The Consumer Health Mindset

Unpack the Experience. Unleash the Possibilities.
For the third year, 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.

Our learnings in this report will help you better **unpack** the hearts and minds of health care consumers across the U.S. We look at their unique health attitudes, motivators and daily barriers regarding the most common and emerging employer health and wellness strategies. We then provide practical actions you can take to **unleash** the consumer health mindset.

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Throughout this report, we refer to all survey respondents as “consumers” and distinguish between employees or dependents where appropriate. The numbers on the charts may not add up to 100% because of rounding or multiple options available to the consumers.
Unpack the Experience.

Personal Health

Make it easier for consumers to make more positive choices to improve their health and reduce their stress.

Workplace Wellness

Strengthen your culture of health so your consumers experience their progress as part of something bigger.

Wellness Programs

Offer consumers programs and incentives that are personally relevant and meaningful.

Health Plans

Show consumers how to translate their health plan cost knowledge into real-life consumer behaviors.

Communication Channels

Use an array of high-tech and high-touch communication channels.
Every day we each take steps along our personal wellness journey. Those steps impact our personal lives, families and work. Sometimes we step forward. Other times, we step backwards or sideways, right? The wellness journey also impacts businesses because they are comprised of individuals on their unique journeys. Why is it important to take a closer look at the mindset of health consumers?

- **Companies foot the bill for unhealthy employees.** Health care insurance and claims costs continue to rise at unaffordable rates. Meanwhile, organizations have exhausted most, if not all, of the foundational strategies designed to minimize cost increases while staying competitive in the marketplace for talent.

- **Health sets the pace for 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 miss fewer days from work, are more productive when they are there, and enjoy stronger levels of engagement.

- **How consumers “walk the talk” plays a huge role in better outcomes.** Research shows that there are eight human behaviors, all of which can be modified, that lead to 15 chronic conditions that, in turn, account for 80% of all health care costs.*


This report unpacks consumers’ perspectives in five critical areas that you may have responsibility for as a business professional working in the area of health. First, we look at consumers’ view of their own personal health, since it is the filter through which they make decisions about what you offer them. Then we look at the impact of the environment they work in through workplace wellness as well as the wellness programs and health plans they are offered. Finally, we get their take on a wide range of communication channels.

You’ll learn about what jazzes, sidetracks and concerns consumers in today’s fast and furious health care world. You’ll also glean practical ideas to help you unleash your best possibilities for reaching and motivating your consumers most effectively.

*2010 World Economic Forum*
This report includes charts that reflect the primary insights from the survey. In addition, we highlight areas of notable differences in these areas.

This study also investigates consumers’ unique motivators and barriers to health engagement based on The Future Company’s LIVING Well® attitudinal segmentation approach. It measures behavioral and attitudinal differences using these six unique profile groups.

**Leading The Way**
- Health-focused
- Holistic
- Proactive

**In It For Fun**
- Goal-oriented
- Fitness-focused
- Social

**Value Independence**
- Skeptical
- Do-it-yourself
- Self-reliant

**I Need A Plan**
- Advice-seeking
- Risk-averse
- Coaching-dependent

**Not Right Now**
- Time-pressed
- Healthy enough
- Family-centric

**Get Through The Day**
- Health-challenged
- Overwhelmed
- Stressed

The Futures Company and Aon Hewitt partner with organizations to conduct segmentation analyses of their employees and dependents age 18+ to determine their unique segmentation mix. The result? Valuable insights that guide plan, program and marketing design fine-tuned to your audience.
Personal Health
Make it easier for consumers to make more positive choices to improve their health and reduce their stress.

Reinforce Small, Positive Choices
Give consumers opportunities in their daily work lives to make small, positive health choices and increase their self-awareness in ways that don’t take a lot of time or money. For example, start a campaign to promote drinking water and show them what the recommended daily intake looks like. Create a picture-based “eat this, not that” campaign. Sponsor on-site cooking classes that teach healthy cooking in right-sized portions.

Also consider adding visual cues to the physical environment. Color-code cafeteria food by whether it’s a good, mediocre or bad health choice. Display employees’ kids’ artwork in the stairwells so people take the stairs more often. Put a sticker on vending machines with the fact that you need to walk the length of a football field to burn off one (yes, one!) M&M.®

Admit to Stress and Provide Help
Ask leaders to acknowledge that stress is real, prevalent, often caused by work, and can have negative effects. Knowing the company is aware and cares helps consumers know they’re not alone and have the company’s overall support.

Then, recommend practical steps to reduce and manage stress at work and home. Stress management and financial wellness programs and tools may work well with your population. Invite family members to participate, too. Anything from yoga classes to flexible work arrangements can be effective.

Encourage Consumers to Have a Doctor
Advice from doctors has the most influence on the health and wellness actions consumers take. Promote web tools that help consumers choose a primary doctor and schedule annual preventive exams. Show them new ways they can connect with their doctors—often through email and phone calls—even without an in-person visit. Consider also creating a regular “practical tips from doctors” feature on your health website.
“I’m not always honest with myself about how healthy I am.”

How I Rate My Overall Health

<table>
<thead>
<tr>
<th>Rating</th>
<th>2012</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Excellent</td>
<td>13%</td>
<td>13%</td>
</tr>
<tr>
<td>Very good</td>
<td>47%</td>
<td>47%</td>
</tr>
<tr>
<td>Good</td>
<td>32%</td>
<td>32%</td>
</tr>
<tr>
<td>Fair</td>
<td>8%</td>
<td>8%</td>
</tr>
<tr>
<td>Poor</td>
<td>1%</td>
<td>1%</td>
</tr>
</tbody>
</table>

Those enrolled in a high deductible health plan (HDHP) are more likely to rate their health as very good or excellent (65%) versus 60% for all consumers.

How Accurately I Self-Report My Health Status

<table>
<thead>
<tr>
<th>Status Definition</th>
<th>2012</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total reporting as “healthy”*</td>
<td>87%</td>
<td>92%</td>
</tr>
<tr>
<td>Report “healthy”* but are overweight or obese**</td>
<td>53%</td>
<td>59%</td>
</tr>
<tr>
<td>Report “excellent”* but are overweight or obese**</td>
<td>33%</td>
<td>37%</td>
</tr>
</tbody>
</table>

Consumers are confident in their health status with 92% saying their health is at least good—up slightly from 87% last year.

Consumers continue to be overly optimistic about their health and do not necessarily consider their weight when assessing their overall health. About three-fifths (59%) of those reporting being in at least good health are actually overweight or obese, up from 53%.

*Rated health as good, very good or excellent
**Based on self-reported height and weight
**Personal Health**

“I know I play a big part in my own health.”

**Actions That Lead to Good Health** (rank 1, 2 or 3)

- **Making smart health choices in my daily life**
  - 2011: 85%
  - 2012: 83%
  - 2013: 79%

- **Getting regular preventive care**
  - 2011: 68%
  - 2012: 58%
  - 2013: 59%

- **Living and/or working in a healthy environment**
  - 2011: 40%
  - 2012: 40%
  - 2013: 42%

- **Having a positive attitude**
  - 2011: 23%
  - 2012: 43%
  - 2013: 41%

- **Having good genes**
  - 2011: 34%
  - 2012: 38%
  - 2013: 32%

- **Having enough money to pay for all the care I need to stay healthy**
  - 2011: 22%
  - 2012: 21%
  - 2013: 26%

- **Having good doctors**
  - 2011: 18%
  - 2012: 27%
  - 2013: 21%

Consumers continue to acknowledge that what they do matters most in how healthy they are. **Making smart choices every day** and getting **regular preventive care** are the biggest contributing factors. However, the percentage agreeing has declined over the last two years.

About two-fifths continue to believe that **living and/or working in a healthy environment** and **having a positive attitude** lead to good health, with positive attitude up significantly from two years ago.

**Having enough money** has risen in rank somewhat from the past years’ surveys, perhaps in response to the greater media attention on health costs due to health care reform.
“I have a lot of control over my own health.”

Level of Control I Have Over My Health*

<table>
<thead>
<tr>
<th></th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>10, 9 or 8</td>
<td>59%</td>
<td>61%</td>
<td>63%</td>
</tr>
<tr>
<td>7</td>
<td>22%</td>
<td>22%</td>
<td>20%</td>
</tr>
<tr>
<td>6, 5, 4, 3, 2, 1 or 0</td>
<td>19%</td>
<td>17%</td>
<td>17%</td>
</tr>
</tbody>
</table>

63% rate their level of control over their health at least an 8 out of 10. This number has steadily risen over the last two years.

Employees in strong cultures of health are more likely to say they have control over their health (75% rating control at least an 8 out of 10 versus 63% for all consumers).

Though overall levels of control have risen, there is a sizable group of consumers whose perceived level of control is relatively low. This perception may get in the way of them taking steps to improve their health.

*Based on 0 to 10 scale where 0 = No control over my health and 10 = Complete control over my health

Consumers in attitudinal segments that most strongly believe they have control over their health (Leading the Way and In It For Fun) are more likely to view their overall happiness as closely tied to how healthy they are:

- **Leading the Way 59%**
- **In It For Fun 57%**
- **Value Independence 26%**
- **I Need a Plan 38%**
- **Not Right Now 39%**
- **Get Through The Day 33%**
“Hurdles like lack of time and affordability take me off track.”

**Personal Health**

When it comes to making choices that help them get and stay healthy, 85% of consumers say at least one obstacle gets in the way. Among those consumers, **lack of time** and **affordability** are the hurdles they cite most often.

Consumers mention **lack of time** and **unwillingness to sacrifice** less often as obstacles than last year, but they mention nearly all other obstacles more often.

Employees in weak cultures of health are more likely to cite **work environment** (53%) and **affordability** (44%) as obstacles.

Consumers are justified in being concerned about the affordability of health care. Over the last decade, employees’ share of health care costs—including employee payroll contributions and out-of-pocket costs—will have increased 125% from $2,011 in 2004 to $4,542 in 2013.

Aon Hewitt Health Value Initiative database representing 1,200 health plans.

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**Obstacles That Keep Me From Getting and Staying Healthy**

*(rank 1, 2 or 3)*

- **Lack of time**
  - 2012: 51%
  - 2013: 63%
- **Affordability**
  - 2012: 36%
  - 2013: 40%
- **Work environment**
  - 2012: 30%
  - 2013: 35%
- **Unwillingness to sacrifice**
  - 2012: 38%
  - 2013: 34%
- **Confusing coverage**
  - 2012: 19%
  - 2013: 25%
- **Lack of cost information**
  - 2012: 18%
  - 2013: 24%
- **Too much health information**
  - 2012: 17%
  - 2013: 23%
- **Not knowing what preventative care to get**
  - 2012: 14%
  - 2013: 18%
- **Don’t know enough**
  - 2012: 15%
  - 2013: 18%
- **Access to doctor**
  - 2012: 12%
  - 2013: 16%
- **Lack of access to providers for treatment**
  - 2012: 10%
  - 2013: 13%

*Among consumers who report they have obstacles.
Personal Health

“Many aspects of my life are stressing me out.”

Half of consumers continue to report feeling high stress on a regular basis. One-third of consumers (33%) report that their stress has increased over the past year—similar to 2012 (34%), but down from nearly half (47%) in 2011.

Sources of My Stress (percentage citing each as significant or moderate source)

Not surprisingly, work has a lot to do with the top stressors—from consumers’ financial situation to factors directly related to work.

While finances and work sources have stayed about the same, personal/family commitments, personal health conditions and family changes have all become stressors for more consumers over the last couple of years.
“Stress may affect me positively or negatively, and I cope with it in mostly sedentary ways.”

To cope with stress, most consumers watch TV (29%), listen to music (25%), exercise more (25%), read (21%) or sleep more (19%)—most of which are sedentary activities.

Impact of Stress on Activities and/or Relationships Related to…

<table>
<thead>
<tr>
<th>Impact</th>
<th>Personal</th>
<th>Work</th>
</tr>
</thead>
<tbody>
<tr>
<td>Positive*</td>
<td>31%</td>
<td>27%</td>
</tr>
<tr>
<td>None</td>
<td>39%</td>
<td>41%</td>
</tr>
<tr>
<td>Negative*</td>
<td>31%</td>
<td>32%</td>
</tr>
</tbody>
</table>

About one-third of consumers report that their stress level **positively impacts their personal and/or work life**, while another one-third say it has a **negative impact**. The significant change from last year is that the third on the negative side is about double the percentage from last year.

**Females are more likely to view stress related to work as negative** (35%).

**Employees in weak cultures of health are more likely to say stress has a negative impact on work activities versus those in strong health cultures (49% versus 25%).**

While most consumers report that their employer does not view stress as impacting their work quality, about one-third say the employer views it as having a **negative impact** and only 9% as a **positive**.

*Significant or moderate
Personal Health

“My health is most influenced by people—including myself.”

Has the Most Influence on Health and Wellness Actions I Might Take (rank 1, 2 or 3)

- **Advice from doctor(s)**: 65% (2012) → 63% (2013)
- **My own view of how I feel**: 65% (2012) → 57% (2013)
- **Advice from friends or family**: 26% (2012) → 31% (2013)
- **General health websites** (e.g., WebMD®, Mayo Clinic®): 20% (2012) → 30% (2013)
- **Research studies conducted by doctors or scientists**: 13% (2012) → 22% (2013)
- **Health information from my health insurer**: 12% (2012) → 19% (2013)
- **Health-related media programming**: 11% (2012) → 16% (2013)
- **Health information from local hospitals**: 7% (2012) → 14% (2013)
- **Advice from pharmacist(s)**: 8% (2012) → 12% (2013)
- **Health information from the employer**: 8% (2012) → 12% (2013)
- **Health information from government agencies**: 5% (2012) → 12% (2013)
- **Research studies conducted by health companies**: 6% (2012) → 10% (2013)

The sources most influential on personal health and wellness continue to be doctors and consumers’ own views, though both are down somewhat from last year. Beyond those two primary influences, nearly every other source has grown over last year.

Those over age 40 are more likely to cite advice from their doctor as influential compared to younger consumers (68% versus 54%). Younger consumers are more likely to cite friends and family compared to older consumers (39% versus 27%), reinforcing the importance of social circle influence for younger consumers.

Females are more likely to cite their own view of their health as influential compared to males (62% versus 50%).

Only 12% of consumers see health information from the employer as significantly influencing their actions, but this number is up 50% from last year (8%).
Workplace Wellness
Strengthen your culture of health so your consumers experience their progress as part of something bigger.

Unpack the Experience. Unleash the Possibilities.

Align Health Culture with Business Goals
Strong cultures of health foster better health behaviors. Strengthen your health culture by making health improvement a priority in your business and cascading that priority into your business plans. Then think through a day in the life of your employees and identify and remove barriers to good health choices and habits.

At the same time, lead from the top and bottom. Avoid what consumers see as the number one characteristic of a weak health culture—leaders who do not actively encourage employee health or serve as role models. At the same time, find and celebrate employee role models and put them in a position to help others.

Recognize Effort
Getting and staying healthy is hard work. Find ways to acknowledge progress—not just results. Celebrate employees who have made significant health strides in a town hall meeting or with a personal letter from the CEO. Also encourage employees at all levels to support each other’s everyday health victories.

Train Managers
Train managers to support workplace wellness each day. Show them how they can give their employees reasonable flexibility to participate in health activities and encourage positive health behaviors throughout the workday.

To respect personal privacy, make sure managers understand privacy guidelines and know to suggest specific goals or programs only if the employee asks.

Consumers’ Advice for Employers
“Encourage a positive work environment. People who are happy at work are much more likely to be healthy.”

“Promote healthy behavior in my direct work location—for example, provide flexibility in eating options and allow me to take care of health matters during the day.”
Workplace Wellness

“There is value for me and the employer in having strong workplace wellness.”

Health and Wellness Programs Offered by the Employer... (slightly agree, agree or strongly agree)

- Are a good business investment: 86%
- Make me feel better about the company: 75%
- Make the company more attractive to potential employees: 77%
- Help me get or stay healthy: 77%
- Are one of the reasons my spouse/domestic partner/parent stays at his/her job (among dependents): 61%
- Are one of the reasons I stay at my job (among employees): 59%

Consumers believe workplace wellness programs have many advantages—starting with being a good business investment for the employer.

Hispanic and African-American respondents are more likely to view programs as improving the company’s reputation as well as improving health.

Union employees are more likely to view programs offered as a reason to stay, making the company more attractive to potential employees and helping to improve health.
Workplace Wellness

“My employer encourages healthy behaviors, at least to some extent.”

How Much My Employer Encourages Healthy Behaviors*

<table>
<thead>
<tr>
<th>Scale 0–10</th>
<th>0–3</th>
<th>4–7</th>
<th>8–10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not even a consideration for my employer</td>
<td>19%</td>
<td>47%</td>
<td>34%</td>
</tr>
</tbody>
</table>

My employer does everything it can to support a healthy environment

About one-fifth of employees say their employer does not encourage healthy behaviors at all.

There’s plenty of room for improving the work environment. While about one-third of employees say their employer is definitely hitting the mark, about half put their employer somewhere in the middle.

Employees working in health care/social assistance companies are more likely to view their workplace as supportive (44% rated 8 or above) as do employees over age 60 (39%) and African-American employees (42%).

*Question consumers answered: “To what degree does your employer encourage health behaviors through programs or overall work environment (e.g., wellness activities, available food choices, support from management for health-related activities during work hours)?”
Workplace Wellness

“When it comes to a healthy environment, some employers are getting it right.”

Relative to other activities, consumers are slightly more likely to view their employers as actively encouraging healthy activities during the workday and considering actions that improve employee health. But consumers are more likely to say employers do not recognize health achievements, do not take employee health into account when making business decisions, and offer few healthy choices in cafes or vending machines. Measuring across these eight dimensions of a health-related culture, one-quarter of employees characterize their workplace as having a strong culture of health, while another one-quarter describe their workplace as having a weak culture of health. Most employees describe their employer as somewhere in the middle—doing some things well and others not so well.*

<table>
<thead>
<tr>
<th>Health Culture</th>
<th>Weak culture</th>
<th>Moderate culture</th>
<th>Strong culture</th>
</tr>
</thead>
<tbody>
<tr>
<td>Encouragement</td>
<td>Employees discouraged from incorporating healthy activities into workday</td>
<td>18% 21% 30% 31%</td>
<td>Employees actively encouraged to incorporate healthy activities during workday</td>
</tr>
<tr>
<td>Priority</td>
<td>Employer only does what will save money</td>
<td>28% 19% 24% 29%</td>
<td>Employer seriously considers all actions that improve employee health</td>
</tr>
<tr>
<td>Leadership</td>
<td>Leaders do not actively encourage employee health or serve as role models for health</td>
<td>28% 22% 27% 23%</td>
<td>Leaders are health advocates and role models for health</td>
</tr>
<tr>
<td>Work Environment</td>
<td>Employer makes it difficult for me to get or stay healthy</td>
<td>26% 24% 26% 24%</td>
<td>Employer makes it easy for me to get or stay healthy</td>
</tr>
<tr>
<td>Sharing</td>
<td>Employees not encouraged to share health-related efforts with others</td>
<td>26% 26% 26% 22%</td>
<td>Employees encouraged to share health-related efforts with others</td>
</tr>
<tr>
<td>Business Decisions</td>
<td>Employer does not take employee health into account</td>
<td>33% 22% 25% 20%</td>
<td>Employee health is an important input for employers</td>
</tr>
<tr>
<td>Recognition</td>
<td>Health achievements not recognized, rewarded or celebrated</td>
<td>35% 21% 22% 22%</td>
<td>Health achievements often recognized, rewarded or celebrated</td>
</tr>
<tr>
<td>Cafeterias and Vending</td>
<td>Employer offers few healthy choices</td>
<td>33% 24% 22% 22%</td>
<td>Employer offers many healthy choices</td>
</tr>
</tbody>
</table>

*On scale from 0 to 40 (8 questions across a 6-point scale), 0–12 is considered weak health culture (mostly left-side characteristics), 13–25 is moderate health culture, and 26-40 is strong health culture (mostly right-side characteristics).
Workplace Wellness

“In a strong culture of health, I am more likely to do what’s good for me.”

<table>
<thead>
<tr>
<th>Activity</th>
<th>Total Employees</th>
<th>Strong Health Culture</th>
<th>Weak Health Culture</th>
</tr>
</thead>
<tbody>
<tr>
<td>Had an annual physical in last year</td>
<td>66%</td>
<td>72%</td>
<td>64%</td>
</tr>
<tr>
<td>Exercise at least three days a week</td>
<td>55%</td>
<td>62%</td>
<td>49%</td>
</tr>
<tr>
<td>Never participate in wellness activities*</td>
<td>9–15%</td>
<td>6–11%</td>
<td>12–22%</td>
</tr>
<tr>
<td>Rate health as very good or excellent</td>
<td>61%</td>
<td>69%</td>
<td>51%</td>
</tr>
<tr>
<td>Rank “health information from employer” as influential**</td>
<td>13%</td>
<td>19%</td>
<td>6%</td>
</tr>
<tr>
<td>Are satisfied with health plan***</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are overweight or obese</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The investment in a strong culture of health appears to pay dividends in healthy behaviors and health-related outcomes. Employees in these cultures are more likely to do the right things for their health.

Employees in companies with weak health cultures are more likely to be overweight or obese.

*Response varies by program
**Ranked as one of top three most influential
***Completely satisfied, satisfied or slightly satisfied
**Workplace Wellness**

*“Everything influences my view of a health-related culture, but some things matter more than others.”*

Of the characteristics of a health culture described on page 15, some have a greater impact on consumers’ perception than others. In this chart, “1” indicates the most influential characteristic among those tested and the higher numbers indicate characteristics with relatively less influence on consumers’ overall perception.

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Weak Characteristic</th>
<th>Impact Rank in Driving Overall Perception of...</th>
<th>Strong Characteristic</th>
</tr>
</thead>
<tbody>
<tr>
<td>Priority</td>
<td>Employer only does what will save money</td>
<td>4</td>
<td>1</td>
</tr>
<tr>
<td>Encouragement</td>
<td>Employees discouraged from incorporating healthy activities into workday</td>
<td>8</td>
<td>2</td>
</tr>
<tr>
<td>Leadership</td>
<td>Leaders do not actively encourage employee health or serve as role models for health</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Recognition</td>
<td>Health achievements not recognized, rewarded or celebrated</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td>Business Decisions</td>
<td>Employer does not take employee health into account</td>
<td>3</td>
<td>7</td>
</tr>
</tbody>
</table>

The characteristic that has the greatest impact on perceptions of a weak health culture is **leaders not actively encouraging employee health or serving as role models**. **Lack of recognition** has the second highest impact in driving perceptions of a weak culture. These are characteristics to minimize as much as possible.

Making health a priority and encouraging healthy activities during the workday are the top two drivers of perceptions of a strong culture. These are characteristics to amplify and promote.
Workplace Wellness

“My employer supports my efforts to achieve my health goals, but I’m less certain that my manager is supportive.”

How Supportive They Are in Getting and Keeping Me Healthy

<table>
<thead>
<tr>
<th></th>
<th>Employer</th>
<th>Direct Manager or Department Head</th>
</tr>
</thead>
<tbody>
<tr>
<td>Extremely/very supportive</td>
<td>39%</td>
<td>33%</td>
</tr>
<tr>
<td>Moderately supportive</td>
<td>33%</td>
<td>26%</td>
</tr>
<tr>
<td>Slightly/not supportive</td>
<td>28%</td>
<td>41%</td>
</tr>
</tbody>
</table>

Employees are slightly less likely to see their direct manager or department head as supportive relative to how they see support from their employer overall.

Younger consumers (under age 40) and male consumers are more likely to say the employer is extremely/very supportive compared to those over age 40 and female consumers.

More than four in 10 employees say the manager is only slightly or not supportive.
Workplace Wellness

“I’m hesitant for my manager to be too involved in my personal health.”

Role I Would Like My Direct Manager to Have in Getting and Keeping Me Healthy

- Very active: 12%
- Somewhat active: 35%
- Somewhat passive: 26%
- Very passive: 28%

About half (47%) would like managers to be very or somewhat active, but more than half (54%) want their managers to be more passive.

More than one-quarter want practically no involvement from their manager, perhaps to maintain their privacy.

Employees in this segment are more likely to view active involvement from their manager as desirable:

- In It For Fun 58%

Consumers in these groups view more active involvement from their manager as desirable:

- Health care/social assistance 54%
- Those in a union 52%

Employees over age 50 are less likely to desire management involvement 40%
Wellness Programs
Offer consumers programs and incentives that are personally relevant and meaningful.

Consumers’ Advice for Employers
“Offer more tools to help me determine my personal goals and how to achieve them and track my progress.”

“Provide more programs to encourage healthy activities or wellness awareness. Allow employees to attend during work hours so they won’t feel that they’re skipping out on their job.”

Know What Motivates
Do a segmentation analysis of your population to understand as much about your people as possible. Knowing what motivates them increases your chances of moving them. Tailor your incentives and program offerings to the groups that will benefit the most. Each year, measure your success and refine your offerings to maximize relevancy to your target populations. Also, keep it fresh by periodically adding a new, innovative solution to the mix.

Pay special attention to the group that will soon be the largest generational segment in the U.S. workforce: consumers under 35. They may be the best educated and most tech-savvy generation ever, but they also may be the most at-risk health generation. Create programs and offerings—like vetted, reputable health apps—that engage this critical part of your workforce in ways traditional resources may not.

Redefine Program Success
Aim for a reasonable ROI from your programs. But don’t sweat it if every person is not interested in every program. Short-term programs that work once or twice can be more effective than programs that have been around forever. Your best success will come with programs that consumers believe are worth the effort, move them toward better health and are easy to do. Because nutrition and healthy eating programs often fit those criteria for consumers, include them in your mix.

Rethink Your Financial Outlay
Consumers have clearly come to expect incentives, often for things that have personal value. Though it’s difficult to reduce existing incentive levels, it may not take as much money as you think to incent participation. In many cases, consumers will participate for $50 or less. To incent more healthy behaviors, also consider requiring consumers to broaden their efforts each year to earn the incentives.
“A health risk questionnaire (HRQ) prompts me to take positive action.”

### Top Programs by Participation*

<table>
<thead>
<tr>
<th>Program</th>
<th>2012</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biometrics</td>
<td>56%</td>
<td>61%</td>
</tr>
<tr>
<td>HRQ</td>
<td>50%</td>
<td>54%</td>
</tr>
<tr>
<td>Fitness activity</td>
<td>40%</td>
<td>45%</td>
</tr>
<tr>
<td>On-site clinic or pharmacy</td>
<td>43%</td>
<td>39%</td>
</tr>
<tr>
<td>Nutrition/healthy eating</td>
<td>23%</td>
<td>27%</td>
</tr>
<tr>
<td>None</td>
<td>47%</td>
<td>41%</td>
</tr>
</tbody>
</table>

*When offered by employer

Nearly three-fifths (59%) of consumers say they participated in one or more wellness programs in the last 12 months (where at least one is offered). Of those consumers, more than half participated in these two most popular programs when offered.

Participation is up in all programs except on-site clinic or pharmacy, which declined slightly, and HRQs, which remained steady.

### Actions Taken After Completing an HRQ*

<table>
<thead>
<tr>
<th>Action</th>
<th>2012</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Made at least one lifestyle improvement (e.g., more exercise, better diet)</td>
<td>65%</td>
<td></td>
</tr>
<tr>
<td>Shared results with a medical professional for advice</td>
<td>31%</td>
<td></td>
</tr>
</tbody>
</table>

*Among those participating and where action is suggested

Two-thirds of consumers say they received suggested actions for improvement after taking a HRQ. Of those, 83% say they took at least one positive action—most often making a **lifestyle improvement** (65%).

Even though it’s the second most common action, less than one-third **share results with a medical professional**.
Wellness Programs

“The Wellness programs I participate in help me improve my health.”

The vast majority of consumers participating in a particular health improvement program agree that it helps them improve their or their family’s health. When asked how well the program helps, the majority say well or very well and more than 90% say at least somewhat well.

This Program Improves My or My Family’s Health*

<table>
<thead>
<tr>
<th>Wellness Program</th>
<th>Improvement Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition/healthy eating</td>
<td>93%</td>
</tr>
<tr>
<td>Fitness activity</td>
<td>85%</td>
</tr>
<tr>
<td>Stress management</td>
<td>83%</td>
</tr>
<tr>
<td>Health condition management</td>
<td>80%</td>
</tr>
<tr>
<td>Employee assistance</td>
<td>77%</td>
</tr>
<tr>
<td>On-site clinic or pharmacy</td>
<td>74%</td>
</tr>
<tr>
<td>Advice from nurse</td>
<td>73%</td>
</tr>
<tr>
<td>Lifestyle management or coach</td>
<td>72%</td>
</tr>
</tbody>
</table>

Nearly all consumers who participate in nutrition/healthy eating programs perceive them to improve their or their family’s health.

In every case with enough participation, those in strong health cultures are more likely to say the program effectively supports their health improvement compared to those in weak health cultures.

*Figures represent somewhat well, well or very well on a 6-point scale among participants of the related program.
Wellness Programs

“I want more practical help from my employer to help me achieve my health goals.”

Compared to last year, consumers believe the employer should give them more practical help in virtually every area as they strive to reach their health goals—starting with personal health tools. In other words, they are more willing to give their employer greater influence—without compromising privacy—but they want the help to be personal and specific.

Without Compromising Privacy, Employers Providing Health Insurance Should... (strongly agree or agree)

<table>
<thead>
<tr>
<th>Offer free tools to participants to raise awareness of personal health status and related health risks</th>
<th>2012</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female consumers are more likely to agree that employers should offer free tools, rewards for outcomes and healthy lifestyle programs.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Reward participants for achieving specific, controllable health outcomes</th>
<th>2012</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>African-American consumers are more likely to agree that employers should provide healthy lifestyle programs.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Provide programs to participants to help achieve or maintain a healthy lifestyle</th>
<th>2012</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>At 13 points, the most significant year-over-year increase is the number of consumers who would like a personalized look at their health care usage and other personalized health information.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Provide participants a personalized, aggregated on-line view of health care usage and other personalized health information</th>
<th>2012</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-white consumers are more likely to agree that employers should direct participants, target by condition or demographic, require activities for discounts, or impose consequences for unhealthy conditions within consumers’ control.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| Direct participants to certain hospitals or physicians for specific procedures or conditions for best care at most appropriate cost | 2012 | 2013 |

| Target certain communications based on a participant’s individual health condition | 2012 | 2013 |

| Target certain communications based on demographic information about participants | 2012 | 2013 |

| Require higher employee costs for health insurance if employees do not use health awareness tools | 2012 | 2013 |

| Impose consequences on participants for less-than-healthy conditions with controllable outcomes | 2012 | 2013 |
### Wellness Programs

“I’m not participating if the program’s not personally relevant to me or not convenient.”

#### Reasons I Do Not Participate in an Offered Wellness Program (select all that apply)

<table>
<thead>
<tr>
<th>Reason</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Was not relevant to me or didn’t apply to my situation</td>
<td>46%</td>
</tr>
<tr>
<td>Not convenient to participate</td>
<td>26%</td>
</tr>
<tr>
<td>Was not worth the amount of time required</td>
<td>13%</td>
</tr>
<tr>
<td>Did not really know enough about it or what I had to do</td>
<td>13%</td>
</tr>
<tr>
<td>My job/role prevented me from participating</td>
<td>10%</td>
</tr>
<tr>
<td>Was too complicated or took too many steps to participate or complete</td>
<td>8%</td>
</tr>
<tr>
<td>No one else I know was participating</td>
<td>5%</td>
</tr>
<tr>
<td>My manager/management did not want me to participate or did not allow me to participate</td>
<td>2%</td>
</tr>
</tbody>
</table>

By far, the number one reason consumers would not participate in a wellness program is that it is not relevant to them or does not apply to their situation.

Fortunately, most consumers do not see their job/role or manager/management getting in the way of being able to participate in a wellness program.

Hispanic (19%), union (17%) and those in weak cultures of health (19%) are more likely to say their job/role prevents them from participating.

Consumers under age 30 are more likely to cite “no one else I know was participating” (11%) as a reason.

Compared to all respondents, when it comes to reasons for not participating, relevance is particularly important to consumers in the Leading the Way segment (58% vs. 46%). Convenience is more important to Get Through The Day than to all respondents (58% vs. 26%), I Need a Plan (58% vs. 26%) and Value Independence (31% vs. 26%).
Wellness Programs

“Financial rewards and convenience make general wellness programs most appealing.”

Most Appealing Features of a General Wellness Program (select up to three most appealing)

- Financial rewards: 65%
- Easy to do or convenient: 50%
- Access to one-on-one/personal guidance: 26%
- Access to technology to track success: 18%
- Family involvement: 16%
- Friendly competitions against coworkers: 16%
- Group/team activities: 12%

Many consumers cite financial rewards as one of the top three most appealing features of wellness programs, followed by convenience and personal guidance.

Compared to other segments, In It For Fun consumers are more likely to cite friendly competitions as appealing (20%) and less likely to cite financial rewards (59%), while Not Right Now consumers are more likely to cite easy to do or convenient as appealing (60%).
Wellness Programs

“I participate mostly because it supports my goals, is convenient and/or I benefit financially.”

Reasons I Participated in These Programs (select all that apply)

- **To help me better achieve my health goals**: 60% Goals
- **It was easy or convenient to do**: 20% Money
- **To get a financial reward**: 34% Money
- **Seemed like a good thing to do**: 25% Money
- **To avoid higher health costs**: 25% Money
- **It was the right or responsible thing to do**: 22% Money

The top reason for participating in each program is highlighted.

Those employees in strong cultures of health are more likely to cite non-monetary reasons across all programs.
Wellness Programs

“I participate mostly because it supports my goals, is convenient and/or I benefit financially.” (continued)

Reasons I Participated in These Programs (select all that apply)

- To help me better achieve my health goals:
  - Stress: 41%
  - On-site Clinic/Pharmacy: 21%
  - Goals: 33%
  - Advice from a Nurse: 16%
  - On-site Clinic/Pharmacy: 23%
- It was easy or convenient to do:
  - Stress: 59%
  - On-site Clinic/Pharmacy: 43%
  - Goals: 32%
  - Advice from a Nurse: 32%
  - On-site Clinic/Pharmacy: 29%
- To get a financial reward:
  - Stress: 18%
  - On-site Clinic/Pharmacy: 9%
  - Goals: 9%
  - Advice from a Nurse: 14%
  - On-site Clinic/Pharmacy: 12%
- Seemed like a good thing to do:
  - Stress: 35%
  - On-site Clinic/Pharmacy: 24%
  - Goals: 26%
- To avoid higher health costs:
  - Stress: 27%
  - On-site Clinic/Pharmacy: 25%
  - Goals: 25%
  - Advice from a Nurse: 24%
- It was the right or responsible thing to do:
  - Stress: 38%
  - On-site Clinic/Pharmacy: 20%
  - Goals: 20%
  - Advice from a Nurse: 27%
**Wellness Programs**

“I’m more inclined to say ‘forget it’ if there’s no financial reward.”

Employers that provide incentives are setting the expectation that there will be a financial reward for participating in certain wellness programs. While 38% of consumers say they would participate in a blood draw just for the benefit of doing it (no financial reward), that percentage is significantly down from last year when it was nearly half (49%), perhaps indicating consumers are getting used to receiving incentive rewards, similar to retail sale behavior.

### Incentive It Would Take to Get Me to...

<table>
<thead>
<tr>
<th>Activity</th>
<th>Would Do Just for Benefit of Doing It</th>
<th>Would Never Do Regardless of Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have my blood drawn (during work hours) and tested for cholesterol, glucose and other important health measures</td>
<td>38%</td>
<td>9%</td>
</tr>
<tr>
<td>Participate in a medically sponsored program to help me manage a medical condition I have</td>
<td>36%</td>
<td>11%</td>
</tr>
<tr>
<td>Participate in fitness program two or three days/week or one hour during non-work hours</td>
<td>32%</td>
<td>10%</td>
</tr>
<tr>
<td>Talk to a health coach (during work hours) to create a plan for lifestyle changes to maintain or improve my health and have periodic check-in</td>
<td>30%</td>
<td>13%</td>
</tr>
<tr>
<td>Complete a confidential 15- to 20-minute online questionnaire (during work hours) that asks about my health and lifestyle</td>
<td>28%</td>
<td>9%</td>
</tr>
<tr>
<td>Participate in a healthy eating or weight management program</td>
<td>24%</td>
<td>14%</td>
</tr>
<tr>
<td>Participate in a company competition for weight loss, physical activity or other health-related outcome or activity</td>
<td>20%</td>
<td>15%</td>
</tr>
</tbody>
</table>

A third or more say they would participate in these programs just for the benefit of doing it with no financial reward.

Depending on the program, 15% or fewer of consumers outright refuse to participate, regardless of the reward’s value.
Wellness Programs

“I’m more inclined to say ‘forget it’ if there’s no financial reward.” (continued)

Incentive It Would Take to Get Me to...

<table>
<thead>
<tr>
<th>Activity</th>
<th>$1–50</th>
<th>$51–150</th>
<th>$151–300</th>
<th>$301+</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have my blood drawn (during work hours) and tested for cholesterol, glucose and other important health measures</td>
<td>24%</td>
<td>13%</td>
<td>8%</td>
<td>9%</td>
</tr>
<tr>
<td>Participate in a medically sponsored program to help me manage a medical condition I have</td>
<td>21%</td>
<td>13%</td>
<td>8%</td>
<td>10%</td>
</tr>
<tr>
<td>Participate in fitness program two or three days/week or one hour during non-work hours</td>
<td>20%</td>
<td>16%</td>
<td>10%</td>
<td>12%</td>
</tr>
<tr>
<td>Talk to a health coach (during work hours) to create a plan for lifestyle changes to maintain or improve my health and have periodic check-in</td>
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<td>16%</td>
<td>8%</td>
<td>9%</td>
</tr>
<tr>
<td>Complete a confidential 15- to 20-minute online questionnaire (during work hours) that asks about my health and lifestyle</td>
<td>35%</td>
<td>14%</td>
<td>7%</td>
<td>8%</td>
</tr>
<tr>
<td>Participate in a healthy eating or weight management program</td>
<td>21%</td>
<td>17%</td>
<td>11%</td>
<td>12%</td>
</tr>
<tr>
<td>Participate in a company competition for weight loss, physical activity or other health-related outcome or activity</td>
<td>22%</td>
<td>17%</td>
<td>12%</td>
<td>14%</td>
</tr>
</tbody>
</table>

A little can go a long way. Often a reward value of $50 or less will appeal to most consumers (who most likely were not offered an incentive in the past).
Health Plans
Show consumers how to translate their health plan cost knowledge into real-life consumer behaviors.

Consumers’ Advice for Employers
“Provide an easy-to-read and understandable flow chart of all aspects of my health insurance.”

“Help me with the hardest thing about managing my health account, which is figuring out how to manage my health care and the related costs overall.”

Unpack the Experience.

Unleash the Possibilities.

Give Just-in-Time Guidance
Start with what consumers want most: timely, practical guidance in choosing and using their health plans. Use channels like mobile, social, email and texting to give them tips for avoiding common mistakes and taking control of their health and their costs.

Show employees and their families how to easily connect with the tools, coaching and advocacy services you offer. Helping the right people find the right resources at the right time (like when they’re sitting in their doctor’s waiting room) increases their appreciation for the company’s investment.

Show Them the Money
Show consumers how to use simple cost transparency and comparison tools that will help them be smarter in-the-moment health shoppers. Understand that shopping for health care is a new consumer skill that needs to be taught—but it can pay off in a big way.

Carefully think through your communication approach for any health-related accounts you offer. Make them alarmingly simple to set up and use. Include tips from current users at the beginning of the plan year (when they tend to forget what they signed up for) and reminders on how to use the account wisely during the year.

Nudge Them
Consumers with HDHPs can take control of their costs by becoming more savvy health shoppers. But at first they may be passive because they’re not sure what to do.

Nudge your HDHP members—as well as members of your other health plans—by promoting healthy behaviors. Use communication tactics like health games, tip sheets, opt-in text message reminders and testimonials of their coworkers’ success.
“Though I have fewer options to choose from, I’m satisfied with my health plan.”

Most consumers (76%) continue to have more than one employer-provided health plan option to select from during annual enrollment. However, many say they have fewer choices than in the past. Nearly four out of five (78%) say they have three or fewer plans from which to choose—compared with 59% last year. However, if an option, most consumers (90%+ regardless of plan) will definitely or probably re-enroll in the plan they have now. While they could be keeping it because they’re satisfied, sometimes they’re simply allowing inertia to decide for them.

Consumers in HDHPs are less likely to be satisfied relative to those in other plan types. While they typically pay less from their paychecks (premiums) for these plans, they need to be more involved in managing their care.
Health Plans

“Being in an HDHP does change my health behaviors—mostly for the better.”

Just under three-quarters (71%) of consumers continue to say they take certain actions more often since enrolling in an HDHP—some that likely improve their health, others that may not. By far, figuring out how much to put in a health savings account (HSA) is viewed as the hardest part of managing an HSA, with half (51%) reporting that struggle.

**Actions I Take More Often Since Enrolling in My HDHP***(select all that apply)*

<table>
<thead>
<tr>
<th>Action</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Get routine preventive care</td>
<td>31%</td>
<td>28%</td>
<td>30%</td>
</tr>
<tr>
<td>Sacrifice care</td>
<td>17%</td>
<td>25%</td>
<td>25%</td>
</tr>
<tr>
<td>Seek lower-cost options</td>
<td>30%</td>
<td>33%</td>
<td>23%</td>
</tr>
<tr>
<td>Postpone care</td>
<td>21%</td>
<td>21%</td>
<td>23%</td>
</tr>
<tr>
<td>Make healthy choices</td>
<td>15%</td>
<td>19%</td>
<td>19%</td>
</tr>
<tr>
<td>Research health costs</td>
<td>19%</td>
<td>14%</td>
<td>17%</td>
</tr>
<tr>
<td>Research plan information</td>
<td>12%</td>
<td>13%</td>
<td>7%</td>
</tr>
<tr>
<td>Research care quality</td>
<td>6%</td>
<td>6%</td>
<td>8%</td>
</tr>
</tbody>
</table>

Many consumers say they take positive actions more often since enrolling in an HDHP. However, about one-quarter say they postpone or sacrifice care, which may or may not be appropriate for their long-term health.

Some differences across the years are most likely due to the fact that more consumers have experience with HDHPs and the way these plans work has become the “new normal.”

Females are more likely than males to say they more often sacrifice care (29% versus 18%), seek lower-cost options (27% versus 17%) or postpone care (27% versus 13%) since enrolling in their HDHP. Because these behaviors are more often associated with obtaining health services (versus researching), women may be in these situations more often since they are more likely to “own” their family’s health care.

*Among consumers enrolled in an HDHP
Health Plans

“I’m still not sure how much health care costs my employer, but I do know what it costs me.”

Actual Health Care Costs

<table>
<thead>
<tr>
<th>Perceived Amount My Employer Contributes Annually to My Health Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; $1,000</td>
</tr>
<tr>
<td>$1,000–$2,499</td>
</tr>
<tr>
<td>$2,500–$4,999</td>
</tr>
<tr>
<td>$5,000–$7,499</td>
</tr>
<tr>
<td>$7,500–$9,999</td>
</tr>
<tr>
<td>$10,000–$12,499</td>
</tr>
<tr>
<td>$14,500+</td>
</tr>
<tr>
<td>Don’t know</td>
</tr>
</tbody>
</table>

Average estimate: $6,240 (24% below actual average, $8,168)

Big improvement! Last year, consumers missed the actual by 50%.

Approximately one-third of consumers won’t venture an estimate of the employer share of health care costs.

Perceived Amount I Spent on Health Care in the Last Year

<table>
<thead>
<tr>
<th>Perceived Amount I Spent on Health Care in the Last Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; $1,000</td>
</tr>
<tr>
<td>$1,001–$2,500</td>
</tr>
<tr>
<td>$2,501–$5,000</td>
</tr>
<tr>
<td>$5,001–$10,000</td>
</tr>
<tr>
<td>&gt; $10,000</td>
</tr>
<tr>
<td>Don’t know</td>
</tr>
</tbody>
</table>

Average estimate: $2,570 for out of pocket (115% of actual average, $2,239)

Pretty close! Consumers know what they’re paying.

11% refuse to venture an estimate.

*2013 average projected health care cost per employee based on Aon Hewitt Health Value Initiative database representing 1,200 health plans and $61.2 billion in 2013 health care spending
Communication Channels
Use an array of high-tech and high-touch communication channels.

Maximize Multiple Channels
Develop a practical health communication strategy each year that uses an array of effective channels. Deliver your communication through sources consumers have come to expect—starting with your wellness/benefits team, even if it didn’t create the communication.

To drive the actions most critical to your organization, personalize the communication—particularly when guiding consumers to choose their health plan, participate in a particular program or make smarter daily choices in a certain area.

Prioritize Mobile and Social
What do personal health and a mobile device have in common? People possess them 24/7. Continue to find more ways to give your people health tools, guidance and motivational nudges through the device that never leaves their side—through mobile-friendly websites, apps and targeted texting.

Pilot social channels like blogs geared to people with a certain health condition, location-based tools like Foursquare and media-sharing sites like Pinterest. Also consider short-form video sharing services like Vine, particularly for younger consumers. These channels can effectively engage consumers both physically and emotionally in health campaigns.

Promote Select Websites and Apps
Vet and promote a select list of external health websites and mobile apps that are credible, simple and engaging to support behaviors you want more of in your population.

Get consumers in the game by soliciting and promoting their favorite websites. Then, change up your list regularly to take advantage of the latest and greatest.

Consumers’ Advice for Employers
“Tailor health information to the appropriate people. Health care is not one size fits all.”

“Make a visible effort to show that you really care about employee health issues.”
Even though it’s the channel they say employers use most often, email is not always the channel that consumers prefer. Most notably, consumers often prefer to receive non-personal health information through **external websites**.

Compared to other information types, more consumers prefer to receive personal wellness information through **email** and **postal mail**, which are typically more secure channels.

Those **under age 30** are more likely to say **intranet/internal websites** are the second choice preference for personal wellness information. However, those **over age 50** are more likely to view **postal mail** as their second choice for health plans and health care provider information.

Consumers earning **less than $50,000 annually** cite **postal mail** to home as their second most preferred channel for general wellness information.
**Communication Channels**

"I’m much more likely to be using mobile apps than I was last year."

Seventy nine percent of consumers regularly use at least one social media platform or mobile application, up from 71% last year. Among regular users, at least 50% use community boards/blogs, Foursquare, Pinterest and mobile apps at least monthly for health and wellness activities. About one-quarter of regular users are using media channels as often as weekly for health and wellness efforts, activities, tracking or information—including mobile apps, Facebook, Twitter, community interest blogs or message boards and Pinterest.

<table>
<thead>
<tr>
<th>Regularly Use Overall</th>
<th>Use at Least Monthly for Health and Wellness*</th>
<th>Never Use for Health and Wellness*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facebook, My Space or similar social network</td>
<td>60%</td>
<td>40%</td>
</tr>
<tr>
<td>Mobile applications (apps) for smartphone or tablet</td>
<td>37%</td>
<td>50%</td>
</tr>
<tr>
<td>Groupon, Living Social or similar site</td>
<td>30%</td>
<td>36%</td>
</tr>
<tr>
<td>LinkedIn or similar professional network</td>
<td>23%</td>
<td>34%</td>
</tr>
<tr>
<td>Twitter or similar posting network</td>
<td>16%</td>
<td>45%</td>
</tr>
<tr>
<td>Pinterest or other media-sharing network</td>
<td>16%</td>
<td>54%</td>
</tr>
<tr>
<td>Community/interest blogs or message boards</td>
<td>8%</td>
<td>57%</td>
</tr>
<tr>
<td>Foursquare or other location-based social network</td>
<td>5%</td>
<td>55%</td>
</tr>
</tbody>
</table>

*Among regular users of these channels, those who use these channels at least weekly for health and wellness efforts, activities, tracking or information.

Don’t expect everyone to get on board. A substantial number of consumers say they will not use social media for health and wellness.

Year

Nearly twice as many consumers are using mobile apps (37% versus 19%) and Pinterest (16% versus 9%) as they were last year.
The employer communicates through a variety of channels—most often email.

Ways Employer Communicates Health-Related Information* (select all that apply)

- Email
- Benefits enrollment website
- Mailings to home
- Intranet/internal website
- Mailings to work location
- In-person meetings
- Publicly available website
- Webinars
- Contests
- Social network sites (internally available)
- Videos
- Social network sites (externally available)
- Games
- Text messages

*Among consumers who report the employer communicates health-related information to them
“I prefer tools from my employer that help me choose the best health plan.”

Virtually all the consumers surveyed receive some type of health-related information from their employers. Still, only three-quarters of consumers (75%) report that they do. The good news is that this is an increase from last year when only two-thirds (66%) said they received health-related information. In particular, they are more likely to receive information about choosing a health plan. In general, they prefer communication that offers more personalized guidance and help.

Health-related Information I Receive From the Employer (select all that apply)

Tools and Information I Find Most Helpful (ranked 1, 2 or 3)

Consumers over age 60 are more likely to value health plan decision tools (66%). Those under age 30 are more likely to value general wellness information (63%) and cost clarity tools (60%).
"I prefer to receive health information from my wellness/benefits department."

Source From Which I Prefer to Receive This Communication Channel* (in order of preference)

<table>
<thead>
<tr>
<th>Communication Channel</th>
<th>Wellness/ Benefits Department</th>
<th>HR Representative</th>
<th>Independent, Outside Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>External website</td>
<td>1</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Intranet/internal company website</td>
<td>1</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Text message*</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Well-designed email</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Mobile phone application</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Postal mail to home</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Postal or interoffice mail to work location</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Voice mail*</td>
<td>2</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Short videos</td>
<td>1</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>In-person meeting or health fair</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Webinar</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Following company-specific Twitter feed*</td>
<td>1</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Becoming a fan of company-specific Facebook page and getting updates</td>
<td>1</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Becoming a fan of internal company social network and getting related updates</td>
<td>2</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>A blog with key updates</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

*Not reflected on chart: #2 preference for text is immediate manager, #3 preference for voice mail is immediate manager, and #3 preference for Twitter is trusted coworkers. Preferred channel source for text message and Twitter is tied.
The primary source of data for this study comes from a survey administered online within the United States in August and September 2013. A diverse group of 2,732 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 (with 1,000 employees or more), types of health plans and health conditions.

### Gender

- Male: 45%
- Female: 55%

### U.S. Region

- Northeast: 24%
- Midwest: 21%
- South: 36%
- West: 24%

### Age

- 23–29: 13%
- 30–39: 24%
- 40–49: 28%
- 50–59: 23%
- 60–65: 12%

### Job Status of Covered Employee

- Full-time: 77%
- Part-time: 7%
- Full-time homemaker: 7%
- Temporarily unemployed: 4%
- Full-time student: 2%
- Retired: 3%
- Disabled: 1%

### Race

- White: 70%
- Hispanic: 8%
- African-American: 6%
- Asian: 2%
- Other: 14%
About Aon Hewitt

Aon Hewitt empowers organizations and individuals to secure a better future through innovative talent, retirement and health solutions. We advise, design and execute a wide range of solutions that enable clients to cultivate talent to drive organizational and personal performance and growth, navigate retirement risk while providing new levels of financial security, and redefine health solutions for greater choice, affordability and wellness. Aon Hewitt is the global leader in human resource solutions, with over 30,000 professionals in 90 countries serving more than 20,000 clients worldwide.

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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.

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