younger
Younger consumers (ages 25 to 39) are more likely to need incentives. For example, only 36% of them would participate in a fitness program and 25% of them in an HRQ just for the benefit of doing so. Because younger consumers are likely healthier (or see themselves as healthier), the intrinsic benefits of these programs may be less apparent than to older consumers.

Employer Perspective
Even though consumers may not always recognize it, employers—particularly larger ones—continue to offer an array of health programs with HRQs, 24/7 nurse lines, wellness programs, disease management programs and biometric screening programs among the top programs offered. Employers report a lack of participation or even awareness, as supported by the consumer data. To drive employee participation, most employers are using incentives for HRQs (84%), biometric screenings (64%) and health improvement and wellness programs (51%).

Of the employers imposing consequences on employees who fail to participate, they impose them primarily for not taking an HRQ or biometric screening (70% and 53% respectively), with one-fifth (21%) imposing some form of consequence for not participating in lifestyle modification classes.

Most employers are offering their incentives and penalties primarily to employees. However, a significant number are expanding this focus to spouses, partners and families. This expansion is likely due to the fact that most employers spend 50% or more of their health care dollars on dependents enrolled in their plans.

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Half the consumers believe their employer should reward them for achieving specific, controllable health outcomes—like having the right BMI or cholesterol levels or improving those measures. Interestingly, only 15% of consumers say employers should impose consequences for less-than-healthy outcomes such as a high BMI. Consumers clearly perceive rewards and consequences differently, and they strongly prefer rewards.

Employers are starting to link incentives to an outcome, as opposed to simply completing a task. For example, of those who do offer incentives or impose consequences, over one-half (58%) offer some form of incentive for completing a lifestyle modification program (for example, to quit smoking or lose weight). In addition, about one-quarter of organizations report offering incentives (monetary or nonmonetary) for making progress toward meeting acceptable ranges for biometric measures such as blood pressure, BMI, blood sugar and cholesterol.

Although employers embrace incentives for these achievements, about one-fifth (19%) of employers impose a consequence if employees do not follow up with a personal physician to address issues arising from their health assessment or biometric screening results.

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Cash is consumers’ clear preference (78%) when it comes to how they would like to be rewarded for participating in health and wellness programs. The second most preferred method is a gift card (68%)—another form of cash. Reduction in health insurance premiums (58%) rounds out the top three.

**CDHP Participants Like Account Deposits, Too**

When considering incentive forms for those in CDHPs, cash is still top (73% ranked it in the top three). However, 62% of consumers rank deposits to an HSA or HRA in the top three, tied with a health plan premium reduction for second most preferred.

**Myth**

I need to offer big incentives to get people to participate in wellness programs.

**Truth**

Among those who would even consider participating in a wellness program, two-thirds would participate for $50 or less (even nothing).
Insights into Consumers in the LIVING Well Segments

LIVING Well is a health and wellness segmentation tool developed by The Futures Company. This tool helps organizations strategize for more effective consumer and employee health outcomes. Doing a segmentation analysis on your employees and dependents age 18 and older to find out what percentage of them fall into each segment will give you insights into your population that will help you craft plans, programs and marketing that are much more fine-tuned to your unique audience. Here is a brief description of each segment. For more details on the survey results by segment, contact Aon Hewitt to receive our separate publication.
### The Futures Company
#### LIVING Well Segments

<table>
<thead>
<tr>
<th>Leading the Way</th>
<th>“I’m responsible for my wellbeing and have a good handle on all aspects of my life. Being healthy is about your entire being, not just doctor visits.”</th>
</tr>
</thead>
<tbody>
<tr>
<td>Positive attitude</td>
<td></td>
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<tr>
<td>Desire to improve health</td>
<td></td>
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<tr>
<td>Taking action to improve health</td>
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</tbody>
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<thead>
<tr>
<th>In It For Fun</th>
<th>“I know I’m capable of pushing myself to great limits, so I set the bar high. Being healthy is another sign of success, and staying fit will help me thrive socially and mentally.”</th>
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</thead>
<tbody>
<tr>
<td>Competitive</td>
<td></td>
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<tr>
<td>Goal-oriented</td>
<td></td>
</tr>
<tr>
<td>Social</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Value Independence</th>
<th>“Do what you feel is right—don’t always be so quick to take somebody else’s advice. As for my health, I figure out what works for me, and if it’s not right, I just move on.”</th>
</tr>
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<tbody>
<tr>
<td>Skeptical</td>
<td></td>
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<tr>
<td>Self-reliant</td>
<td></td>
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<tr>
<td>Present-oriented</td>
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</tbody>
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<thead>
<tr>
<th>I Need a Plan</th>
<th>“I don’t like surprises. I need a set plan for my life and my health. But sometimes I need some help to stick to it. Regular checkups and screenings help me keep on plan.”</th>
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</thead>
<tbody>
<tr>
<td>Risk-avoidant</td>
<td></td>
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<tr>
<td>Undisciplined</td>
<td></td>
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<tr>
<td>Seek advice</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Not Right Now</th>
<th>“Sure, I could probably spend more time on my health, but I have so many other things going on in my life! Besides, my health is pretty good now, so why worry?”</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stressed</td>
<td></td>
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<tr>
<td>Family-oriented</td>
<td></td>
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<tr>
<td>Younger</td>
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</tbody>
</table>

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<thead>
<tr>
<th>Get Through the Day</th>
<th>“I’d love to enjoy life more and have the energy to do all the things I could when I was younger. I know I could be better off, but I’m not so sure I can commit to changing.”</th>
</tr>
</thead>
<tbody>
<tr>
<td>Discouraged</td>
<td></td>
</tr>
<tr>
<td>Poor health</td>
<td></td>
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<tr>
<td>Cash-strapped</td>
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Equip Me

Not Right Now struggle the most with lack of time and are the most insistent that their working environment be healthy. For them—and only them—environment is even more important than having a positive attitude. With one of the highest stress levels and the least amount of time to exercise and eat right, the workplace may be one of the few locations where they can make health a priority.

While the most common stress-relieving activity on average is TV, Leading the Way and In It For Fun are far more likely to exercise than sit in front of the tube. They are also more likely to eat healthy snacks to de-stress. Because of their healthy tendencies and initiative, they can be good choices for health champions in the workplace.

Guide Me

In It For Fun, a set of people driven to succeed in every way, would like more personalized information from the employer, preferably through an online channel. Value Independence are least likely to say—or notice—that the employer gives them any information at all. Chances are that Value Independence would ignore whatever they did receive unless it was written specifically with them in mind.

I Need a Plan got a lot of value out of the HRQ. Half of them made a lifestyle improvement after receiving their results. A small nudge can get them started, but hand-holding is required thereafter. Many Not Right Now filled out the HRQ just to receive the financial reward, and they were more likely to say the HRQ ended without any suggestion of action. To engage this group, employers should recommend specific and convenient actions.
Employers Want to...  Consumers in the LIVING Well Segments Say...

**Design with Intent**  **Enlighten Me**  
All the segments are equally unlikely to understand, or even be able to guess, how much their employer contributes to their health care. In terms of personal expenditure, *I Need a Plan* are most likely to say they are spending more on their health care this year than last. For a segment with high rates of weight problems and chronic conditions, this is alarming, but not surprising.

**Reduce Unnecessary Expense**  **Reward Me**  
Consumers generally feel they have enough money to be healthy, although the cost of a gym membership can be prohibitive for some, especially *I Need a Plan*. *Leading the Way* favor congratulatory and inclusive programs to help the less healthy, while *In It For Fun*—a competitive set—tend to vote for punitive measures. *Leading the Way* and *In It For Fun* are more likely to participate for no incentive at all because health is a core value. These two might even stay with a company longer because they have access to health programs. At the other end of the spectrum, *Not Right Now* are cash-driven.
Actions for Employers

This research and our experience working with some of the world’s largest organizations show that successfully engaging consumers in their own health outcomes requires motivating them to change unhealthy behaviors. We know that doing this will have significant impact on the success of your health program. But the question is: How? We recommend these five FOCUS actions:

- Find Your Highest-Return Health Areas
- Open Communication Channels with Your Employees’ Families
- Curate a Healthy Environment
- Use the Few Minutes Consumers Give You
- Send Your People a Clear Signal
Find Your Highest-Return Health Areas

“Sponsor programs as incentives for families to get fit—such as raffles, reward programs (for money or prizes), free fitness classes or discounts to gyms.”

Spouse, age 31

Start by auditing your health offerings—your programs, initiatives and the like—and closely scrutinize your findings. Then concentrate your efforts on the few areas that will align with your overall health strategy, reinforce your culture and give you the best return. When it comes to return, consider what can provide you the best ROH—return on the health of your people in the long term. ROH will lead to better ROI (return on investment) over time. Plus, because consumers report they are time-crunched, focusing on a few high-return areas consistently will create less distraction than the program of the month or an overwhelming array of options.

What will give you the best ROH by directly impacting health outcomes and costs? The following eight risks and behaviors lead to the top 15 chronic conditions and account for 80% of all total costs for chronic illnesses worldwide.17 To target the behaviors that are most influential to your population, dig into your health claims, as well as absence, biometrics and workers’ compensation data so you know the top conditions. Then focus your programming around those few critical make-a-difference behaviors—like moving more, eating better and lowering stress—and reward people for reaching achievable, controlled outcomes.

<table>
<thead>
<tr>
<th>8 Risks and behaviors</th>
<th>Drive 15 chronic conditions</th>
</tr>
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<tbody>
<tr>
<td>Physical Inactivity</td>
<td>Diabetes</td>
</tr>
<tr>
<td>Poor Stress Management</td>
<td>Coronary Artery Disease</td>
</tr>
<tr>
<td>Excessive Alcohol Consumption</td>
<td>Hypertension</td>
</tr>
<tr>
<td>Poor Diet</td>
<td>Back Pain</td>
</tr>
<tr>
<td>Insufficient Sleep</td>
<td>Obesity</td>
</tr>
<tr>
<td>Lack of Health Screening</td>
<td>Cancer</td>
</tr>
<tr>
<td>Smoking</td>
<td>Congestive Heart Failure</td>
</tr>
<tr>
<td>Poor Standard of Care</td>
<td>High Cholesterol</td>
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</tbody>
</table>

Accounting for 80% of total costs for all chronic illnesses worldwide

17 2010 World Economic Forum.
Open Communication Channels with Your Employees’ Families

The road to results is not just for you and your employees. Family members often account for more than half your company’s health care costs. Families are also a huge influence on your employees. Research shows that obesity spreads in our close social circles.18 So even if we are doing everything right in the workplace, coming home to very unhealthy settings can undo our good progress at work.

How do you reach dependents as directly as possible? Start by understanding what motivates them. In addition to your employees, do a LIVING Well attitudinal segmentation analysis on their dependents age 18 and older in your health plans. Then tailor communications specifically for them addressed “to the household of” the employee, particularly cost-saving tips. Keep in mind that dependents prefer receiving communication at home because they are more likely to see it. So start there.

And don’t forget the children covered by your health plans. Design and write home mailers about health that are clearly for kids and involve them in health and wellness events. Create contests or challenges in which family members can participate. In other words, seek to forge a healthy relationship with the entire family.

Unique Insights from Spouses and Partners

Spouses and partners are:

- Often responsible for paying the day-to-day health bills and appreciate general cost-saving tips (30% spouses/partners versus 26% employees) and health plan choice guidance more (42% spouses/partners versus 37% employees), but are less likely to know how much their family pays for health care (19% spouses/partners don’t know versus 9% of employees).

- Less likely to feel that the employer supports their health (32% spouses/partners feel the employer is extremely or very supportive versus 39% of employees).

- More apt to use social media (69% of employees versus 74% spouses/partners).

- Less likely to see any communication about health from their spouse’s or partner’s employer (30% none for employees, 41% none for spouses/partners).

“Send information to the spouse of the employee. My husband gets most information and I never see it. I don’t have access to the information that he has regarding our insurance or wellness programs or even what is available to me unless he logs on to the website.”

Spouse, age 50

18 Christakis, N. and Fowler, J. The spread of obesity in a large social network over 32 years. The New England Journal of Medicine, 357; 4.
Curate a Healthy Environment

It is Monday morning. You walk by the break room in your office. Someone has left half a cake from their weekend party. Maybe you resist it the first and second time you walk by. But not the third. The willpower you had conserved is all used up.19

How many temptations do your employees face every day that drain their willpower or give them a reason to be sedentary all day? Take a walk through “a day in the life” of your employees and note all the obstacles to a healthy working environment. Then seek to remove those obstacles and enable access to healthier options. Promote healthy food “specials” in the cafeteria with nutritional labels people can read (even via an app or QR code), offer employees bikes (and helmets) they can take for a spin during a break at work or do more walking meetings. Or maybe offer a couple of big health events a year, free smartphone health apps or the latest gadgets in fitness technology to help them make progress toward better health.

In addition, find creative ways to help employees better manage stress in their work environment and beyond. Being “stressed out” is now cliché. Yet, the truth is that the stress stemming from money worries and work has a negative impact on health, productivity and engagement. As a practical matter, many of the situations causing stress are not going away. To help employees deal with stress in a healthier way, start with the basics. View your employees more holistically—as people looking to integrate a “personal” life with their “work” life. Encourage them to take their vacation time, enjoy short breaks and have flexible work schedules to the extent possible in your organization. Sponsor and support fun activities and events that are away from the workplace and get people moving and involved in healthy activities.

Try new ideas and keep what works in your culture or the culture you are striving to create. Be creative. Boldly brand it in a way that connects with people emotionally. Get authentic feedback and ideas along the way. Proudly show your new hires that you are all about health—their personal health, and in turn, the health of the business. In other words, start defaulting people into healthy habits so health becomes the norm, not the exception.

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Use the Few Minutes Consumers Give You

Consumers say they do not have a lot of time for health and wellness. Think minutes, not hours. Think bite-sized and focused. In other words, make the most of the time they are willing to give you to help them make the best decisions.

Stop wasting their time by telling them what it takes to be healthy and all the reasons it is important. They already know what and why, and will just tune you out. Instead, focus on making the how easy and make it compelling for them to take the first step. For parts of your population, cash incentives and the opportunity to help others succeed with their health goals will be most motivating. For other parts, you will want to create awareness of the consequences (like higher cost or fewer choices) of failing to act to more effectively drive the right behaviors.

Identify the “teachable moments” provided by CDHPs and HRQs. Consumers say CDHPs and HRQs can lead them to make better health decisions, but CDHPs and the associated accounts can be confusing—particularly to women. And, consumers are not always aware of HRQs. So know the key decision points and focus on leading them to a great experience at their point of need so they avoid mistakes and take steps to better health.

Provide clear guidance for health plan choices. Consumers are also overwhelmed by the number and complexity of health plan choices available when they enroll. Provide guidance tools that offer clear, fast advice at the time and place consumers need to make decisions. With health care exchanges coming in 2014, they will welcome clear guidance and simplified decision support more than ever.

Give practical information tidbits to your plan participants so they can be better consumers. Use a broad range of communication channels—like wellness games, mobile resources, wellness-focused web hubs and wallet cards—that make it easy for employees and their families to choose well in the moment of need. Because emails are consumers’ preferred channel, punch them up so they are “high octane” by designing them to reflect your brand and keeping them succinct and visual.

Make it personal. Health is personal and emotional, and often people simply want to talk with another human being about it. So why have we made health communication impersonal, rational and isolating? Long narrative descriptions of the “whys” rarely drive anyone to action. Make sure you give people opportunities to talk with experts through a call center or in meetings, attend forums on wellness topics and dialogue with one another.

“Send out reminders on vacation and personal days and the importance to take time and rejuvenate.”

Employee, age 43

Send Your People a Clear Signal

Have you ever been at a party where someone says your name from across the room and you hear it amid the noise? Your name is a signal you can hear over the din. But with health communication, we often use scattershot messaging—you know, telling everyone the same thing and hoping the right pieces of data will land on the right people. The result? Your communication simply becomes noise.

How do you send a clear signal to employees and family members that your organization is serious about health without flooding them with noise? Start by getting to know as much about them as possible—including demographic (e.g., gender, age) and behavioral (e.g., plan choice, health claims) data. Then do a LIVING Well segmentation analysis and incorporate those insights about their values and beliefs. With that more comprehensive view of your people, you will have a much better idea of what motivates them so you can move your unique population—plus key groups within it—to action more effectively.

Once you know what you want people to do and what will most likely motivate them to do it, create a communication strategy that consistently sends a clear visual and narrative signal that cuts through the noise. Use a range of channels that work well in your environment and craft messages that will get your people’s attention. Incorporate social media platforms with clear media guidelines that involve people across the company and are not positioned as overly intrusive by the company. Reinforce specific, reachable action steps. Then keep your efforts alive by continually re-engaging people with fresh angles to the way you frame actions you want them to take. Along the way, test your ideas in focus groups, listen to and manage the buzz (the good and the bad) and pilot your programs and materials. Then when something is not working, recalibrate and do something new. No one has the time or money to spend on ineffective outreach.

When it comes to your tactics, think marketing. Moving people past their sedentary ways and away from simply defaulting into the well-worn groove requires compelling marketing that clearly spells out the value they will get by taking a particular action. Also use clear, personalized communication about health actions and costs to maximize the relevancy of the must-do actions you need to drive. Consumers are not yet comfortable with targeting by conditions or demographics, so ask those employees and dependents to opt in when you do want to target.


“The programs to help you get healthy are great, but you have to jump through so many hoops. If they made it easier to enroll, more people would do it!”

Spouse, age 37
About the Study

For a second year, Aon Hewitt partnered with the National Business Group on Health (The Business Group) and The Futures Company to conduct The Consumer Health Mindset study. This study explores perspectives, attitudes and behaviors that employees and dependents hold toward health and health care as they interact with their employer-sponsored health plans and wellness programs. The study also investigates consumers’ unique motivators and barriers to health engagement based on The Future Company’s LIVING Well segmentation approach. It measures behavioral and attitudinal differences using six unique profile groups.
The primary source of data for this study comes from a survey administered online within the United States in August 2012. A diverse group of 2,876 consumers—including both employees and dependents covered by employer health plans—completed it. All respondents are covered by employer plans offered by employers with at least 1,000 employees.

Consumer respondents are representative of the U.S. population across demographic categories, employer size, types of health plans and health conditions. (See the following consumer profiles for more information about the respondents.) However, consumers’ attitudes at this time in history are more than the sum of what their demographics might indicate. A recent study by The Futures Company shows consumers are feeling exposed to uncertain conditions, are more often filled with negative energy and that tensions are rising. These attitudinal conditions, along with the ever-diversifying demographics, make it even more critical for employers to truly understand what makes their consumers tick to deliver the best outcomes.

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Gender

- Female: 51%
- Male: 49%

Age

- 23–39: 38%
- 40–49: 14%
- 50–59: 23%
- 60–65: 26%

U.S. Region

- West: 22%
- South: 32%
- Midwest: 25%
- Northeast: 22%
Job Status of Covered Employees

- Full-time: 95%
- Part-time: 3%
- Other: 2%

Race

- White: 71%
- Hispanic: 13%
- African-American: 9%
- Other: 7%

Relationship to Health Plan

- Employee: 71%
- Dependent: 29%
About Aon Hewitt

Aon Hewitt is the global leader in human resource solutions. The company partners with organizations to solve their most complex benefits, talent, and related financial challenges, and improve business performance. Aon Hewitt designs, implements, communicates and administers a wide range of human capital, retirement, investment management, health care, compensation and talent management strategies. With more than 29,000 professionals in 90 countries, Aon Hewitt makes the world a better place to work for clients and their employees.

For more information on Aon Hewitt, please visit www.aonhewitt.com.

About The National Business Group on Health

The National Business Group on Health is the nation’s only non-profit membership organization of large employers devoted exclusively to finding innovative and forward-thinking solutions to their most important health care and related benefits issues. In addition, it is the voice for large employers on national health care issues. The Business Group—whose 348 members include 65 of the Fortune 100—identifies, develops, and shares best practices in health benefits, disability, health and productivity, related paid time off, and work/life balance issues. Business Group members provide health coverage for more than 55 million U.S. workers, retirees, and their families.

For more information on the Business Group, please visit www.businessgrouphealth.org.

About The Futures Company

The Futures Company is the leading global strategic insight and innovation consultancy. Unparalleled global expertise in foresight and futures enables The Futures Company to unlock new sources of growth through a range of subscription services and research and consulting solutions.

The Futures Company was formed in 2008 from the coming together of The Henley Centre, HeadlightVision and Yankelovich. The Futures Company is a Kantar company within WPP with teams in North America, Europe, and Latin America.

For more information on The Futures Company and LIVING Well, please visit www.thefuturescompany.com.