

2015 C. Everett Koop

**National Health Award for Excellence in Health Improvement
and Cost Savings**

Application Submission

MCKESSON

You. Even better.

McKesson Corporation

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Program URL: www.mckesson.com/youevenbetterlibrary

Vendor(s): Aetna, Alere, Anthem, CVS Caremark, Quest Diagnostics, The Vitality Group, Truven Health Analytics, UnitedHealth Group, Weight Watchers

Section I: Executive Summary of Program and Evaluation Highlights

McKesson is in the business of better health. We are committed to creating a health care system that leads to lower costs, higher quality, and better health for all. Our commitment to health starts with our workforce. Through strong leadership that is dedicated to creating a rich culture of health, and a comprehensive health promotion program, ‘You. Even better’, McKesson promotes the physical, mental, and social wellbeing of our employees and their families.

McKesson has been actively seeking to improve the health of our workforce since 2007. Beginning with a simple program that offered health risk assessments and screening to help employees understand their health risks, our health promotion program has evolved to include a range of evidence-based activities. These activities aim to improve health across the company, with a fully integrated incentive structure that rewards employees for healthy behaviors.

Today, ‘You. Even better’ offers McKesson employees and their families:

- Comprehensive health benefits and assessments: Health Risk Assessment (HRA), age-specific Kids Health Assessment, Mental Wellbeing Assessment and Physical Activity Assessment.
- Personalized contextualization of health results and recommended goals, comprising outcomes and activities, supported by a comprehensive set of reasonable alternative standards.
- Deep health plan integration, ranging from tiered health insurance contributions (activity and outcome linked) to value based benefits.
- Online ‘You. Even better’ healthcare hub as an integrated single location for benefits, augmented by a wellness portal (online and mobile) and internal social platform for benefit discussion.
- Financially supported lifestyle programs (for physical activity: corporate onsite gyms, health club subsidies, and a free pedometer for every employee; for nutrition and weight management: discounts on healthy food purchases at grocery stores and free Weight Watchers® membership; for smoking cessation: free tobacco cessation programs); augmented by an EAP solution.
- Targeted chronic condition management and programs for medication adherence.
- A very comprehensive engagement support structure: ongoing communications through all media, including social media, location specific health events supported by an extensive Champ network, ongoing health competitions and challenges, a very sophisticated range of incentives to facilitate daily and longer term behaviors. Wellness initiatives are integrated with corporate social responsibility events.

Using a robust data warehouse, McKesson has seen improved engagement and outcomes. Between 2011 and 2014, participants increased their activity levels from an average of 21 to 106 activities per annum, with 83% of employees and spouses completing at least one activity in 2014. Since April 2012, McKesson employees and their spouses have attended 159,994 Weight Watchers® meetings and reported a net weight loss of 24,759 pounds. Overall lifestyle risk for a consistent cohort decreased by 9%, even though the cohort itself aged over time. From 2012 to 2014, on-the-job performance increased by 3.65% from 81.69% to 85.34%, with the highest increase seen for those with the highest increase in engagement. Although the focus is on improving health, McKesson is pleased to see from independent assessment that early savings exceed program investment, without monetizing performance improvements. Third party focus group results showed McKesson’s wellness initiatives significantly enriched the overall benefits offering and corporate culture.

Section II: Narrative Description of Program and Evaluation Results

Your Organization

Founded in 1833 by John McKesson and Charles Olcott, McKesson Corporation has spanned centuries for better health. The company has its roots in the days when organized health care in America was just taking shape. Over the past 180 years, McKesson has played a fundamental role in shaping the design and direction of health care: helping to set standards for the health care supply chain and contributing to our industry's technology revolution.

Today, with headquarters in San Francisco, California, and over 37,000 workforce members spread across the country, McKesson is ranked 15th on the FORTUNE 500 list with more than \$137.6 billion in annual revenue. The company delivers vital medicines, medical supplies, and technology solutions that seek to improve the lives of patients in every health care setting. McKesson is committed to creating a health care system that leads to lower costs, fewer mistakes, higher quality, and better health for all.

McKesson is composed of 10 businesses, all serving the health care industry. Our employees work in over 300 locations in diverse environments: office settings, doctors' offices, distribution centers, and on the road marketing products and services. Approximately 7,000 employees work at home. McKesson values diversity in its workforce, which reflects the communities in which we operate. Over half (53%) of our employees are female, while there is an equal divide (50%) between exempt and non-exempt employees.

We promote a culture of health focused on improving the physical, mental, and social well-being of employees. Our tailored 'You. Even better' program, offered to employees and spouses, has evolved from a payout for health assessments to a comprehensive health promotion program with an integrated incentive structure. Investment in the health of our workforce enables McKesson to lower health care costs while supporting creative, productive, and resilient employees and their families.

Health Management Strategy/Programs

McKesson has actively sought to improve the health of employees and spouses since 2007, presented in the table below. We listen to our employees' needs and continuously refine the 'You. Even better' program to address key risk factors affecting the health of our workforce.

2007-2011	McKesson offered a Health Risk Assessment (HRA) and screening program for employees to identify and understand their health risks, then get educated and take action on those risks, primarily through online healthy living modules. After recognizing a large proportion of employees were overweight or obese, Weight Watchers® was integrated into the program.
2011	Integration of Vitality health promotion program—a comprehensive platform utilizing behavioral economic strategies to drive employee engagement in physical activity and other healthy behaviors through a more integrated and effective approach toward incentives. Incentives include a free activity monitor upon registration.
2012	Introduced an engagement threshold above which employees received discounted health insurance premiums. In this year, 73% of the population achieved access to discounted premiums for the following year.
2013	Ongoing efforts to improve engagement resulted in an increase of employees who completed at least one verified fitness activity from 17.9% in 2012 to 41.3% in 2013; and the number of device verified workouts increased per employee per year from 47.8 to 128.4 in 2013. Healthy food benefit incorporated.
2014	Raised the engagement threshold (from Silver to Gold status) so that much deeper engagement in health promoting activities was required to earn a 30% discount on health insurance premiums. Tobacco cessation program and enhanced screening for tobacco use incorporated.

Each year, employees and spouses complete a baseline HRA. This provides a risk-adjusted health rating (Vitality Age™) that combines health and lifestyle factors and communicates their impact on health. Individuals are presented with personalized goals to promote healthy lifestyle habits. An incentive-based approach drives engagement so that when employees undertake healthy activities, they earn points. Points accumulate to raise employee status, and can be redeemed for tangible rewards such as Amazon.com gift cards and wearable fitness devices. In addition, surpassing a pre-defined engagement threshold each year, for example Silver status, earns employees greater discounts on health insurance premiums.

	2011	2012	2013	2014
% Completing at Least One Activity	66.0%	91.8%	96.3%	83.1%
% Reaching Gold or Platinum	1%	12%	32%	39%
HRA Completion	68.8%	68.9%	63.5%	65.9%

Employees have access to gym benefits, including subsidy payments toward membership fees, free membership for Weight Watchers®, online nutrition courses and a free tobacco cessation program. The

healthy food program incentivizes healthy food purchases by offering a 10% discount on selected healthy food items from a national grocer. At the end of 2014, 31% (10,158) of McKesson employees were registered. McKesson enhanced our tobacco-free program in 2014 to include cotinine testing in the biometric screening and provide employees access to the National Cancer Institute's SmokeFreeTXT cessation program. Employees are awarded points for participating and remaining tobacco free.

Addressing Disparities and Differences

McKesson employees in our 10 businesses are located in almost every state. The average distance from our corporate headquarters is 1,769 miles, resulting in a relatively disperse population and unique challenges. Accordingly, we consider physical, organizational, and cultural elements that can help us create healthier environments for all McKesson employees and their families.

On-site meetings where employees learn about the tools available to improve their health are conducted at locations with high numbers of at-risk employees. McKesson ensures remote workers have access to the health promotion program via a mobile application, which has a feature permitting check-in at non-partner health clubs. Individuals can also automatically track and verify their physical activities via multiple wearable devices (including a free pedometer for each employee) or via a partner health club network. In addition, onsite fitness facilities, fitness classes, health fairs, lunch-and-learn sessions, and webinars all help employees engage year-round irrespective of their location.

The 'You. Even better.' library - an online repository of current-year benefits and wellness information - provides important resources about engagement requirements and opportunities. On-site cafeterias offer healthy meal options, and the "Quarterly Wellness Table" features health coaches and cooking demonstrations.

Personalized communications are designed to promote health among McKesson's diverse workforce and their families. Resources and messages are available in multiple languages, including Spanish and French. McKesson News — a weekly online publication — highlights health success stories and birthday postcards remind employees to obtain age-appropriate preventive screenings. McKesson Wellness Champions provide personal outreach and act as local health advocates.

McKesson has made "moving" part of the company culture. Managers are encouraged to hold walking meetings, many employees have retrofitted standing desks, and company walking groups are common. McKesson's leaders, including the CEO, model active lifestyles by exercising at the gym, biking to work, and taking walks throughout the day. Company-sponsored events such as charity walks encourage and reward employees for participating, and company-wide step challenges were pivotal in ramping up participation in health promotion activities from an average of 21 activities in 2011 to 106 in 2014. These challenges helped foster a connection to the company and other individuals in a fun and engaging manner while encouraging employees to get active.

Our commitment to health extends beyond employees and into the broader community. Each year, McKesson assembles our community of health promotion vendors so each entity can report progress and brainstorm how to further streamline and integrate all offerings.

Evaluation Methodology and Results

The impact of McKesson’s ‘You. Even better’ program on healthcare expenditure was evaluated by an independent third-party research group at Harvard University’s T.H. Chan School of Public Health. Research was spearheaded by Andrea Feigl, with support from Lindsay Locks and Jesse Heitner. Researchers have academic-quality research experience and have published in peer-reviewed journals.

Program evaluations consisted of health claims, program engagement, health outcomes, and job performance data. Data included self-reported and verified variables, with a focus on engagement levels, changes in risk factors, and health care savings. Data were available from monthly, quarterly, and annual reports. A summary of evaluation methodology and results are outlined in Tables 1 and 2.

Program Participation and Engagement

Data for all employees, spouses, and children participating in ‘You. Even better’ between January 1, 2011, and December 31, 2014 were available. Program engagement increased every year and includes activities such as assessment and screenings, education (online courses, webinars), physical activities (workouts, athletic events), prevention activities (vaccinations, mammograms), and onsite activities.

Over the three years of this analysis, engaged adult participants increased activity levels by 92% from 6.9 monthly activities in 2012 to 13.4 monthly activities in 2014 (Figure 1). Increases in physical activity accounted for much of the increase in overall engagement over the study period. Between 2011 and 2014, participants increased their activity levels from an average of 21 to 106 activities per annum, with 83% of employees and spouses completing at least one activity in 2014.

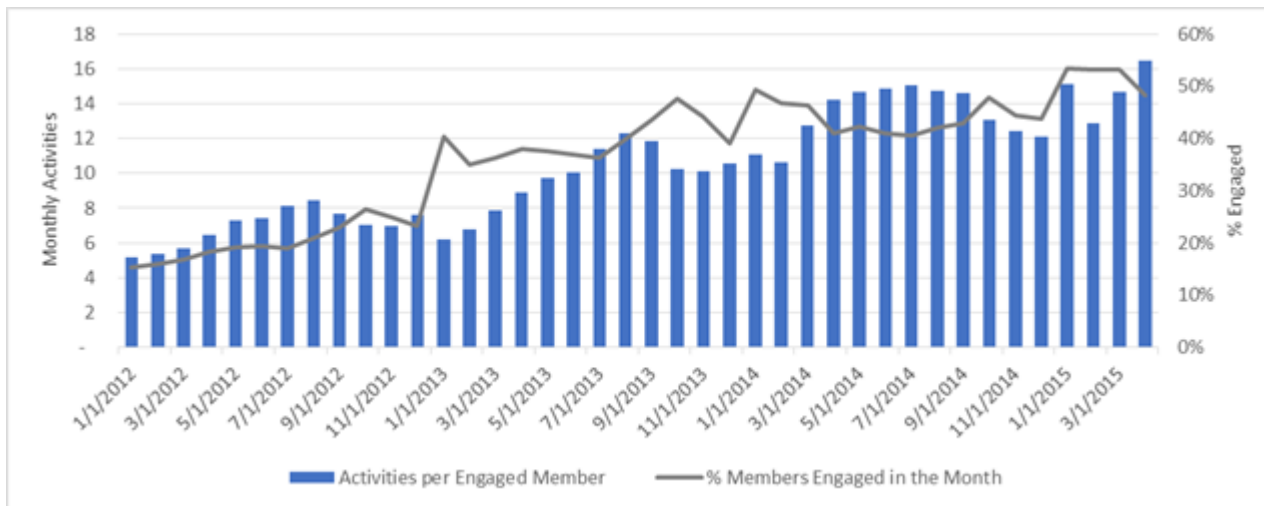


Figure 1. Monthly activities for employees and spouses exclude all HRA, biometric screenings, and self-reported activities. Average monthly activity counts are calculated by taking the total monthly activity counts divided by “engaged” members in a given month, where “engaged” is completing at least one activity in that month.

Weight Management

Weight Watchers® was implemented at McKesson in 2007, and was linked to the Vitality health promotion program in 2012. Since April 2012, 4,892 McKesson employees and 493 spouses reported attending 159,994 Weight Watchers® meetings and reported a net weight loss of 24,759 pounds (Figure 2). Participation in the Weight Watcher’s program increased over time. Over the last year (5/1/2014 – 4/30/2015), employees and spouses attending at least one monthly meeting averaged 3.5 meetings per month.

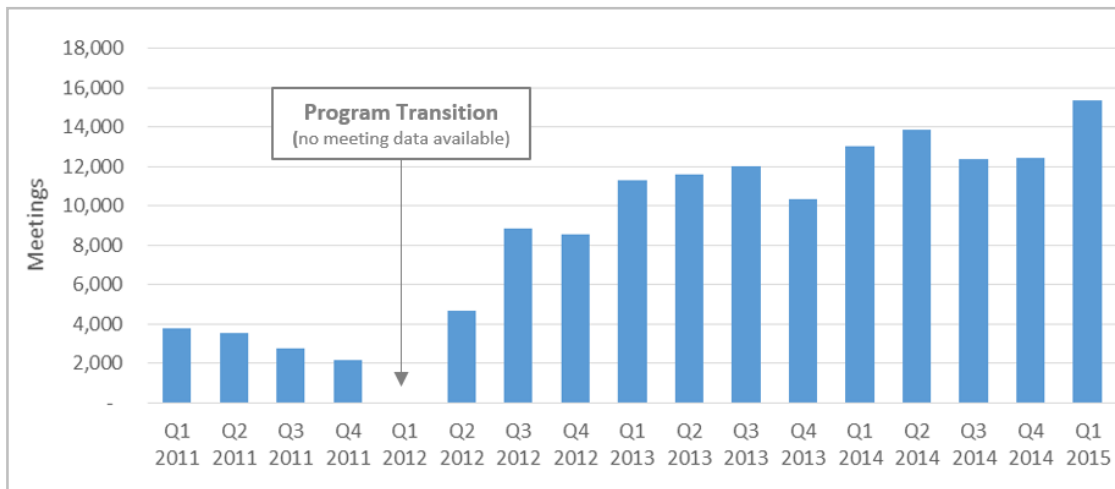


Figure 2. Number of Weight Watchers® meetings attended by McKesson members during the study period.

Physical Activity

Members who sync physical devices with the Vitality health promotion program are automatically awarded Vitality Points™ for days on which at least 5,000 steps are taken. Members earn double (10,000 steps) or triple (15,000 steps) points for demonstrating higher levels of physical activity. McKesson also has three corporate gyms available. Employees and spouses earned Vitality Points™ for recording activity using any of these methods.

Figure 3 indicates pedometers are the most frequently used device at McKesson, with nearly 23,000 employee and spouse members, and more than 6.3 million recorded activities between 2011 and 2014. During this time, McKesson members took over 51 billion steps and walked 25.6 million miles. In 2014, 44% of employees completed at least one verified physical activity and averaged 80.7 workouts per year. Spouses also demonstrated a robust commitment to physical activity; 29% of spouses completed at least one verified physical activity in 2014 and averaged 82.6 workouts per year. Both the participation percentages and average workouts have continued to increase every year for employees and spouses, up from 37% of employees (70 workouts) and 20% of spouses (69 workouts) in 2013.

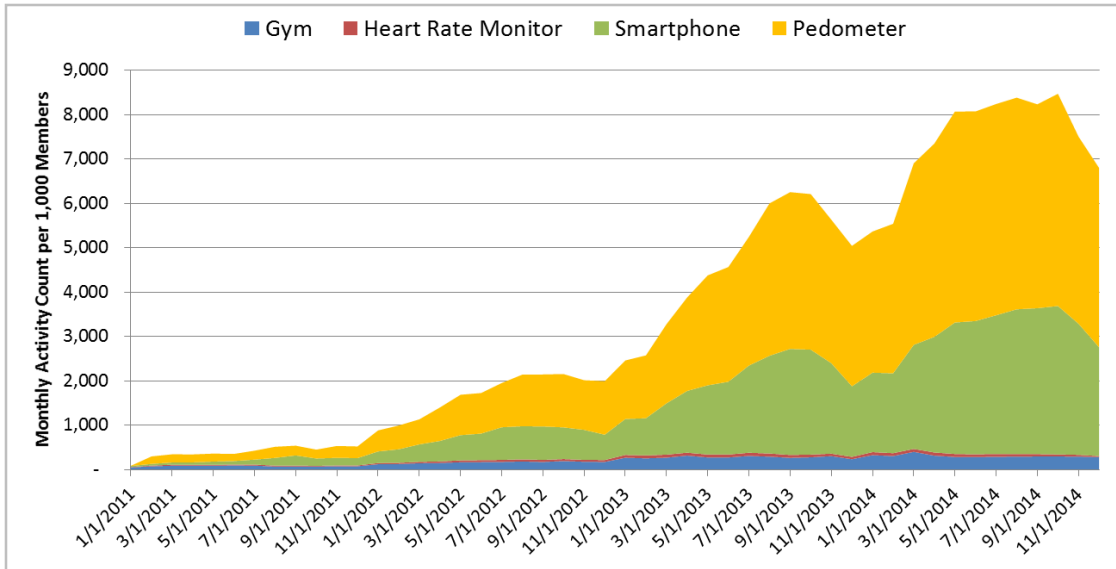


Figure 3. Devices and gym activities completed by McKesson members per 1,000 employee and spouse members from 2011 to 2014.

Biometric and Lifestyle Risk Factors

A McNemar test determined whether there was a significant difference between the pre and post risk factor measurements on the implementation of the Vitality health promotion program. Employees and spouses with at least two measurements for the risk factor taken at least one year apart were included in the test. Biometric risk factors are verified data points while lifestyle risk factors are self-reported.

A transition analysis of overall risk groups included employees and spouses with a minimum of two known measurements for each of the 10 risk factors and at least one year between the first and last recorded measurement. Biometric risk factors included verified measurements only. Statistically significant improvements were observed in systolic and diastolic blood pressure, tobacco use, alcohol use, stress, nutrition, and physical activity (Figure 4). Overall lifestyle and biometric risk for a consistent cohort, measured as a count of elevated risks, decreased by 9% even though the cohort itself aged over time.

	Risk Factor	Members	Stayed at Low Risk	Increased to Elevated Risk	Stayed at Elevated Risk	Decreased to Low Risk	Significance Indicator
Biometric	BMI	19,377	25%	6.5%	64%	5.4%	↑
	Cholesterol	19,439	51%	13.1%	25%	10.5%	↑
	SBP	19,390	40%	15.6%	28%	16.7%	↓
	DBP	19,391	57%	12.6%	14%	17.1%	↓
	Glucose	19,378	73%	8.8%	11%	6.9%	↑
	Cotinine	14,607	87%	1.5%	9%	1.6%	
Lifestyle	Tobacco Use	23,234	66%	2.6%	27%	3.8%	↓
	Alcohol	23,211	95%	1.4%	1%	2.6%	↓
	Stress	23,228	84%	3.8%	5%	8.0%	↓
	Nutrition	23,231	10%	6.4%	68%	14.9%	↓
	Physical Activity	23,221	24%	4.4%	8%	9.8%	↓

Figure 4. McNemar analysis of biometric and lifestyle risk factors and consistent cohorts of employees and spouses. Significance was set at $p < 0.05$.

Job Performance

McKesson employees complete a shortened version of the World Health Organization’s Health and Work Performance Questionnaire (HPQ) as part of the HRA. The HPQ asks employees to rate their own performance on a scale from 0 to 10 during the prior 28 days. McKesson collected self-reported HPQ performance ratings (2012, 2013, 2014) for 19,183 employees in all three years.

Employees were divided into cohorts with very high increases in engagement (n=7,198), moderate increases in engagement (n=6,844), or no change/decreased engagement (n=5,141). Individuals were considered to have a very high increase in engagement if their annual activity counts increased by more than 50 activities, or a moderate increase if annual activity counts increased by 50 or fewer activities.

From 2012 to 2014, on-the-job performance increased from 81.69% to 85.34%. Employees with a very high increase in engagement from 2012 to 2014 showed an increase in performance of 4.01% from their 2012 performance measures, while those with a moderate increase in engagement showed an increase in performance of 3.54%, and those with no/decreased change in engagement showed an increase in performance of 3.39%. Employees in the very high increase cohort saw the greatest improvement in performance ratings from 2012 to 2014 and also presented the highest performance rate of 86.13% in 2014, compared to 84.89% for the moderate increase and 84.98% for the no change/decreased engagement cohort.

The year-over-year changes in performance of the employees with engagement increases were compared to the no increase/decrease engagement cohort from 2012 to 2014. These percent changes were converted to productive work days lost using a 240 day work year. Days lost were monetized using the human capital approach to the salary conversion method^[1] in combination with the 2014 mean salary for the Drugs and Druggists' Sundries Merchant Wholesalers industry, as determined by the U.S. Bureau of Labor Statistics^[2].

1. Mattke S, Balakrishnan A, Bergamo G, Newberry SJ. Review of Methods to Measure Health-related Productivity Loss. Am J Managed Care. 2007;13: 211-217.
 2. U.S. Bureau of Labor Statistics, May 2014 National Industry-Specific Occupational Employment and Wage Estimates: NAICS 424200 - Drugs and Druggists' Sundries Merchant Wholesalers. 2015 March 25. http://www.bls.gov/oes/current/naics4_424200.htm#00-0000. Accessed 2015 May 29.

Using this conservative method, employees with moderate engagement increases saw savings of \$93.64 per employee per year across 2013 and 2014 (n=6,844) while employees with high engagement increases saw savings of \$387.07 per employee per year (n=7,198). Total savings for this increased engagement cohort was \$6,854,015 across both 2013 and 2014 (without extrapolation to the larger population).

Healthcare Expenditures, Savings, and ROI

McKesson employees who were eligible for the Vitality health promotion program no later than March 31, 2012, and who were eligible for Vitality at least until April 1, 2012 were included in the analysis. Eligible spouses of McKesson employees, as well as employees/children of employees under 19 years of age, were excluded. The total sample size at the start of the study period was 18,733 employees. The study population was divided into three groups for analysis: “Low Engagers” who completed 1-6 activities per year (n=8,741); “Medium Engagers” who completed between 6-52 activities per year (n=7973); and “High Engagers” who completed more than 52 activities per year (n=2,019).

Claims data for 2011-2014 were provided by Truven Health Analytics and de-identified prior to analysis. We used the non-zero ‘allowable amounts’ to represent the individually incurred medical costs between 2012 and 2014. Claims for pregnancy-related conditions were excluded. Incurred costs were summed per individual per year, and data were annualized for individuals participating in the Vitality health promotion program for less than any given program year. The cost data were standardized to 2012 USD amounts, based on the US medical inflation index between 2012 and 2014.

Three categories of outcome variables were used: medical costs, length of hospital stay, and chronic disease risk factors. We hypothesized that engagement in 2012 would impact medical care expenditures in 2013 and 2014.

Medium engaged employees in 2012 and 2013 spent \$1,238 less per employee in 2014 compared to low engaged employees in 2012 to 2013. Compared to low engagers, medium engagers demonstrated over \$8.6 million (in 2012 dollars) in medical expenditure savings. These savings are attributable to engagement in health promotion activities. In 2014, high engagers spent \$916 less than low engagers in medical costs compared to 2012. This led to an overall saving of \$4.7 million in medical costs for McKesson (Figures 5 and 6).

Group	Relative Cost savings 2013	Relative Cost savings 2014
Low engaged (<6 activities/year)	--	--
Medium engaged (6-52 activities/year)	\$ -551.86	\$ -1237.54
High engaged (>52 activities/year)	\$ -589.15	\$ -916.32

Figure 5. Cost savings compared to 2013 among medium and high engagers. Over the entire study period (2012-2014) engaged employees produced \$13.31 million in medical expenditure savings.

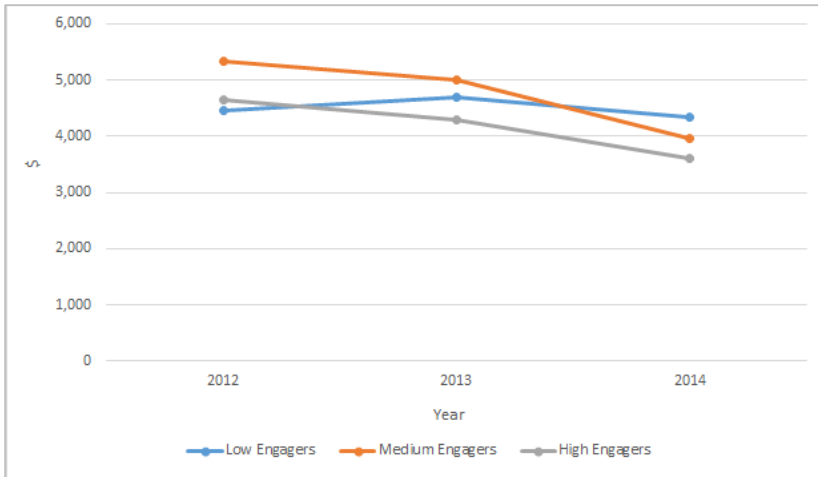


Figure 6. Annual medical care expenditures per member in each of the defined engagement groups. While the costs in the low engager group remained relatively constant, the costs of those who were engaging in health promotion activities fell during the study period.

Engagement in health promotion activities produced \$13.3 million in savings in 2014 compared with 2012 medical expenditures. While these savings are directly linked to individuals included in this analysis, it is likely that similar savings occurred in those who started engagement at a later date, engaged in the program at similar or higher levels, or had similar baseline characteristics. A majority of members also transitioned from the low engagers group to the medium or high engager groups. In 2012, there were 8,741 members in the low engager group. By 2014, this had decreased to 2,531. Over 70% of the low engagers increased engagement during the study period, and more than doubled the size of the high engager group from 2,091 to 5,167.

An assessment of annual program costs amounted to \$12.2 million over the analysis period, resulting in a return of 30% for each dollar invested (using the \$13.3 million from the cohort analyzed above, without extrapolation to the larger population). Costs included direct program costs (vendor costs and subsidies, devices, biometric screenings, and flu vaccinations) plus an assessment of internal support staff cost.

Table 1 summarizes evaluation methodologies. Table 2 presents evaluation results.

Table 1: Summary of Evaluation Methodologies

Key Variable Measured	Annual Program Participation	Monthly Program Participation	Weight Management Participation & Results	Nutrition Program Participation
Study design structure	Other: Longitudinal observational	Other: Observational	Other: Longitudinal observational	Other: Longitudinal observational
Sample size for treatment and comparison groups	<p>Eligible employees: 2011 – n = 24,836 2012 – n = 28,420 2013 – n = 28,665 2014 – n = 32,769</p> <p>All eligible adults: 2011 – n = 24,386 2012 – n = 41,913 2013 – n = 41,180 2014 – n = 45,175</p>	<p>Eligible employees: 2011 – n = 24,836 2012 – n = 28,420 2013 – n = 28,665 2014 – n = 32,769</p> <p>All eligible adults: 2011 – n = 24,386 2012 – n = 41,913 2013 – n = 41,180 2014 – n = 45,175</p>	<p>Eligible employees: 2011 – n = 24,836 2012 – n = 28,420 2013 – n = 28,665 2014 – n = 32,769</p> <p>All eligible adults: 2011 – n = 24,386 2012 – n = 41,913 2013 – n = 41,180 2014 – n = 45,175</p>	<p>All eligible adults: 2013 – n = 41,180 2014 – n = 44,298</p>
Sample Selection Method	“Eligible” is defined as eligible for the health promotion program on 12/31 of given year.	“Eligible” is defined as eligible for the health promotion program on the first day of the month. “Active” members completed at least one verified activity in that same month.	“Eligible” is defined as eligible for the health promotion program on 12/31 of given year	“Eligible” is defined as eligible for the health promotion program on 12/31 of given year
Data source(s)	Various sources supplied to health promotion program, including program eligibility files and verified engagement data.	Various sources supplied to health promotion program, including program eligibility files and verified engagement data.	Eligibility file supplied to health promotion program, online program registration data, and online self-reported program participation data	Eligibility file supplied to health promotion program and online program registration data
Outcome result	Participation rates have risen over the study period from	Average monthly activities more than quadrupled for all adult members from 2011 to 2014, from 0.28 in 2011 to 5867 in 2014	Over 5,000 employees and spouses increased meeting attendance and lost on average 4.6 lbs	13,644 individuals registered for the healthy food discount program

Key Variable Measured	Annual Program Participation	Monthly Program Participation	Weight Management Participation & Results	Nutrition Program Participation
Analysis	Year-over-year participation comparison	Monthly participation comparison	2011-13 participation and weight loss	2014 total registrations
Relevant statistics	Annual participation percentages and total activity counts	Monthly participation percentages and activity counts per “active” member	2011-13 participation and recorded weight metrics	2014 program participation metrics
Publications	Currently being worked on for submission to peer-reviewed manuscripts			

Table 2: Summary of Evaluation Results

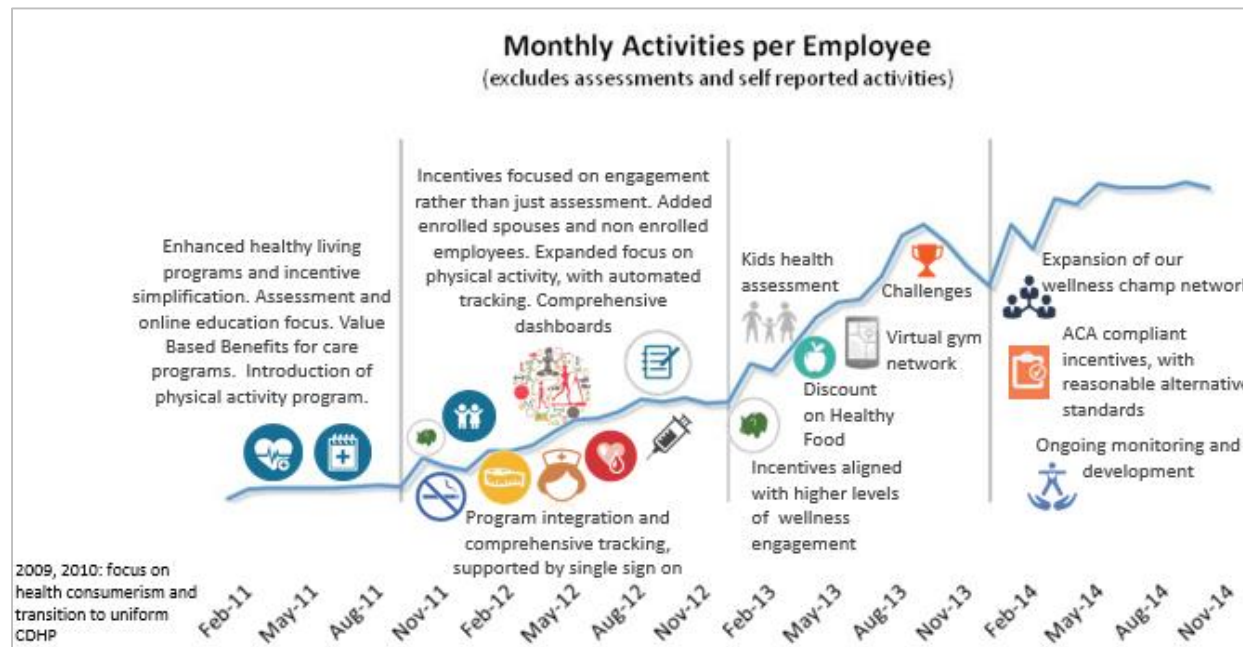
Key Variable Measured	McNemar test on risk transition	Overall risk group transitions	Productivity	Healthcare costs savings
Study design structure	Pre-experimental design, Pre and Post only	Pre-experimental design, Pre- and Post- Only	Other: Observational	Quasi-experimental closed cohort with a multi-level, mixed effects model
Sample size for treatment and comparison groups	All values are all members: BMI n =19,377 Cholesterol n = 19,439 Systolic BP n = 19,390 Diastolic BP n = 19,391 Glucose n = 19,378 Cotinine n = 17,607 Tobacco use n = 23,234 Alcohol n = 23,211 Stress n = 23,288 Nutrition n = 23,231 Physical activity n = 23,211	n = 20,478 employees and spouses	Eligible Employees: 19,183 employees who completed the HRA in 2012, 2013, and 2014	Low engagers: n = 8,741 Medium engagers: n = 7,973 High engagers: n = 2,019
Sample Selection Method	Employees and spouses who had at least two recorded measurements at least one year apart	Associates and spouses with complete profile of 10 risk factors, with at least two recorded measurements at least one year apart.	HRA completion in all three years 2012, 2013, and 2014	Employees who were eligible for the Vitality program no later than 3/31/2012
Data source(s)	Verified biometric results and self-reported lifestyle risk results	Verified biometric results and self-reported lifestyle risk results	Self-reported HRA responses to the WHO HPQ	Health plan claims files from Truven Analytics which were matched to health promotion data from Vitality.

Key Variable Measured	McNemar test on risk transition	Overall risk group transitions	Productivity	Healthcare costs savings
Outcome result	Statistically significant improvements in SBP and DBP, tobacco use, alcohol, stress, nutrition, and physical activity BMI, cholesterol, glucose, and cotinine increased.	Net improvement in risk groups of 9% for employees and spouses.	Overall impairment trend: 3.65% increase in performance from 2012-2014. Highly engaged employees saw a 4% increase from their 2012 measures.	Medium and high engagers saved \$13.3 million in 2014 compared to low engagers. Annual medical expenditures per employee decreased by \$1,039 in High engagers.
Analysis	McNemar test on risk factor changes	Consistent cohort analysis	Year-over-year comparisons	Costs relative to the low engager group; annual costs per employee
Relevant statistics	P < 0.05	Proportion of employees and spouses migrating between risk groups	Job performance impairment rates	P < 0.05
Publications	Currently being worked on for submission to peer-reviewed manuscripts			

Section III: Supplemental Documentation

Health Promotion Efforts

The infographic below summarizes the evolution of McKesson’s health promotion efforts over the last four years. From a very modest beginning, we have succeeded in building a culture of health in which a significant proportion of employees and spouses engage in health promotion activities throughout the year. We will continue to navigate the same course and add programs that will benefit our population’s health and add quality of life to everyone.



Company Communications

Creating awareness and helping employees navigate the wide range of offerings at McKesson is imperative. The aim of this communication was to outline a clear path to higher engagement levels by highlighting specific health promotion activities individuals can complete over the course of their journey.



Social Media Communications

Communications about healthy lifestyles and activities are extended through McKesson's social media channels. A collection of Instagram communications are presented below.



Mc mckessoncorporation Following
2 weeks ago
Good night for some rock climbing. Thanks sharing @k_heart #betterhealth #healthyw



Mc mckessoncorporation Following
4 weeks ago
Water, snacks, gym shoes. @nicoleblee makes sure to always bring the essentials with her to the gym. #betterhealth #healthyweight



Mc mckessoncorporation Following
4 weeks ago
Early morning surf session in Marin with @andrewburtis #betterl

What's your favorite healthy meal?
.....
Share your photos with us.
.....
Tag @mckessoncorporation and #betterhealth #healthyfood



Post your photos to McKesson's May Instagram!

Workforce Testimonials

Testimonials of the impact of McKesson 'You. Even better' demonstrate the creation of a culture of health among McKesson employees and their spouses.

Vitality Check Uncovers Diabetes

YOU. EVEN BETTER.

Alarming biometric screening results drive this employee to take steps toward better health.
5/5/2014

Matthew Dispenza couldn't have been more shocked by his **Vitality Check** biometric screening results.

In one year's time, his blood sugar level had tripled, putting his life at risk.

Looking back, there were reasons to be concerned. His mother and father were both diagnosed with Type 2 diabetes in their 40s and 50s.

But Matthew was only 29 years old, and his blood sugar results from the previous year were in the normal range.

Vitality Check biometric screening is a medical benefit for all U.S. employees and their spouses or domestic partners enrolled in McKesson medical plans.


Better Health Starts with Matthew

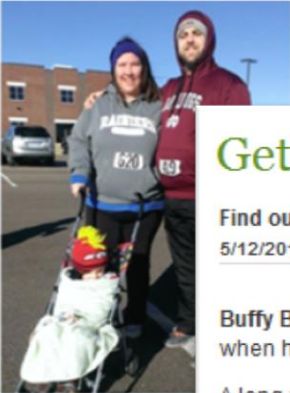
As an administrative assistant for the Jackson distribution center (DC), McKesson Medical-Surgical, Ridgeland, Miss., Matthew researches and solves shipping discrepancies, making sure each customer receives exactly what was ordered in a timely manner, helping McKesson continue positive customer relationships.

"Better health for all" requires that we meet certain needs," says Matthew. He explains that ma
nursing and assisted living facilities depend on the supplies and medications from his DC to s

Take Healthy Actions

Participate in Vitality,
McKesson's Wellness Program





Matthew Dispenza, his wife brave freezing temperatures SK race in Madison, Miss.

Getting Healthy for Sam

Find out what inspired Buffy Blake to quit smoking and lose weight.

5/12/2014

Buffy Blake got serious about taking better care of herself when her youngest son, Sam, was diagnosed with autism.

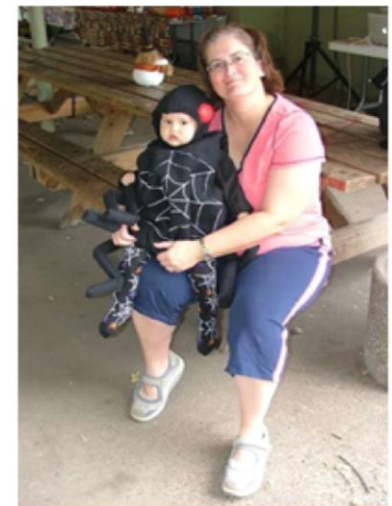
A long-time smoker who had put on weight over the years, Buffy told herself she simply had to change. "I don't know what the future holds for Sam. I have to be here a long time to help him and be his advocate," she says.

Today, thanks to **Vitality**, **Weight Watchers**, quitting smoking and exercising, Buffy is much healthier and 20 pounds lighter. And she's not done yet.

Buffy Blake

Lead Accounts Receivable Specialist
Business Performance Services
Pittsburgh
Vitality status: Platinum

Better Health Starts with Me



Buffy Blake poses with her son, Sam, last Halloween.

HERO Scorecard

As part of the Koop Award application process, we completed the HERO Scorecard to better understand and evaluate the strengths and weaknesses of our health promotion strategies. The results from our scorecard are below, and suggest that McKesson is well above the national average in companies with 5,000+ employees. In those respondents the average score was 107.

	McKesson's Score	National Average	Max # of Points
Section 1: Strategic Planning	18	10	20
Section 2: Organizational & Cultural Support	33	23	50
Section 3: Programs	29	22	40
Section 4: Program Integration	11	5	16
Section 5: Participation Strategies	44	21	50
Section 6: Measurement & Evaluation	19	8	24
Total Score	154	89	200