

WHY HEALTHY EMPLOYEES DON'T NEED YOUR WELLNESS PROGRAM

Harsh truth time:

The marathon runner in marketing doesn't need your wellness program. The CrossFit enthusiast in accounting doesn't need nutrition education. The yoga instructor who works in HR is already doing great.

Your wellness budget shouldn't chase these people.

Because 75% of your healthcare costs come from employees with chronic diseases—diabetes, hypertension, obesity, high cholesterol. That's where the money is. That's where the ROI lives.

The Lifestyle 180 program was built around this principle.



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The 80/20 Rule of Healthcare Costs

The reality of healthcare spending:

- 20% of your employees drive 80% of your healthcare costs
- That 20% predominantly has chronic, preventable diseases
- Most are managing (or not managing) multiple conditions simultaneously

Lifestyle 180's strategic focus:

Lifestyle 180 targeted people with:

- Morbid obesity (BMI 40+)
- Type 2 diabetes or pre-diabetes
- High blood pressure
- High cholesterol
- Multiple chronic conditions

Not "anyone who wants to get healthy." People whose health issues cost serious money.

What "High-Risk" Actually Means

High-risk doesn't mean sickest. It means highest cost and highest potential for improvement.

The sweet spot employees:

- Currently manageable chronic conditions (not end-stage)
- On expensive medications (that might be reduced)
- At risk for progression (that can be prevented)
- Motivated to change (they know things aren't sustainable)

Example: Pre-diabetic employee

Current state:

- A1C: 6.2 (pre-diabetic range)
- Weight: 220 lbs (should be 170)
- On metformin
- Annual cost: \$3,000

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Without intervention:

- Progresses to full diabetes in 2–3 years
- Needs insulin plus multiple medications
- Annual cost grows to \$8,000–\$12,000
- Risk of complications skyrockets

With intensive intervention:

- Loses 30 pounds
- A1C drops to 5.6 (normal)
- Eliminates metformin
- Annual cost: \$500
- 5-year savings: \$30,000–\$50,000

That employee's wellness program participation is worth 30–50x more than the marathon runner's.

How to Identify Your High-Risk Population

Data sources you already have:

1. Health insurance claims

- Chronic disease diagnoses
- Expensive medication fills
- Frequent specialist visits
- Multiple ER visits or hospitalizations

2. Biometric screening results

- BMI 30+ (obese) or 40+ (morbidly obese)
- Blood pressure 140/90+
- LDL cholesterol 130+
- Fasting glucose 100+ or A1C 5.7+
- Waist circumference (men >40", women >35")

3. Health risk assessments

- Self-reported chronic conditions
- Family history of disease
- Smoking status
- Stress levels
- Sleep quality issues

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Combine these to create risk tiers:

Tier 1: Immediate Priority (15–20% of population)

- Multiple chronic conditions
- High medication costs
- Recent hospitalizations
- Morbidly obese with comorbidities

Tier 2: Moderate Risk (25–30% of population)

- Single chronic condition or multiple risk factors
- Pre-disease states (pre-diabetes, pre-hypertension)
- Overweight with family history
- Tobacco users

Tier 3: Low Risk (50–60% of population)

- Healthy or well-managed single condition
- Normal biometrics
- Good health behaviors

Focus 80% of your intensive program resources on Tier 1 and 2.

The Outreach Strategy That Works

Generic email blast: "Join our wellness program!" Response rate: 5–8%

Targeted, personal outreach: "Your recent health screening showed some concerning trends. We have a program specifically designed to help. Can we talk?" Response rate: 40–60%

Lifestyle 180's approach:

01. Use clinical language, not marketing speak

- "Your A1C of 6.4 puts you at high risk for type 2 diabetes"
- Not: "Join our fun wellness challenge!"

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02. Make it personal

- Individual invitations from medical staff
- Reference specific health data
- Explain personal risk and benefit

03. Remove every barrier

- Free program
- During work hours
- Transportation if needed
- One-on-one enrollment support

04. Create peer support

- Invite entire departments together
- Allow colleagues to co-enroll
- Build accountability partnerships

An approach that proved successful in the Lifestyle 180 program: department-based enrollment. When entire teams enrolled together (like the security department mentioned in the TIME article), that peer support made all the difference.

What High-Risk Programs Must Include

Surface-level wellness doesn't work for chronic disease. You need intensive, medically-integrated intervention:

Medical oversight:

- Baseline and ongoing lab work
- Medication review and optimization
- Coordination with primary care providers
- Regular biometric monitoring

Intensive education:

- Disease-specific nutrition guidance
- Medication management training
- Complication prevention
- Self-monitoring techniques

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Behavioral support:

- Professional health coaching
- Cognitive behavioral therapy for eating/activity
- Stress management
- Group support sessions

Long-term follow-up:

- Regular check-ins for 12+ months
- Medication adjustment as health improves
- Relapse prevention
- Continued access to resources

This is why Lifestyle 180's 48-hour program over 6 weeks was successful. You can't reverse chronic disease in a lunch-and-learn.

The Results Speak For Themselves

Lifestyle 180 outcomes:

114 high-risk participants:

- 9+ pounds lost (average)
- 3+ inches off waistlines (average)
- 20-point LDL cholesterol reduction (average)
- 25% reduced or eliminated medications

Financial impact:

- 5 employees avoided dialysis = \$50,000 annual savings
- Average savings per participant: \$5,000-\$10,000 annually
- Program cost per participant: \$1,500

ROI: 233% to 567% in year one alone

This is what happens when you focus resources where they matter most.

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The Equity Argument

"But isn't it unfair to give intensive support to some employees and not others?"

No. It's strategic.

Firefighters don't spray water equally on every building. They focus on the ones on fire.

However, make programs available to all tiers:

Tier 1: Intensive program (48 hours, medical oversight, full support)

Tier 2: Moderate program (16–24 hours, health coaching)

Tier 3: Maintenance programs (workshops, fitness classes, resources)

Everyone gets something. High-risk employees get what they actually need.

THE BOTTOM LINE



The Lifestyle 180 program strategically focused intensive support on employees whose health problems were driving costs, rather than spreading resources evenly across all employees.

This isn't mean. It's smart.

Your marathon runner doesn't need a \$1,500 chronic disease management program. Your pre-diabetic employee with high blood pressure absolutely does.

One prevents a future problem. One solves a current problem generating massive costs.

Focus on the 20% driving 80% of costs. Give them intensive, medically-sound interventions. Track the ROI. Watch premiums stabilize.

Your healthy employees will be fine with gym memberships and yoga classes.

Your high-risk employees need—and deserve—much more.

That's where you invest. That's where you win.