ACTION BRIEF

Employer Strategies that Drive Health, Equity and Value



HYPERTENSION CONTROL:A VITAL BUSINESS INVESTMENT

HYPERTENSION IS A HIDDEN BUSINESS RISK, ASSOCIATED WITH HIGHER HEALTHCARE COSTS AND PRODUCTIVITY LOSS.

High blood pressure, also known as hypertension, is the most common health condition confronting 48% of US adults. Even though the US workforce is younger on average than the overall adult population, 3 in 10 employees have hypertension, affecting more workers than other health conditions such as diabetes or depression.



Hypertension: 3 in 10



Depression: 2 in 10



Diabetes: 1 in 10

Hypertension is treatable, yet more than one-third of employees with hypertension do not have it under control, and many are not aware they have the condition.³ Employees with hypertension are more likely to access healthcare services and have higher healthcare costs than those without hypertension.⁴ Approximately 86% of individuals have at least one co-existing condition such as high cholesterol, diabetes, or coronary heart disease.⁴

As a result, employees with hypertension have 44% higher healthcare costs. On average, an employee with



Over one-third of employees do not have their hypertension under control

Many employees are not even aware they have hypertension.

hypertension costs \$3,588 more in annual healthcare costs than similar employees without hypertension.⁵

Absenteeism, or time away from work, is higher for employees with hypertension, reducing productivity. For these employees, the combined cost of absenteeism and presenteeism, the reduction in function at work, was estimated to be as much as \$2,913.67 Furthermore, employees with uncontrolled hypertension spend twice as much time away from work than those with controlled hypertension.8 Productivity loss due to hypertension is, on average, \$462 per employee per year.5

As the most common chronic condition among employees, focused hypertension management within the workforce can result in increased productivity, reduced medical spending and insurance costs, and improved employee wellbeing, engagement, and retention. The benefits of prioritizing hypertension control minimize business risk and generate

ACTION STEPS FOR EMPLOYERS

- Assess the cost and productivity impact of hypertension.
- 2. Learn how other employers are succeeding in hypertension control through interventions and partnerships within their communities.
- 3. Plan and implement strategies to support health insurance benefit design that incentivizes hypertension control and promotes appropriate care management.
- 4. Evaluate programs in a continuous quality improvement framework.

returns on investments in healthier families, workplaces and communities. The tools and resources in this Action Brief provide data on the economic and health impact of hypertension for informed decision-making to enable action and intervention.

Not only does managing
hypertension positively impact
the bottom line and employee
satisfaction, but it also
results in healthier families,
workplaces and communities.



EMPLOYERS CAN AND SHOULD ACT TO INCREASE HYPERTENSION CONTROL AMONG EMPLOYEES

Use Data to Inform Intervention Strategies Use the Hypertension Budget Impact Model (BIM) and Hypertension Claims **Analysis Guide (CAG) to assess** the impact of hypertension on your workforce Use employer- or industry-specific data in the BIM to estimate **Use the** how hypertension affects Comprehensive health, and medical and **Benefit Design for** productivity costs in Hypertension to plan and your employee implement strategies population to support your health insurance benefits design Use the CAG to get a better understanding for hypertension of the impact of Know your data hypertension using on prevalence and your own healthcare economic impact claims data Review your benefit design to improve healthcare access and quality Conduct blood pressure screenings Work with your health and wellbeing vendors Promote appropriate care management

Improving chronic conditions, like hypertension, in the workforce requires knowledge, data and measurement to help employers assess risk, take action, and create a strategic path forward for employee health and wellbeing. Take these steps to reduce the impact of hypertension in the workforce and create a strategic path forward.

1. Assess the cost and productivity impact of hypertension

There is substantial variation in the proportion of employees with hypertension across industries – ranging from 29% of sales and office workers to nearly 40% of installation and transportation workers. New tools are available to better understand the magnitude of the issue in your workforce, including the Hypertension Budget Impact Model and the Hypertension Healthcare Claims Analysis Guide.

Hypertension Budget Impact Model

The Hypertension Budget Impact Model (BIM) allows users to easily estimate the healthcare and productivity costs of hypertension on specific employee populations using employer- and industry-specific data. The analysis can estimate impact on an entire workforce or subgroups across industry sectors or job functions. This is critical for large employers across various industries or geographies, which have different costs and prevalence.

The BIM can also provide data to support decision-making for multisector collaboratives that may seek to improve health and productivity outcomes in a broader community or specific populations in a regional context, such as the community-wide hypertension initiative in the Rochester, NY area^{11,12} or collaborative efforts to understand and quantify the drivers and impact of chronic conditions, including hypertension, as in the Nashville Region Health Competitiveness Initiative. 13,14 The model can be further customized using demographic characteristics, prevalence, and average wage and work hours. Default values based on published literature evidence are built into the model if organizational data is not available.

The BIM provides key data and estimates additional costs (i.e., extra financial impact) of hypertension, including:

- Estimated number of covered employees with hypertension (e.g., overall and by demographic subgroups)
- Additional annual costs per employee due to hypertension (e.g., the additional medical and pharmacy costs, productivity loss costs)
- A breakdown of drivers of additional medical costs (e.g., inpatient, outpatient, pharmacy costs) for the covered workforce
- Additional annual total employer cost due to hypertension (e.g., medical and productivity loss for the covered workforce)
- Projected additional annual total employer costs for 5 years (with no change or intervention), which provides opportunity costs for employers

The results dashboard (Figure 1) shows, at a glance, the differential per person and total impact of hypertension for each subpopulation and overall. Other dashboards in the BIM show drivers of costs (Figure 2), demographics, and projected costs for 5 years.

Figure 1. Hypertension Budget Impact Model Sample Results



Hypertension Healthcare Claims Analysis Guide

To gain deeper insights into your specific healthcare costs, use the Hypertension Claims Analysis Guide (CAG). The CAG provides a roadmap for employers to use claims data to inform health and wellbeing interventions and health insurance benefit decision-making (Figure 3). Even employers who do not have access to their own claims data can use the guide to inform future discussions with potential vendors and payors and request hypertension-specific reports.

2. Plan and implement strategies to support your health insurance benefits design

The Comprehensive Benefit Design for Hypertension helps with the development and implementation of wellbeing and benefit design strategies to prevent, control and manage the impact of hypertension. The strategies on the next page are a checklist of key interventions which can be implemented to reduce the number of employees with hypertension and help control high blood pressure for those diagnosed with the condition.

Preventing and managing
hypertension allows businesses
and communities a greater
opportunity for a healthy
workforce and economic vitality.

Figure 2. Hypertension Budget Impact Model Sample Output - Drivers of Annual Costs Per Employee Related to Hypertension



Figure 3. Key Questions to Support Data-Driven Decision-Making

Use the Claims Analysis Guide (CAG) to Answer These Questions



Question 1: How many employees have hypertension?

The CAG provides data points for decision-making including current number of employees with hypertension and number of employees newly diagnosed.



Question 2: What are the costs related to hypertension?

The CAG provides detailed insights on hypertension-related direct medical costs broken out by various categories such as age group, race/ethnicity, type of care (e.g., inpatient hospitalization, physician office visit), treatment category, and neighborhood characteristics as measured by the Social Deprivation Index (SDI).



Question 3: How many employees are treated with medication for hypertension?

The CAG provides data on hypertension treatment and adherence as measured by proportion days covered (PDC).



How Can Employers Act On Hypertension Control?

Review the Comprehensive Benefit Design Guide, which expands on topics such as:



Use the Hypertension BIM or CAG on the previous page to assess prevalence, healthcare, and productivity costs

Review Your Benefit Design to Improve Healthcare Access and Quality

Make sure your health plan covers certified blood pressure home monitor for patients diagnosed with hypertension

Conduct Blood Pressure Screenings

Include blood pressure screenings in health-related and other events at key organizational sites

Work With Your Health and Wellbeing Vendors

Ask current vendors whether and how they are addressing hypertension; include hypertension focus and performance metrics in health and wellbeing requests for proposal (RFPs)

Promote Appropriate Care Management

Educate your workforce on the importance of regular primary care visits in preventing chronic diseases, including hypertension



HOW EMPLOYERS ARE SUCCEEDING IN HYPERTENSION CONTROL





Paychex

Paychex is a leading provider of integrated human capital management (HCM) software solutions for human resources, employee benefits, insurance services, and payroll. The company has over 745,000 customers across the U.S. and Europe and supports them with approximately 16,000 employees.

Business Case

Know Your Data. After assessing healthcare claims, Paychex learned that hypertension was a top condition among employees, further motivating control measures to improve employee health and reduce rising healthcare costs paid by the company.

Action

- Community Partnership. Starting in 2010, Paychex partnered with other prominent employers in the High Blood Pressure Collaborative in the Rochester, New York area in a multistakeholder effort involving the physician community, health systems, and community-based organizations to create a coalition to tackle hypertension.
- Focused Interventions. In 2023, using its own data, Paychex designed an intervention which focused on the medical plan most used by employees with hypertension that is often attractive to Paychex employees with chronic conditions. The point solution involves tracking blood pressure via smartphone alongside hypertension education.

Measured Impact

- **Data.** Paychex analyzes the impact of their programs by reviewing their healthcare claims, pharmacy claims, engagement in programs across their employee population, and retention.
- Outcomes. In the 11 months since the implementation of Paychex's updated point solution, 64% of participants have seen reduced blood pressure and 3.6% of participants with critically high blood pressure ratings now have their blood pressure under control. Paychex intends to measure how this program impacts employee leave of absences and retention.

HOW EMPLOYERS ARE SUCCEEDING IN HYPERTENSION CONTROL





Metro Nashville Public Schools

Metro Nashville Public Schools (MNPS) is one of the largest public school systems in the United States. The system employs 11,000 faculty that serve an ethnically and racially diverse population of over 80.000 students.

Business Case

Leadership in the system have approached employee benefits with the basic mission to look beyond the cost of healthcare itself to improve the overall health of MNPS employees. Understanding the ability to help employees control their blood pressure, along with the positive impact of controlled hypertension on mitigating other co-existing conditions, MNPS leadership decided to invest in hypertension control.

Action

- **Benefit Design.** MNPS removed copays for generic cardiovascular medicines. In addition to in-person care, the program allows patients who have high blood pressure to take home blood pressure machines to monitor their health, which is paid for by the health plan.
- Care Management. To reduce gaps in care, MNPS established several onsite clinics to aid with chronic care management and address immediate medical needs. Nurse practitioners and health coaches in the clinics educate and follow up with patients using home blood pressure machines to encourage continued monitoring.
- **Health and Wellbeing Promotion.** MNPS has also established lifestyle, surgical, and medical weight loss programs to address co-existing conditions associated with hypertension and other chronic conditions.

Measured Impact

- **Data.** MNPS evaluated the impact of its hypertension control efforts using program and healthcare claims data.
- Outcomes. Approximately half of employees attend onsite clinics during the year. Approximately 30% of employees eligible for a lifestyle, medical or surgical program have participated in the program. MNPS has seen decreases in outpatient, emergency department (ED), and urgent care visits along with other shifts in cardiovascular trends as a result. MNPS has also reached Gold Status in the Target: BP Recognition Program from American Heart Association, which recognizes practices that have 70% or more of their adult patient population with high blood pressure controlled. These programs are expected to control costs while improving faculty health outcomes which, in turn, will reduce drops in educational outcomes for students due to teacher absences. MNPS continues to evaluate the costs and benefits of these interventions for informed decision-making on program continuation.

RESOURCES FOR EMPLOYERS:

- Hypertension Budget Impact Model (BIM) for Employers
- Hypertension Claims Analysis Guide for Employers
- Hypertension Control: A Vital Business Investment
- Comprehensive Benefit Design Guide for Hypertension Employer Recommendations for Action
- National Hypertension Control Roundtable Business Case for Employers Background
- Million Hearts® National Initiative by the Centers for Disease Control and Prevention
- High Blood Pressure American Heart Association
- Data-Driven Approaches for Informed Health Equity Action

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The Hypertension Budget Impact Model and the Claims Analysis Guide were developed by **FTI Consulting's Center for Healthcare Economics and Policy**, in partnership with the **National Forum**. The Comprehensive Benefit Design Guide for Hypertension was developed by the **Greater Philadelphia Business Coalition for Health**. These tools were created in support of the Business Case for Hypertension Management and Control for the **National Foundation for the Centers for Disease Control and Prevention (CDC Foundation)**.



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