Webinar

Employer Implementation of a CDC-Recommended Physical Activity Program

Improve Productivity & Reduce Pain for People with Musculoskeletal Conditions

A Collaboration between the National Association of Chronic Disease Directors, MedWorks Consulting, the Greater Philadelphia Business Coalition on Health, and the Health Promotion Council
Broad Definition of the Condition

**Arthritis = Musculoskeletal Pain**

Managing pain & stiffness in the workplace improves productivity & reduces costs.
Growing Problem Impacting Workforces

22.7% of Adults
Nationwide, Musculoskeletal #3 Overall Cost

“Musculoskeletal”

Also a Significant Comorbidity
Obesity 31%
Diabetes 47%
Heart Disease 49%
Significant Loss of Productivity

Large Studies

- **Journal of Occupational and Environmental Medicine: July 2011**
  - 30,868 employees, aged 20 to 64 in the study
  - 2,670 with arthritis
  - 4,920 with back pain
  - 439 with fibromyalgia
  - 8,029 Total (26% of total)

- **Study Summary:**
  - Musculoskeletal conditions are highly prevalent and have a clinically meaningful higher productivity loss even after adjusting for demographic and health characteristics

- **Journal of the American Medical Association: 2003**
  - Explored pain conditions’ adverse effect on work
  - Random sample of 28,902 working adults
  - Measured loss of productive hours in a two week period
  - 7.2% of the population experienced arthritis, back and musculoskeletal pain

- **Results**
  - Workers experienced 5.2 hours per person per week in lost productivity due to these conditions (or **10,820 total hours of lost productivity**)
  - Projected to be 21.6 days in lost productivity annually per person

Source:
- [https://journals.lww.com/joem/Abstract/2011/07000/Musculoskeletal_Pain_in_the_Workforce_The_Effects.12.aspx](https://journals.lww.com/joem/Abstract/2011/07000/Musculoskeletal_Pain_in_the_Workforce_The_Effects.12.aspx)
- [https://jamanetwork.com/journals/jama/fullarticle/197628](https://jamanetwork.com/journals/jama/fullarticle/197628)
Musculoskeletal Pain Symptoms and Treatments

- **Symptoms**
  - Pain
  - Sleep Disturbances
  - Fatigue

- **Treatments**
  - Variety of pain meds
    - (NSAIDs)
  - Exercise including
    - Massage
    - Chiropractic Care
    - Osteopathic Manipulation
  - Relaxation
  - Acupuncture

CDC’s Lifestyle Change Focus is on increased exercise. Increased exercise benefits other conditions as well.
Walk with Ease
An Effective Affordable Program

• Developed by the Arthritis Foundation
  – 5th Edition
• CDC-endorsed
  – One of the US Centers for Disease Control and Prevention (CDC) Arthritis Appropriate Evidence Based Interventions (AAEBI's)
• *Walk with Ease* has been shown to:
  – Reduce the pain and discomfort of arthritis
  – Increase balance, strength, and walking pace
  – Build confidence in participants’ ability to be physically active
  – Improve overall health & quality of life
• Available in a coach-led or self-directed format
Walk with Ease

Program Content and Focus

**Program content**

- Health education
- Proper exercise for comfort & safety
- Stretching & strengthen exercises
- 10-35 minutes of walking
- Tips and tools for staying motivated
- Self-management tools
Recommending

Enhanced Self-Directed Walk with Ease

• **Built around proven self-directed content**
  – Clinically effective based on review by the CDC
  – Manual is inexpensive and it is a one time per participant not a recurring per member cost

• **Flexible**
  – Target larger audience: exercise is beneficial for any sedentary person
    • Arthritis Foundation / Johns Hopkins Study WWE appeals to all fitness levels.
  – Alternative media possible: CDC-assessed coach led option is available
  – Offered as a standalone solution or as an enhancement to existing programs
  – **Staffing options**
    • Existing internal or external staff can be trained as Walk with Ease Coaches
    • Third-party support via the Health Promotion Council (HPC) and others in place
  – Variety of options available for participant accountability

• **Part of CDC efforts to standardize and optimize lifestyle change programs**
Example Walk with Ease Design Process

Customized for your benefit plan

Define & Identify Eligible Population
- Employees and their adult dependents?
- Musculoskeletal only or other sedentary individuals?
- Analytic identification?
- Voluntary enrollment?
- Added intervention to an existing offering?

Engage Eligible to ID Participants
- Integrate with existing member engagement options
  - Blast emails or other tech processes
  - Awareness briefings.
  - Worksite clinics or occupational health identification.

Mailing List & Book Distribution
- Internal & External Options
  - Individuals Mailing
  - Manual distribution

Self-Directed Effort with Follow-up
- Passive and active planned follow-up.
  - Scheduled in-person or by phone follow-up.
  - In place onsite meetings

Reporting & Analysis
- Existing survey formats
Example #1

- Organization with about 5,000 employees in 14 States
  - Participation limited to the first 250 participants (target met)
  - Expanded targeted population to include multiple conditions
  - Completion incentive offered
- Internal promotion by the organization
  - Blast email and newsletter information
  - Material included an active link to HPC for information and engagement
- HPC Support included
  - The active link, dedicated phone number, and email access for employee engagement with HPC
  - HPC captured personal information, distributed the manuals with instruction sheet
  - HPC positioned to do active and passive follow-up with participants
- Overall results are pending
Example #1

- Organization with ~5,000 employees in 14 states
  - Participation limited to the first 250 participants (target met)
  - Targeted employees with a variety of conditions
  - Completion incentive offered

- Promotion
  - Blast email and newsletter information
  - Active link in emails to HPC (for more information and engagement)

- Participant engagement
  - Active link, text, email allowed employees to engage with HPC
  - HPC captured personal information, and distributed WWE manuals with instruction sheets
    - Instruction sheets requested participant to complete three surveys with a third party using a code for anonymity
    - HPC positioned to do both active and passive follow-up

- Overall results pending
Example #2

- Organization with 21,500 employees
  - WWE added to an ongoing worksite wellness program in 2015
    - 3,070 participants between 2015-2017
    - Multiple conditions (76% musculoskeletal)
    - Health insurance premium discount as an incentive

- Participants identified via a variety of screening processes

- Self-directed WWE participants walked on their own but communicated with a trainer by email weekly

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**Walk with Ease Self-Directed Worksite Wellness**

A higher percent of participants were physically active (for at least 30 minutes per week) AFTER the Walk with Ease program compared to **BEFORE**, while a lower percent of participants reported high levels of fatigue (levels of 4 and above on a 0-10 scale).

**Highlights:**
- Walk With Ease Self-Directed is a six-week fitness program founded by the Arthritis Foundation.
- At the end of the six-week walking program, 98% of participants were walking for at least 30 minutes.
- Participants also increased stretching and other aerobic exercise and decreased fatigue.
Delivery Process Support

Define & Identify Eligible Population

Engage Eligible to ID Participants

Mailing List & Book Distribution

Self-Directed Effort with Follow-up

Reporting & Analysis

MedWorks Consulting

PHMC/Health Promotion Council Option

PHMC/OAAA/GPBCH Multiple Options
Next Steps / Follow-up

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