



Retaining Employees in Your Worksite Wellness Program



A Focus on Employees with Disabilities

More employees than you realize have disabilities. In fact, more than 6 million U.S. workers have one or more disabling conditions.ⁱ In addition, some employees may not have a disability when they start working, but develop chronic conditions such as lower back pain or diabetes as they age.

Health and wellness issues are important for employees with disabilities because they are more likely than their coworkers to have secondary conditions.ⁱⁱ Wellness programs benefit employees with disabilities as much as other employees.

With the right program accommodations and incentives, you can work with all employees to increase enrollment in your worksite wellness program, improving employees' health and your company's bottom line.



"Individuals with disabilities...need health care and health promotion programs for the same reasons we all do: to stay well, to be active and to participate in community life."

2005 Surgeon General's Call to Action to Improve Health and Wellness for Persons with Disabilities

<http://www.surgeongeneral.gov/library/disabilities/index.html>



Photo: New York State Disability and Health Program

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Toolkit At-A-Glance

Involve employees with disabilities in discussions about your wellness plan. Work with this group to design relevant program accommodations and incentives.

Develop creative incentive plans that can engage employees with disabilities without violating HIPAA or ADA regulations.

Prepare for employees aging into disability status by instituting relevant programs and accommodations now.

Encourage employees with disabilities to voluntarily participate in Health Risk Assessments (HRAs). HRAs have proven to be effective in motivating employees to change their lifestyle behaviors and improve their health status.



Worksite wellness programs are proven to reduce absenteeism, improve employee productivity and increase your company's bottom line. But are you really reaching all eligible employees with your current program? By diversifying and strengthening your wellness activities to involve and accommodate employees with disabilities, you can take worksite wellness to the next level and maximize your return on this key investment.



Keep Employees on the Job and Healthy

Being active in worksite wellness programs can help employees with disabilities or aging employees stay in their jobs longer by delaying, or even preventing, secondary conditions like diabetes and heart disease. Health risk assessments (HRAs) and typical worksite wellness activities like smoking cessation or weight management programs have been successful in helping prevent conditions that can force people out of the workforce.

Employers often **work with employees to modify worksite wellness activities** to meet their needs and help them stay healthy and active. Working directly with your employees with physical and cognitive disabilities will help you understand their health and wellness needs, and tailor your programs to maintain and even increase participation.



Exploring the Wellness Needs of Employees with Disabilities

Organize a meeting or advisory group of employees with physical and/or cognitive disabilities and their supporters to get their input on your wellness programs. Involve employees with disabilities in existing advisory groups or decision making bodies that influence your wellness programs.



Getting the message out that anyone can participate in a worksite wellness program is key to involving employees with disabilities. The New York State Department of Health, Disability, and Health Programs (<http://www.health.state.ny.us/nysdoh/prevent/main.htm>) suggests the following steps:

Using images of persons with disabilities alongside their peers with and without disabilities in program materials.

Ensuring announcements and literature are available in a variety of formats (e.g., large print, audio, graphic or picture-based, Braille, accessible electronic format).

Engaging in one-on-one interactions, inviting employees with disabilities to help plan activities, and providing easy access for your employees to communicate with you about what they need.ⁱⁱⁱ

Diversify & Strengthen Your Worksite Wellness Activities

Despite the benefits of wellness programs, the participation rate of people with disabilities in worksite wellness programs has traditionally been low. **Creative program accommodations and incentives, especially ones developed in partnership with employees with different types of disabilities**, are important ways of increasing participation in your program and ultimately retaining employees with disabilities in your workplace.

Designing Incentives & Accommodations

- Consider incentives that reward people with a variety of abilities.
- Offer alternative wellness activities and programming wherever possible to accommodate all employees.
- Involve employees with disabilities in designing new incentives and accommodations.

Vanderbilt University's Go for the Gold Program

<http://www.vanderbilt.edu/HRS/wellness/hpgftg.htm>

Vanderbilt's award winning program has made the following accommodations to their worksite wellness program for employees who need them:

One-on-one assistance with written and online materials for employees with visual impairments and/or low literacy skills;

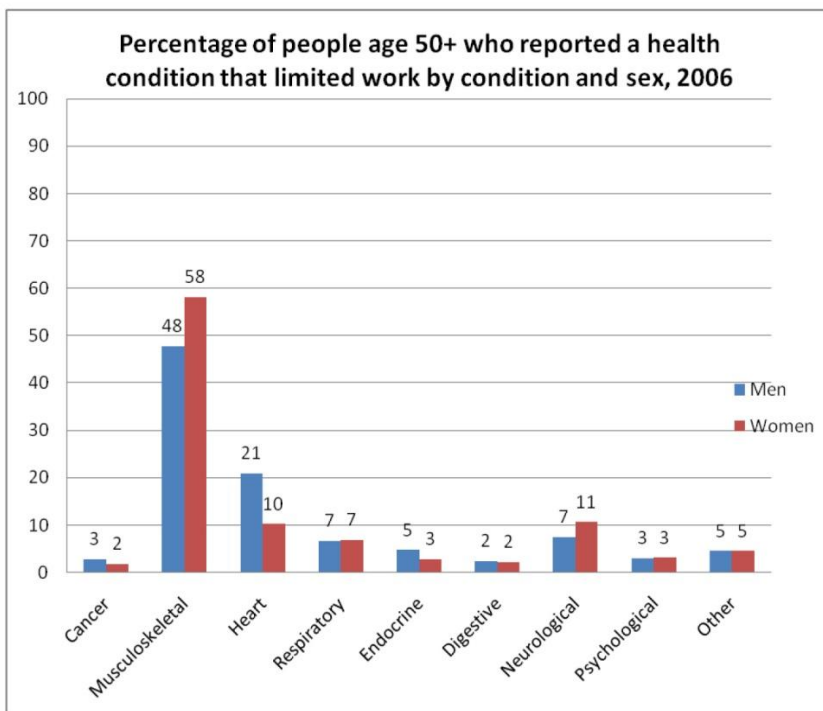
Individual help sessions with all program components, including fitness associates;

Podcasts and videos of all in-person presentations; and

Changes to the running club for a visually impaired runner.

Aging Into Disabilities in the Workplace

As employees stay in the workforce longer, more and more of them age into chronic conditions that can become disabilities. In fact, data from the Health and Retirement Study (<http://hrsonline.isr.umich.edu/>), funded by the National Institute on Aging, shows that between 1992 and 1996, more than one-half of men and one-third of women who left the labor force before age 62 did so because of health limitations. The largest reported causes of people age 55-64 who were not working were arthritis and other musculoskeletal conditions, cardiovascular conditions, neurological problems, and allergies and respiratory problems.^{iv} These numbers show that **employers need to find new ways to keep their employees healthy and productive for the entire lifecycle of employment.**



Source: Health and Retirement Study, National Institute on Aging

The Best Accommodations for Older Employees

Finding ways to encourage older employees to maintain their participation in worksite wellness programs presents a challenge that more and more program administrators are facing. An emerging trend is for employers to **modify worksite wellness programs to meet the needs of older employees**. Wellness program accommodations for younger employees with disabilities also may help aging employees.

Common Worksite Accommodations:

- Appointing an assistant,
- Changing work times,
- Adding more breaks, and
- Changing type of job.

Other accommodations include providing special transportation, using special equipment, and offering rehabilitation services.

Key Health Promotion Program Areas:

- Arthritis
- Hypertension
- Heart disease
- Neurological issues

Staying Compliant: Legal Regulations that Affect Your Wellness Programs

Depending on the way your worksite wellness program is structured, different federal regulations may apply.¹ Regulations imposed by the Health Insurance Portability and Accountability Act (HIPAA), Americans with Disabilities Act (ADA), and other federal laws that prevent discriminatory practices may limit the kinds and types of worksite wellness program incentives that you can offer your employees. Although offering larger or better incentives might encourage more employees with disabilities to participate in your program, it is important to check federal regulations first for compliance.

The Effects of HIPAA on Worksite Wellness Programs

Your wellness program may be subject to either *HIPAA's nondiscrimination rules*, or *HIPAA's privacy rules*.

Nondiscrimination Rules

- Prohibit group health plans from using a health factor as a basis for discrimination with regard to eligibility or premium contributions.
- Employers are not prohibited from establishing discounts or rebates in return for adherence to health promotion and disease prevention programs if, per regulations, certain requirements are met:
 - *Limits on size of incentive reward*: The combined incentive reward amount must not exceed 20% of the total cost of the applicable health plan coverage (i.e., if the reward is available only to employees, then the employee-only cost of health plan coverage is used. If employees and spouses can both qualify for the incentive reward, the total cost of the family coverage can be used in computing the 20% limit).
 - *Programs must promote health and/or prevent disease*: The wellness program must reasonably be capable of improving the health of or preventing disease in participants.
 - *Annual qualification process*: Each similarly situated, eligible individual must have at least an annual opportunity to qualify for the incentive reward.
 - *Offered to all similarly situated individuals*: Includes providing alternative standards and waiver opportunities if it is unreasonably difficult or medically inadvisable for the individual to meet the standard.
- *Full disclosure of alternative standards and waiver opportunity*: Program information and materials need to disclose the availability of alternative standards and the waiver opportunity.

¹ According to Alper (2008), administrators typically structure their worksite wellness programs in one of two ways: As a feature of their group health plan, administered through a third-party administrator or an insurance company, also known as “standard-based”

1. As a “participation only” wellness program not treated as part of the company group health plan

Privacy Rules

- Privacy rules may apply to your program if the wellness plan conducts health risk assessments or otherwise monitors employee health.
- The plan must have policies in place protecting the information and business associate agreements with vendors who provide services to the plan.
- HIPAA privacy rules also prohibit employers from using protected health information for employment-related reasons.

The ADA and Worksite Wellness

The Americans with Disabilities Act prohibits employers from denying participation in or benefits from a worksite wellness program based on a disability. The ADA requires reasonable accommodations for employees with known disabilities to allow them to participate.

Health Risk Assessments (HRAs)

- The ADA prohibits employers from requiring medical examinations like HRAs unless they are job-related.
- Per the U.S. Equal Employment Opportunity Commission (EEOC), an employer may conduct medical examinations and activities that are part of a voluntary wellness and health screening program. A program is voluntary if the employer neither requires participation, nor penalizes employees who do not participate.
- Some employers have experimented with the implementation of mandatory wellness programs. The EEOC has hinted through correspondence that the requirement of mandatory HRAs would be prohibited under the ADA because the process asks about disability-related conditions. This is significant because the ADA restrictions on medical examinations and inquiries apply to all employees, not just those with disabilities.

Encourage employees with disabilities to participate in Health Risk Assessments (HRAs).

HRAs have proven to be effective in motivating employees to change their behaviors and improve their health status. Rather than violate ADA regulations by making HRAs mandatory in order to receive employer-sponsored health insurance, companies should find ways to encourage employees with disabilities to voluntarily participate in HRAs.

Case Study: The ADA and Worksite Wellness

On August 7, 2008, a municipal county employer asked the EEOC whether it could require employees to participate in a clinical health risk assessment (CHRA) as a condition for participating in its self-funded health plan. The CHRA included a short health-related questionnaire, a blood pressure test, and a blood test for use in a blood panel screen. Specific individualized results of the CHRA were given directly and exclusively to the employee and the county only received aggregate information. Employees who refused participation in the CHRA and their dependents were ineligible for county health coverage.

On January 6, 2009, the EEOC issued an informal letter indicating that the county's mandatory CHRA would violate the ADA, although disability-related inquiries and medical examinations as part of a voluntary wellness program generally would not. The EEOC also said that a wellness program would be considered voluntary under the ADA as long as a financial inducement to participate did not exceed 20% of the cost of employee only or employee plus dependent coverage under the plan, consistent with nondiscrimination regulations under HIPAA.^v

Exploring the Wellness Needs of Employees with Disabilities

Removing Barriers: Tips and Strategies to Promote Accessible Communications

<http://www.fpg.unc.edu/~ncodh/htmls/rbtipsandstrategies.htm>

A guide to increasing inclusion of people with disabilities in the workplace and other environments by discussing stigma and myths around disability, and offering communication tips, from the North Carolina Office on Disability and Health.

Guidelines on Including Persons with Disabilities in Advisory Groups

<http://mtdh.ruralinstitute.umd.edu/Publications/Advisory.htm>

Provides great ideas for recruiting people with disabilities for an advisory group or meeting, and tips on how to make your meetings accessible to people with different types of disabilities.

How to Create Effective Health Messages for People with Disabilities

<http://www.health.state.ny.us/nysdoh/promo/messages.htm>

New York State Department of Health guide for health professionals to craft health messages for persons with disabilities.

Recreation - A Great Way to Be Active

<http://www.fpg.unc.edu/~ncodh/pdfs/recbeactive.pdf>

<http://www.fpg.unc.edu/~ncodh/pdfs/recbeactivesp.pdf> (document in Spanish)

Booklet about recreation for persons with disabilities from the North Carolina Office on Disability and Health.

Designing Incentives and Accommodations

Searchable Online Accommodation Resource (SOAR)

<http://janweb.icdi.wvu.edu/soar/index.htm>

Database guide to workplace accommodations for employees with different disabilities.

Adapt the Fun for Everyone!

<http://www.health.state.ny.us/nysdoh/fun/0954.htm>

New York State Department of Health guide to creating accessible healthy activities for people with disabilities.

Fit Facts – Exercising with Health Challenges

<http://www.acefitness.org/fitfacts/>

One-page health and fitness information sheets on exercising with chronic conditions from the American Council on Exercise.

Removing Barriers to Health Clubs and Fitness Facilities: A Guide for Accommodating All Members, Including People with Disabilities and Older Adults

<http://www.fpg.unc.edu/~ncodh/pdfs/rbfitness.pdf>

This publication, developed by the North Carolina Office on Disability and Health and the Center for Universal Design, discusses how to make your fitness facility ADA compliant and remove barriers to fitness programs so that you can attract additional members, particularly members with disabilities and all older adults.

National Center on Physical Activity and Disability

<http://www.ncpad.org/>

NCPAD is an information center for resources about physical activity and disability. Their resources include guides on physical activity for people with disabilities, and information on health promotion for people with disabilities, including titles such as “Nutrition for Persons with Intellectual/Developmental Disabilities.”

Utilizing Incentives to Maximize Participation

http://www.welcoa.org/freeresources/pdf/aa_apr08_uitmp.pdf

Publication from the Wellness Council of America (WELCOA) explaining how incentives can motivate employees to not only participate in worksite wellness programs, but change their health behaviors.

Designing Wellness Incentives: Part 1

http://www.welcoa.org/freeresources/pdf/aa_vol4_no7_jul05.pdf

Part 1 of this WELCOA series discusses different possible wellness incentives, the value of having incentives, and gives an example of successful use of incentives from a wellness program instituted by the federal Centers for Disease Control and Prevention.

Designing Wellness Incentives: Part 2

http://www.welcoa.org/freeresources/pdf/aa_chapman2_aug05.pdf

Second part of the WELCOA series that gives more guidance on creating and implementing an incentive plan with your wellness program; how to link incentives to different benefits program; and more case studies of the successful use of incentives to increase worksite wellness participation and employee behavior change.

Agging Into Disabilities in the Workplace

WELCOA Lifestyle Management Guides

<http://www.welcoa.org/store/sidenav/lifestyleguides.html>

Guides targeted to persons with chronic conditions, including Living with Asthma, Managing High Blood Pressure, Managing Cholesterol, Preventing Diabetes, and Managing Chronic Conditions.

Fit Facts – Exercising with Health Challenges

<http://www.acefitness.org/fitfacts/>

One-page health and fitness information sheets on exercising with various chronic conditions from the American Council on Exercise.

Removing Barriers to Health Clubs and Fitness Facilities: A Guide for Accommodating All Members, Including People with Disabilities and Older Adults

<http://www.fpg.unc.edu/~ncodh/pdfs/rbfitness.pdf>

This publication, developed by the North Carolina Office on Disability and Health and the Center for Universal Design, discusses how to make your fitness facility ADA compliant and remove barriers to fitness programs so that you can attract additional members, particularly members with disabilities and all older adults.

Staying Compliant: HIPAA and ADA

U.S. Health and Human Services Office for Civil Rights HIPAA Information

<http://www.hhs.gov/ocr/privacy/index.html>

Information for consumers and covered entities on HIPAA rules and regulations.

U.S. Equal Employment Opportunity Commission

<http://www.eeoc.gov>

The federal agency that enforces all laws relating to job discrimination.

Disability Discrimination

<http://www.eeoc.gov/types/ada.html>

Aging Discrimination

<http://www.eeoc.gov/types/age.html>

Disability.gov

<http://www.disability.gov>

The U.S. government's premier Web site for all disability related information and support.

Laws and Regulations Relating to Disabilities and Health

http://www.disability.gov/health/laws_%26_regulations

Disability and Business Technical Assistance Center Network

<http://www.adata.org/index.html>

Disability and Technical Assistance Center of the Northwest

<http://www.dbtacnorthwest.org/tools/fact-sheets>

Multiple fact sheets covering commonly requested information about the Americans with Disabilities Act (ADA) for employers and employees.

Related Research

Employees with Disabilities, Wellness Programs, and Federal Regulations

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Business Roundtable (2007). Doing well through wellness: 2006-07 survey of wellness programs at business roundtable member companies. Retrieved on May 15, 2009 from <http://www.businessroundtable.org>

Parker, A.M. (May 21, 2009). Fitter Feds. GovExec.com Columns: Pay and Benefits Watch. Retrieved August 13, 2009 from http://www.govexec.com/story_page.cfm?filepath=/dailyfed/0509/052109pb.htm&oref=search

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U.S. Department of Health and Human Services: Office of the Surgeon General (2005). The Surgeon General's call to action to improve the health and wellness of persons with disabilities: What it means to you. Retrieved June 24, 2009, from <http://www.surgeongeneral.gov/library/disabilities/calltoaction/whatitmeanstoyou.pdf>

U.S. Department of Labor (2009). Bureau of Labor Statistics. Labor Force Statistics from the Current Population Survey. Retrieved June 24, 2009 from <http://www.bls.gov/cps/cpsdisability.htm>

Wall Street Journal (12 June, 2009). How Safeway is cutting health-care costs. Op-ed by Steven A. Burd. A15. Retrieved August 13, 2009 from <http://online.wsj.com/article/SB124476804026308603.html>

Aging into Disabilities in the Workplace

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Collins, K.S., Hughes, D.L., Doty, M.M., et al. (2002). *Diverse Communities, Common Concerns: Assessing Health Care Quality for Minority Americans*. New York, NY: Commonwealth Fund. Retrieved August 13, 2009 from

<http://www.commonwealthfund.org/Content/Publications/Fund-Reports/2002/Mar/Diverse-Communities--Common-Concerns--Assessing-Health-Care-Quality-for-Minority-Americans.aspx>

Lillie-Blanton, M., Rushing O., Ruiz S. 2003. *Key Facts: Race, Ethnicity, and Medical Care*. Menlo Park, CA: Kaiser Family Foundation. Retrieved August 13, 2009 from

<http://www.kff.org/minorityhealth/upload/6069-02.pdf>



Corporate culture needs to change to encourage more employees with disabilities to participate in worksite wellness programs. Corporate culture is key to establishing the perception of employees with disabilities within the company, as well as the desirability for all employees to participate in worksite wellness programs.

Companies that proactively work to engage and assist employees with disabilities create a positive environment for all activities, including worksite wellness programs. It is also important that employees with disabilities not be considered “sick” or “high risk.” Employers often view employees with disabilities as being “sick” and unable to benefit from health promotion programs. The medical community is trying to overcome this stigma by the release of reports such as the Surgeon General’s Call to Action to Improve the Health and Wellness of Persons with Disabilities.^{vi} Workplaces need to make the state of being “healthy” a sought after and accepted goal for all employees. If the culture of a worksite is positive about health promotion, this will affect all employees, including those with disabilities.

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Endnotes

- ⁱ U.S. Department of Labor, 2009. Bureau of Labor Statistics, Labor Force Statistics from the Current Population Survey, Retrieved June 24, 2009 from <http://www.bls.gov/cps/cpsdisability.htm>
- ⁱⁱ Rimmer, J.H. & Braddock, D. (1999). Health Promotion for People with Disabilities: The Emerging Paradigm Shift from Disability Prevention to Prevention of Secondary Conditions. *Physical Therapy*, 79(5).
- ⁱⁱⁱ Paeglow, T. February 2009. Worksite Wellness for Everybody. Slide presentation by T. Paeglow, Program Manager, NYS Department of Health, Disability and Health Program.
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- ^v Buck Consultants (May 14, 2009). EEOC says that mandatory health risk assessments violate ADA. FYI For Your Information. Volume 32, Issue 26. Retrieved on June 15, 2009 from http://www.buckconsultants.com/buckconsultants/Portals/0/Documents/PUBLICATIONS/Newsletters/FYI/2009/FYI_05_14_09.pdf
- ^{vi} U.S. Department of Labor, Bureau of Labor Statistics, Current Population Study. 2005. Chart 5-5. Women continue to be more likely than men to work part time.