

Workplace Health Promotion: Policy Recommendations that Encourage Employers to Support Health Improvement Programs for their Workers

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Executive Summary

This paper addresses the question of whether health improvement as a national priority, along with the momentum behind health care reform, can be harnessed to engage more employers in adopting workplace health initiatives. The paper discusses options available to policymakers seeking to encourage employers to implement well-designed and evidence-based health promotion programs that will prompt workers to improve their health habits.

It begins by presenting research demonstrating that employer-sponsored programs have produced positive effects on workers' health, medical costs, and productivity. This is followed by a description of why it is in the national interest to support an expansion of employer-sponsored programs that use interventions of proven effectiveness. Data are cited showing that while some employers have adopted effective health promotion programs, most have not, or have put weak programs with questionable benefit in place.

Next, recommendations are put forth for ways to better disseminate to employers the knowledge and experience needed to implement health promotion programs that actually work. This is followed by recommendations for the role of government and legislative initiatives to accelerate this process. Finally, the use of financial incentives to spur employers to adopt and/or expand workplace health improvement programs for their employees is outlined.

Actions in all these areas must be taken to accomplish the goal of improving the health of Americans via workplace health programs.

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Introduction: Stating the Problem

The debate about health reform has primarily focused on increasing access to care, particularly for the uninsured, and providing affordable health insurance. Both are significant issues rightfully deserving of national interest. But a national priority that has not received adequate attention is the need to *improve* the health of Americans.

Health care is one of the top three domestic issues that concern Americans, according to results from an April 2008 poll conducted by the Kaiser Family Foundation.¹ In 2006, health care spending in the U.S. totaled \$2.1 trillion, about 16% of the Gross Domestic Product (GDP).² Most of that spending focused on treating chronic illnesses.³ These diseases strain the resources of the health care system, and society in general, as individuals who experience them generate significantly higher health care costs.⁴ As health economist Kenneth Thorpe has illustrated, almost two-thirds of the growth in national health care spending over the past 20 years can be attributed to Americans' worsening lifestyle habits, and, in particular, the epidemic rise in obesity rates.⁵

Consequently, health care costs in the U.S. continue to rise because our care delivery system favors paying for the treatment of chronic and expensive diseases rather than preventing them in the first place. For the U.S. to continue to be an economic leader worldwide, supported by a healthy and productive workforce, more attention needs to be directed toward health promotion and disease prevention as part of a comprehensive strategy for improving the health of Americans and reducing the social and financial burdens imposed by preventable illnesses.⁶

The Workplace: An Arena for Health Reform

The role of employers in improving public health has received minimal attention in discussions of health care reform, even though the potential for achieving a large-scale health and economic impact among working-age adults is undeniable. After closely examining their organizations' data, many large U.S. companies have concluded that poor health increases employees' utilization of health care services and diminishes employee performance, safety, and morale. For a business, workers in poor health, as well as those with behavioral risk factors, mean greater medical expenditures, more frequent absenteeism, increased disability, more accidents and sub-optimal productivity.⁷⁻¹⁵

Over the past 30 years, many enlightened employers put in place comprehensive, multi-component health promotion programs, and they have come to appreciate the important role these programs play in improving the health and well-being of their workers, while at the same time increasing worker productivity and reducing benefit costs.¹⁶ Many of these employers also believe that health promotion programs can significantly influence an organization's ability to attract and retain top talent who are drawn to a healthy company culture that encourages a work-life balance.¹⁷ In fact, some employers have made employee health promotion initiatives part of their overall emphasis on sustainability and corporate social responsibility.^{18,19}

While these enlightened employers have integrated comprehensive and effective health promotion programs into their workplaces, most other employers have not.¹⁶ There are several reasons why broad adoption of health promotion programs has not occurred.

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- Many employers are unaware of workplace programs;
- If they are aware that such programs exist, they are unconvinced that the programs are powerful enough to both improve health and achieve a positive financial return on investment (ROI);
- Some employers may believe that having healthy employees can have a positive effect on their business, but they may not know which program elements are most effective, or how to implement these programs on their own; and
- Some employers still feel that attending to workers' health is not a core function of business, but rather the responsibility of doctors, health plans, the government, or individuals themselves.

Workplace Health Promotion Programs

Workplace health promotion programs are employer-sponsored initiatives directed at improving the health and well-being of workers. Often their families and retirees are included in the initiative, and, in some cases, the surrounding local communities where businesses are located. The workplace presents an ideal setting for introducing and maintaining health promotion programs for the following reasons:

- Workplace programs can reach large segments of the population that normally would not be exposed to and engaged in organized health improvement efforts;
- Workplaces contain a concentrated group of people who usually live in relative proximity to one another and share a common purpose and common culture;
- Communication with workers is relatively straightforward;
- Social and organizational supports are available when employees are attempting to change unhealthy behaviors;
- Certain policies, procedures and practices can be introduced into the workplace and organizational norms can be established to promote certain behaviors and discourage others; and
- Financial or other types of incentives can be offered to gain participation in programs.

Employers also tend to have long-term relationships with their employees; as a result, the duration of interventions can be longer, making it more probable that employees will attain benefits. Also, workplace health promotion can be combined with existing efforts such as those related to health surveillance, workplace health and safety, and regulatory compliance. Finally, measuring a program's impact can be accomplished by using available administrative data collection methods and analysis systems.

Evidence of Health Improvement and Risk Reduction

The evidence supporting the positive effects of workplace health promotion has been building over the past 30 years. A systematic literature review commissioned by the U.S.

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Centers for Disease Control and Prevention (CDC) in 1995,²⁰ and more recently in 2007,²¹ concluded that well-designed, evidence-based programs built on behavioral theory can achieve long-term health and productivity improvements in worksite populations. In an earlier review, Heaney & Goetzel examined 47 peer-reviewed studies over a 20-year period²² and found that workplace programs, in spite of their variability in terms of comprehensiveness, intensity, and duration, achieved long-term behavior change and risk reduction among workers. The most effective programs were those that offered individualized risk-reduction counseling to the highest-risk employees within a “healthy company” workplace environment in which broader health awareness initiatives were already underway.

The review released in 2007 by the CDC Community Guide Task Force examined data from over 50 studies that reported workplace program participation outcomes based on a range of health behaviors, physiologic measures, and productivity indicators. When measured at an individual level, many of the changes in these outcomes were small, but at the population level they were considered substantial.²¹ Aside from reducing health risks and improving health-promoting behaviors, the task force noted that there may be additional benefits associated with workplace programs, including the following:

- Increasing worker awareness of health issues;
- Increasing detection of certain diseases, or risk for disease, at an earlier or pre-symptomatic stage;
- Referral to medical professionals for employees at high risk for disease; and
- Creation of need-specific health-promotion programs based on the analysis of aggregate results.

Evidence of Cost Savings

In addition to the benefits that workplace programs can have for employees’ health, there is also mounting research pointing to potential cost savings for employers. Several literature reviews that weigh the evidence from experimental and quasi-experimental study designs suggest that workplace programs using tailored communications and individualized counseling for high-risk individuals are likely to produce a positive ROI; that is, for every dollar invested over a three-year period, the ROI ranges from about \$1.40 to \$4.70..(14, 23-26)

Studies often cited for the strongest research designs and the large numbers of subjects include those performed at the following organizations: Johnson and Johnson,²⁷⁻²⁸ Citibank,²⁹ Dupont,³⁰ Bank of America,^{31,32} Tenneco,³³ Duke University,³⁴ the California Public Retirees System,³⁵ Procter and Gamble,⁹ Highmark,³⁶ and Chevron Corporation.³⁷ Even taking into consideration inconsistencies in design and results, most of these workplace studies have produced positive financial outcomes. However, it is important to be cautious about drawing overly optimistic conclusions from company- or industry-sponsored research.

Best and Promising Practices in Workplace Health Promotion

Not all workplace health promotion programs are created equal. As Goetzel and Heaney observed, there is much variation in program design and execution.²² What, then, constitutes best and promising practice? The first step in trying to answer that question is examining the most effective programs, in terms of outcomes, in a series of benchmarking studies, and then identifying common themes.³⁸⁻⁴²

For example, Goetzel identified these six elements frequently found among best practices:

- Organizational commitment;
- Incentives for employees to participate;
- Effective screening and triage;
- State-of-the-art theory and evidence-based interventions;
- Effective implementation; and
- Ongoing program evaluation.

Similarly, O'Donnell and colleagues⁴⁰ identified the following characteristics of sustainable programs:

- Linking of program to business objectives;
- Executive management support;
- Effective planning;
- Employee input when developing goals and objectives;
- Wide variety of program offerings;
- Effective targeting of high-risk individuals;
- Incentives to motivate employees to participate in the program, leading to high participation rates;
- Program accessibility;
- Effective communications; and
- Evaluation of effectiveness.

Others have observed that best practice employers implement several interconnected programs and policies that support workers' health improvement. These employers provide workers with affordable health insurance and ready access to recommended clinical preventive services and health promotion programs (i.e., those advocated by the U.S. Preventive Services Task Force Guide to Clinical Preventive Services and the Centers for Disease Control and Prevention Community Guide to Preventive Services.⁴³ These companies also offer health risk assessments (HRAs) and health screenings to individual workers, and sometimes family members as well. This step is followed by triaging them to risk-appropriate behavior change programs that may provide motivational interviewing, goal setting, and coaching. When structured properly, these programs are tailored to accommodate individual needs and learning styles and are delivered through diverse modalities. For example, the Internet is highly suitable

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for some employees but not for others. This means that additional delivery channels must be used, such as in-person or telephone counseling and printed materials.

Many organizations have also introduced a variety of interventions that support health improvement efforts. For example, company policies directed at reducing smoking rates include banning smoking on company grounds and reimbursing employees for participation in smoking cessation programs.

When addressing overweight and obesity, some employers have intervened by making significant changes to the workplace environment. These interventions include the following:

- Offering healthy food options in cafeterias, vending machines and at company-sponsored events;
- Introducing point-of-decision signs encouraging stairway use;
- Providing facilities with showers ;
- Allowing flexible work schedules to accommodate physical activity during the work day;
- Providing reimbursement for use of community fitness centers; and
- Building or opening up facilities and areas that can be used for physical activity and exercise, such as on-site fitness centers, walking paths, and bike trails.

Broadening the Adoption of Best and Promising Practices

Although the workplace programs described above have been shown to produce positive health and financial results, knowledge about the relative merits of specific program elements that constitute best practice is still evolving. And while some organizations have fully exploited the latest and most “cutting-edge” research, many more stand on the sidelines largely because they have not been exposed to this evidence base or they lack the technical skills and experience to implement effective programs.

A 2004 survey of workplace health promotion programs fielded by the Office of Disease Prevention and Health Promotion reported that only about seven percent of U.S. employers offered a comprehensive program containing the five best practice elements considered vital to achieving meaningful and sustainable outcomes. These elements are the following:

- Health education;
- Links to related employee services;
- Supportive physical and social environments for health improvement;
- Integration of health promotion into the organization’s culture; and
- Employee screenings with adequate treatment and follow-up.¹⁶
- Special Challenges that Small Employers Face

Small businesses, defined as those with fewer than 500 workers, make up about 99 percent of employers in America and employ over half of the private sector workforce.⁴⁴ But many of these smaller employers do not have the resources to implement effective, evidence-based worksite health promotion programs. According to the above referenced 2004 National Worksite

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Health Promotion survey, only 11 percent of worksites with 50-99 employees used health risk assessments, compared with 45 percent of those with more than 750 employees.¹⁶ The same survey found that less than five percent of the sites with 50-99 employees, compared with 24 percent of sites with more than 750 employees, offered a “comprehensive” workplace health promotion program.¹⁶

This disparity between large and small employers is not surprising. Small businesses often lack dedicated resources such as internal experts who know how to design and organize a health promotion program or can commit the time to these programs.⁴⁵ Furthermore, small businesses tend to have lower profit margins than larger employers, making it difficult for them to invest in and sustain health promotion programs.⁴⁶ In addition, health and safety regulations can overwhelm small businesses, making them unlikely to establish health-related programs that are not mandated by law.⁴⁵

Small employers also have limited access to commercial workplace vendors. Although many health insurance providers offer some types of health promotion programs, these often lack depth and are only provided through the medical care delivery system. Further, health plans and insurers cannot influence company culture, introduce new health-promoting policies, create supportive environmental interventions, or model senior leadership support for programs.

Besides, many small businesses do not even offer health insurance. Although 99 percent of large firms (200 or more workers) offered health benefits in 2007, only 59 percent of small firms (3-199 workers) did so.⁴⁷ Even among small employers that offer insurance, they often purchase fully-insured policies from a third-party broker or small insurer; whereas large employers have greater flexibility in their plan designs, are more likely to be self-insured and therefore more engaged in managing their employees’ health and health care utilization.

In spite of these challenges, small employers do have certain advantages over large businesses. These advantages can be leveraged to help in developing and sustaining health promotion programs. For example, small employers tend to have a visible and accessible senior leader, or leaders, who may exemplify good health practices and become internal champions for health-promoting behaviors. In a small business, it is often easier to communicate with employees on a personal basis and create a sense of community among workers. Human resources managers can develop close and trustworthy relationships with workers.⁴⁸ Nonetheless, challenges abound for small and large employers wishing to implement evidence-based programs that achieve health and financial benefits.

What is necessary in order to increase the number of employers providing workplace programs? More communication, dissemination, and application of effective health promotion methods need to occur for programs to be considered a standard benefit rather than an optional one. But more is needed beyond just informing employers about these practices. With support from private and public sector partners, employers require the tools and technical assistance to implement effective workplace programs.

Recommendations for Broadening the Implementation of Workplace Health Promotion Programs

This section presents Partnership for Prevention recommendations for expanding workplace health promotion programs. It is divided into three sets of recommendations in the following areas: communication and dissemination activities, the role of government, and the role of financial incentives. Actions in all three areas must be taken to extend the number and quality of workplace health promotion programs.

Communication and Dissemination Activities

Below are ways that government can support the dissemination and application of best practice knowledge to many more employers so that the number of workplace health promotion programs can be greatly expanded.

- Improve employer communication and education about the benefits of health promotion. As stated above, much is known but not enough is communicated about the benefits employers can realize by introducing effective health promotion programs. Innovative approaches are needed to communicate the economic costs associated with poor health and the options available to reduce health risks. Federal, state, and local health agencies, alone and in partnership with businesses, should leverage their extensive marketing and communication networks to share information about exemplary programs to employers. Such a communications campaign would include the following:
 - a. A broader disseminating of results from scientific studies;
 - b. Writing industry-specific trade journal articles;
 - c. Convening business group meetings on workplace topics;
 - d. Preparing media kits and issuing press releases; and
 - e. Making presentations at conferences frequented by business leaders.

It is important that communications target influential business leaders who have had success with workplace health promotion programs to serve as their champions. These leaders, key stakeholders with substantial influence, would be tapped to become ardent, visible advocates of workplace health promotion. They would emphasize to their corporate peers why these programs are so important to the continued success of American business. Bringing the discussion of workplace health promotion into the debate about health reform will draw attention to the role workers' health plays in improving the economic vitality of the nation.

- Increase funding for applied health promotion research set in “real-world” business settings. Although there has been a modest increase in funding for evaluations of workplace health promotion programs (recent examples of studies funded by federal agencies specific to workplace programs include the CDC Workplace Health Protection Research Initiative⁴⁹ and the National Heart, Lung, Blood Institute (NHLBI) Environmental Interventions to Address Overweight and Obesity at the Workplace,⁵⁰ overall funding for employer-based

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studies is still meager compared to traditional funding of laboratory research. Until recently, much of the workplace research emanated from the private sector and was paid for by private sources. Consequently, even though the research is growing in both volume and rigor, it is still primitive. To enhance knowledge and dissemination from workplace health promotion programs, more government support is needed for studying the science underlying workplace-based programs and the effectiveness of these programs in improving health, lowering costs, and increasing worker productivity. In addition, research is needed to better understand how best practices can be translated and successfully adapted for small businesses. An increase in funding for applied research can be accomplished by re-setting priorities of funding agencies so that more research dollars become available for studies conducted in workplaces. Once results are obtained, regular forums can be held for employers, providers, vendors, union officials, employees, academicians, consultants, and health plan personnel to review the findings and formulate recommendations for further applied research and applications.

- Develop tools and resources to support employer efforts in health promotion. Several tools and resources for workplace health promotion have already been developed and disseminated with the support of government funding. These include the CDC's Employer Guide for Preventing Cardiovascular Disease,⁵¹ the CDC/National Business Group on Health Employer Guide to Clinical Preventive Services,⁵² CDC Lean for Life Employer Toolkit,⁵³ and the New York City Department of Health and Mental Hygiene Wellness at Work Program.⁵⁴ Additional tools and resources are needed to help employers design, implement, and evaluate their workplace programs. These tools will enable employers to prepare business cases for health promotion programs, identify competent partners from the private and public sectors, and evaluate both health-related and financial outcomes from their programs.
- Pilot innovative health promotion programs at federal, state, and local departments and agencies. It is ironic that most government agencies, which have conducted research on health promotion program, have not implemented evidence-based programs for their own employees and dependents. Some noteworthy exceptions can be found in King County, Washington, and the State of Delaware, where extensive health promotion programs are now being implemented and evaluated.^{55,56} Many more government agencies are considering implementing innovative health promotion programs directed at their own employees. These programs should be designed in consultation with scientists and industry experts prior to being implemented and then be rigorously evaluated. In this way, they can function as experimental employer laboratories that inform models of successful program execution, allowing them to be emulated by other public and private organizations.
- Honor and reward America's healthiest organizations. Government agencies at national, state, and local levels should continue to recognize and reward innovative organizations that have successfully implemented health promotion programs. Current award programs include the following: U.S. Department of Health and Human Services' (U.S. DHHS) Secretary's Innovation in Prevention Award;⁵⁷ Health Project C. Everett Koop National Health Award;⁵⁸ Institute for Health and Productivity Management (IHPM);⁵⁹ American College of Occupational and Environmental Medicine (ACOEM);⁶⁰ and the Wellness Councils of America (WELCOA) National Awards.⁶¹

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These and related efforts recognize organizations and leaders who have documented improved health and cost savings from workplace programs. While the above award programs are noteworthy, an even higher visibility annual award to businesses demonstrating effective leadership in health promotion would bring increased attention to these employers. It would also elevate their stature as innovators in the field. To stay competitive and to attract and maintain top talent, other businesses would take notice and either adopt or enhance their own workplace programs.

- Create an employers' health promotion resource center. A government-supported resource center would collect, develop, and disseminate objective, easy-to-use, and accessible workplace health promotion information and act as a clearinghouse for resources, tools, and expertise to support employer efforts. Employers could then judge the relative merits and cost-effectiveness of alternative health promotion models. The information disseminated would be vetted by respected outside experts (similar to the way the CDC Community Guide Task Force reviews scientific evidence concerning the effectiveness of community-based prevention programs⁶² to ensure accuracy and objectivity. Specific tasks for this resource center would include the following: evaluating and disseminating benchmarks for health promotion programs and policies; creating a health promotion surveillance and tracking system that monitors current employer efforts and disseminates information related to design, implementation, and evaluation of programs; developing a clearinghouse for information on health promotion vendors; evaluating health promotion tools currently in use in the marketplace; and ensuring that the evidence-based information on health promotion is readily available to employers in an easy-to-use form.
- Establish a public-private technical advisory council. While many large employers can afford to hire expert consultants who help them structure effective programs, smaller employers often cannot. A public-private technical advisory council would draw upon the expertise of private consultants and experts in government, who would volunteer their time to support employers wishing to implement health promotion programs. The council would be set up in a similar fashion as other government advisory panels, including the U.S. Preventive Services Task Force and the Community Guide Task Force. The technical advisory council would help organizational leaders develop the business case for health promotion; structure needs assessments and baseline diagnostic studies; establish realistic goals for program outcomes; advise on the design of evidence-based interventions based on solid theoretical foundations; communicate learning from benchmarking studies and exemplary practices; support the transfer of knowledge and experience from large employers to small- and medium-sized organizations; and advise the government on systems for measuring and evaluating outcomes.
- Establish collective purchasing consortia for small employers. Federal agencies should establish collective health promotion purchasing consortia similar in design to multi-employer trusts. These consortia would define common health and business objectives for employers in a given community, achieve consensus on health promotion program designs, issue requests for proposals to vendors and health plans, and support the establishment of performance guarantees related to the success of these programs. Another important aspect is that purchaser consortia would include a requirement for vendors to support rigorous, independent evaluations of the health and economic outcomes from their programs, with reasonable definitions of success and a timetable for reporting results. Making the results of

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such evaluations public and transparent would further enhance the credibility of public and private sector programs and weed out ineffective programs.

- Support establishment of health promotion program certification and accreditation programs. Several established review and accreditation organizations, such as the National Committee for Quality Assurance (NCQA), the Utilization Review Accreditation Committee (URAC), and the Health Enhancement Research Organization (HERO), have introduced review processes focused on workplace health promotion vendors and health plans. Their goal is to objectively assess the quality of programs offered by these providers.^{16,63,64} These formal certification efforts build upon previous efforts to standardize and codify best and promising workplace practices criteria developed by the American Productivity and Quality Center (APQC), the Wellness Councils of America (WELCOA), the National Business Group on Health (NBGH), the American College of Occupational and Environmental Medicine (ACOEM), and the Institute for Health and Productivity Management (IHPM).^{59-61, 65,66} Support of these accreditation and certification initiatives is important for a number of reasons. First, these initiatives will help establish minimum standards for quality and performance against which vendors and others engaged in implementing workplace programs will be measured. Overall performance and the quality of workplace programs should improve as underperforming vendors and programs are eliminated because of their low grades. Second, having access to objective reviews of health promotion vendors and programs will help purchasers make more informed decisions about the value of these programs. Finally, the level of interest and activity in this area will inspire more employers to pay attention to this field, ultimately encouraging them to purchase health promotion programs without being prompted to do so by legislation or other government regulations.

The above recommendations combine public and private efforts at promoting dissemination and application of best practice workplace programs. In the next section, additional ways that government can accelerate the establishment of workplace health promotion programs are outlined.

Government's Role in Promoting Workplace Health Promotion

An important issue particularly relevant to businesses is the extent to which government levers can or should be applied to influence employer actions. Thus far, government actions promoting wider communication, dissemination, and support activities related to workplace health promotion have been discussed. But no recommendations for introducing new regulations or mandates requiring employers to offer workplace programs have been suggested. While there are many examples of how government regulations and policies have positively influenced employee health promotion and protection, especially in the area of workplace safety, businesses are understandably resistant to new rules and mandates; they are often viewed as excessive government meddling and the imposition of additional regulatory and administrative burdens. Many employers would prefer government to not place restrictions on their activities and instead allow free market forces determine employers' involvement in health promotion initiatives. From this standpoint, if workplace health promotion programs can be shown to be a wise business investment that potentially can produce a positive ROI, then businesses will quickly adopt such programs on their own.

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Recent turbulence in financial markets has prompted many to revisit the role of government in regulating business activity. The U.S. economy is facing unprecedented challenges, not the least of which is maintaining a healthy and productive workforce. That is complicated by the increasing cost to business of providing health care to millions of workers suffering from chronic diseases brought on, in many cases, by unhealthy lifestyles and poor health habits.

Hence, a debate that underlies any discussion of health reform is how to optimally balance the role of free market forces with government regulations. This debate also highlights the differing opinions between those who believe that it is largely up to the individual to protect his/her health and those who think that society has a responsibility to promote and protect the health of workers.

For health reform to incorporate workplace health promotion as a core component, proponents must assume a non-partisan stance and achieve a compromise between government mandates and market forces. This can be achieved if employers are given tax incentives for introducing or expanding workplace health promotion programs. This solution can be viewed as a hybrid model, in which government incentives spur free market forces to adopt workplace programs.

Recommendation Regarding Financial Incentives for Health Promotion

An immediate and effective way to capture the attention of business leaders would be to provide them with financial incentives to establish and maintain effective health promotion programs. How would these incentives work? In one proposal advocated by several legislators in Congress, the government would provide tax credits to employers implementing *bona fide* health promotion programs at the workplace as certified by the Secretary of HHS in coordination with the Director of the CDC. Tax credits would partially reimburse employers for the costs of providing a qualified health promotion program.

To qualify for such incentives, workplace programs would need to satisfy the following requirements: be consistent with evidence-based research and best practices, have multiple components so that they are comprehensive, and attract employee populations disproportionately burdened by health and health care problems, including those working in small businesses. Additionally, the program would need to contain components focused on health awareness, education and behavior change, and also be conducted in a supportive environment. The tax credit would be paid through a payroll tax refund so that all employers who pay wages, including state and local governments and tax-exempt, not-for-profit organizations, would benefit. Employers with existing programs would receive the tax credit for a given time period (e.g., up to three years), and employers without programs would receive it for a longer period (e.g., up to five or ten years). To maximize the use of this incentive, the Secretary of the Treasury would institute an outreach program to inform businesses about the availability of health promotion program tax credits.

It is fair to say that the notion of providing financial incentives for businesses to adopt health promotion programs has encountered some degree of skepticism. Why, critics ask, should the government subsidize an activity that many believe will produce cost savings for the employer? Why wouldn't employers introduce these programs on their own without a government subsidy,

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since employers invest in new machinery, training programs, and new production processes without government financial support?

This argument makes sense if employers are already aware of the benefits of workplace health promotion programs and have the technical know-how required to implement effective programs. Unfortunately, as noted earlier, most employers do not have the knowledge or the capability to implement the critical components of successful, comprehensive health promotion programs. Dissemination activities such as those proposed earlier would help employers identify the need for workplace programs. But a tax incentive would serve to encourage more employers, especially those with limited resources, to adopt health promotion as a business strategy. It would also help employers choose qualified vendors as partners. Without this additional financial motivation, an investment in employees' health is likely to be considered cost prohibitive.

The Value of Instituting Health Promotion in the Workplace

Although the focus of this paper has been on workplace initiatives, many problems have emerged because of decisions made by governments at the national, state, and community levels. The obesity epidemic in the United States illustrates this point. Factors such as government agricultural subsidies for unhealthy foods; poor urban planning that encourages the use of motor vehicles; inadequate support for public transportation system; sub-par workforce education; and lack of public safety in certain communities, which has the effect of curtailing physical activity, have contributed to the problem. If, as a result of some of these decisions, people then become obese, they often lack the motivation, skills, and supportive infrastructure needed to improve their behaviors even if they are generally aware of what constitutes healthy or unhealthy behavior. The question then becomes how to provide people who have a range of health problems with the structure they need to improve their situation.

Clearly, there are ways for government initiatives to try to reverse the effects of previous decisions and, as a result, help individuals facing health problems. Support of walkable communities, smoke-free workplaces, affordable healthy food, access to clinical preventive services, and the establishment of infrastructures that support healthy lifestyles are examples of how to affect in a positive way the population's health. But tackling these larger societal health issues through government initiatives is more complex and difficult than implementing some of the more direct actions proposed here for employers. To that end, changing the environment and incentive structures at workplaces may positively affect, perhaps significantly so, larger societal health improvements that translate into economic growth.

Conclusions

The adoption of workplace health promotion programs by more employers can exert a strong influence on improving the health and well-being of Americans. Therefore, they should play a central role in health care reform initiatives likely to be advanced in the next few years. Bringing employer-sponsored health promotion to national attention can be accomplished in several ways. First, there needs to be a clear alignment of goals and incentives among the diverse players in the health reform landscape, including employers, providers, health plans, pharmaceutical companies, health device manufacturers, public entities, communities, and government. All of

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these stakeholders essentially seek to promote public health and prevent disease, and accomplish this in a cost-effective way. Since most working-age adults spend a significant portion of their time at work, the workplace offers an excellent setting for building awareness of health and lifestyle issues, providing motivation and support for health improvement, and creating workplace environments in which practicing healthy behaviors is “easy” and encouraged by the organization.

To achieve these aims, the authors recommend passage of legislation that prompts employers to invest more in workplace health promotion programs. Specifically, it is recommended that tax credits be given to employers that institute or enhance workplace programs, an approach that underscores the benefits of public-private partnerships. In addition, the authors favor the passage of bills that would introduce workplace wellness education campaigns and evaluations of employer-based health promotion programs.

Employers and proponents of health promotion programs are perfectly aligned in terms of their goals: keeping people healthy and containing ballooning health care costs. Most employers understand that their health care spending is primarily consumed by “sickness” care, not prevention and health improvement, and that spending is significant.⁶⁷ They also recognize that by spending more on health care they are limiting their ability to hire additional workers, increase wages, and provide other benefits to their workers. As part of the anticipated debate regarding health care reform, more attention should be directed at understanding the value of workplace health promotion programs in achieving long-term improvements in the health and well-being of Americans.

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