No.	Program focus	Program delivery	Citation
Studie	s of employee health	n care costs	
1	N Cm Ct W	HRA, OI, Os, Sc	Novdeck PL et al. The impact of the Highmark Employee Mollages Programs on 4 Year Healthours Costs. I Occup Environ Med. 2000; 50(2): 446-456
2	N, Sm, St, W Personalized	HRA, OI, OS, SC HRA, Sc, F, Pro	Naydeck BL, et al. The impact of the Highmark Employee Wellness Programs on 4-Year Healthcare Costs. J Occup Environ Med. 2008; 50(2): 146-156. Aldana SG, et al. Influence of a mobile worksite health promotion program on health care costs. Am J Prev Med. 1993; 9: 378-383.
3	Personalized	HRA, Ed, Co, I	Ozminkowski RJ, et al. A return on investment evaluation of the Citibank, N.A., Health Management Program. Am J Health Promot. 1999; 14: 31-43.
3	reisonalizeu	HRA, Eu, Co, I	Bly JL, et al. Impact of worksite health promotion on health care costs and utilization: evaluation of Johnson & Johnson's Live for Life Program. JAMA. 1986; 256:
4	Sm. N. W. St. BP	HRA. CW. Os	3235-3240.
5	Personalized	HRA, Ed, L	Leigh J, et al. Randomized controlled study of a retiree health promotion program: the Bank of America study. Arch Int Med. 1992; 152: 1201-1206.
5	r er sorializeu	TINA, Lu, L	Fries JF, et al. Randomized controlled study of a reflece health promotion program: the Bank of America study. Arch filt wied. 1992, 132: 1201-1200. Fries JF, et al. Randomized controlled trial of cost reductions from a health education program: the California Public Employees' Retirement System (PERS) study.
6	Personalized	HRA. Ed. L	Am J Health Promot. 1994; 8: 216-223.
7-9	W, Sm, N, St, BP, A	, -,	Shi L. Health promotion, medical care use, and costs in a sample of worksite employees. Eval Rev. 1993; 17: 475-487.
10	W, OIII, N, OI, DI , A	Os	Shephard RJ, et al. The influence of an employee fitness and lifestyle modification program upon medical care costs. Can J Public Health. 1982; 73: 259-263.
11	Personalized	HRA, Ed	Fries JF, McShane, D. Reducing need and demand for medical services in high risk persons. West J Med. 1998; 169: 201-207.
12	Personalized	HRA, CW, Sc, Os	Musich SA, et al. Effectiveness of health promotion programs in moderating medical costs in the USA. Health Promot Int. 2000; 15: 5-15.
13	W, BP, Sm, Ch, P	HRA, Co, I	Goetzel RZ, et al. Health care costs of worksite health promotion participants and non-participants. J Occup Environ Med. 1998; 40: 341-346.
10	VV, DI , OIII, OII, I	11101, 00, 1	Sciacca J, et al. The impact of participation in health promotion on medical costs: a reconsideration of the Blue Cross and Blue Shield of Indiana study. Am J Health
14	Sm, W, N, A	HRA, Co, Fu	Promot. 1993; 7: 374-395.
15	Sm, W, N, A	HRA, Co, Sc, Fu	Gibbs JO, et al. Work-site health promotion; five year trend in employee health care costs. Occup Med. 1985; 27: 826-830.
	OIII, **, 14, 74	111 0 1, 00, 00, 1 0	Stave GM, Muchmore L, Gardner H, Quantifiable Impact of the Contract for Health and Wellness: Health Behaviors, Health Care Costs, Disability, and Workers'
16	Sm, N, W, St, P	HRA, CW, I	Compensation. J Occup Environ Med. 2003; 45(2): 109-117.
17	Personalized	HRA, Ed, Os, CW, Co, I	
18-20	BP	Sc, Co, Fu, Pro	Foote A, Erfurt JC. The Benefit to Cost Ratio of Work-Site Blood Pressure Control Programs. JAMA. 1991; 265(10): 1283-1286.
21	W	HRA, Os	Baun WB, et al. A preliminary investigation: effect of a corporate fitness program on absenteeism and health care cost. J Occup Med. 1986; 28: 18-22.
		,	Goetzel RZ, et al. Differences between descriptive and multivariate estimates of the impact of Chevron Corporation's Health Quest program on medical expenditures
22	W, N, St, P	HRA, Os	J Occup Environ Med. 1998; 40: 538-545.
	s of employee abser		
1	Personalized	HRA, Ed, L	Leigh J, et al. Randomized controlled study of a retiree health promotion program: the Bank of America study. Arch Int Med. 1992; 152: 1201-1206.
2-4	W, Sm, N, St, BP, A	HRA, Ed, CW, Pro	Shi L. Health promotion, medical care use, and costs in a sample of worksite employees. Eval Rev. 1993; 17: 475-487.
5	Personalized	HRA, Ed, CW, L	Mills PR, et al. Impact of a health promotion program on employee health risks and work productivity. Am J Health Promot. 2007; 22(1): 45-53.
6	Sm, W	HRA, CW, I	Jeffery RW, et al. Effects of work-site health promotion on illness-related absenteeism. J Occup Med. 1993; 35(11): 1142-1146.
7	Sm, W, St, N, BP	HRA, CW	Jones RC, et al. A study of a work site health promotion program and absenteeism. J Occup Med. 1990; 32: 95-99.
8	Sm, W, St, Ch, P	HRA, Ed, Co, Os	Bertera RL. The effects of workplace health promotion on absenteeism and employment costs in a large industrial population. Am J Public Health. 1990; 80: 1101-5.
9	W, personalized	Ed, Os, F	Blair SN, et al. Health promotion for educators: impact on absenteeism. Prev Med. 1986; 15: 166-175.
10	W	Os	Shephard RJ, et al. The influence of an employee fitness and lifestyle modification program upon medical care costs. Can J Public Health. 1982; 73: 259-263.
11	Personalized	HRA, Ed	Fries JF, McShane, D. Reducing need and demand for medical services in high risk persons. West J Med. 1998; 169: 201-207.
			Stave GM, Muchmore L, Gardner H. Quantifiable Impact of the Contract for Health and Wellness: Health Behaviors, Health Care Costs, Disability, and Workers'
12	Sm, N, W, St, P	HRA, CW	Compensation. J Occup Environ Med. 2003; 45(2): 109-117.
13	W	HRA, Os	Baun WB, et al. A preliminary investigation: effect of a corporate fitness program on absenteeism and health care cost. J Occup Med. 1986; 28: 18-22.
14	Personalized	HRA, Sc, Co	Schultz ALC, et al. Influence of participation in a worksite health promotion program on disability days. J Occup Environ Med. 2002; 44: 776-780.
15	Sm, W, N, P	HRA, Ed, Co, Os, F, I	Serxner S, et al. The impact of a worksite health promotion program on short term disability usage. J Occup Environ Med. 2001; 43: 25-29.
16	W	Os, F	Lechner L, et al. Effects of an employee fitness program on reduced absenteeism. J Occup Environ Med. 1997; 39: 827-831.
17	Sm, W, St, N, BP	HRA, Ed, Sc, Co, F	Knight KK, et al. An evaluation of Duke University's Live For Life health promotion program on changes in worker absenteeism. J Occup Med. 1994; 36: 533-536.
18	Sm, W, St, P	HRA, Ed, CW, Os, F, I	Bertera RL. Behavioral risk factor and illness day changes with workplace health promotion: two-year results. Am J Health Promot. 1993; 7(5): 365-73.
19	W	Os, F	Lynch WD, et al. Impact of a facility-based corporate fitness program on the number of absences from work due to illness. J Occup Med. 1990; 32(1): 9-12.
			Wood EA, Olmstead GW, Craig JL. An Evaluation of Lifestyle Risk Factors and Absenteeism After Two Years in a Worksite Health Promotion Program. Am J Health
20	Sm, W, St, P	HRA, Ed, L, I	Promot. 1989; 4(2): 128-133.
			Stein AD, Shakour SK, Zuidema RA. Financial incentives, participation in employer-sponsored health promotion, and changes in employee health and productivity:
21	Sm, W, St	HRA, CW, Os, I	HealthPlus Health Quotient Program. J Occup Environ Med. 2000; 42(12): 1148-55.
22	W, N, P	Ed, L, I N = nutrition. St = stress.	Aldana SG, et al. Financial impact of a comprehensive multisite workplace health promotion program. Prev Med. 2005; 40: 131-137.

W = weight, Sm = smoking, N = nutrition, St = stress, BP = blood pressure, A = alcohol, Ch = cholesterol, P = prevention

HRA = health risk assessment, Ed = education materials, F = fitness, Fu = follow-up, I = incentives, L = personalized letters, Co = counseling, CW = classes or workshops, OI = online programs, Os = on-site programs, Sc = screening, Pro = professionals involved (physicians, nurses, etc.)

Supplemental Exhibit 3. Studies of employee health care costs

• •		Sam	ole size	Treatment (T)			Control (C)			T–C		∆Post–
No.	Yrs	Treat	Control	Pre	Post	Δ	Pre	Post	Δ	∆Pre	$\Delta Post$	∆Pre
Rand	Randomized control trial or matched control group											
1	4.0	1890	1890	1531	2907	1376	1427	3429	2002	104	-522	-626
2	2.0	340	340	1739	1459	-280	1198	1107	-91	541	351	-189
3	3.2	11194	11644	2736	3411	676	2896	4136	1239	-161	-724	-563
4	5.0	8451	2955	247	655	408	253	1234	981	-7	-579	-573
5	1.0	919	867	2171	1695	-476	1881	1995	114	290	-300	-590
6	1.0	21170	719	2336	2937	601	2048	2905	856	287	32	-255
7	1.5	301	412	1891	1621	-270	1970	1710	-259	-79	-89	-11
8	1.5	180	412	2036	1283	-752	1970	1710	-259	66	-427	-493
9	1.5	295	412	1986	1485	-501	1970	1710	-259	16	-225	-242
Non-	Non-randomized or unmatched comparison group											
10	1.0	392	142	294	296	3	295	396	102	-1	-100	-99
11	0.5	2586	50576	1616	1185	-432	500	419	-81	1116	766	-351
12	6.0	1272	244	2140	2337	197	1825	2908	1083	315	-571	-886
13	3.0	3993	4341	1620	2008	388	1647	2596	949	-27	-588	-561
14	5.0	388	355	1159	2397	1238	825	1701	875	334	696	363
15	5.0	667	892	695	1687	992	605	1977	1372	89	-290	-380
Post-	Post-intervention data only											
16	4.0	1275	2687		3222			3909			-687	
17	5.0	13048	13363		4176			4454			-278	
18	4.0	337	321		2078			1672			406	
19	4.0	367	343		1772			1346			426	
20	4.0	183	184		1128			979			149	
21	2.0	221	296		1256			2424			-1168	
22	2.5	950	6640		1413			1396			17	

All figures denote health care costs per employee per year, in 2009 dollars

Source: Authors' calculations based on studies described in Appendix Table 1

Supplemental Exhibit 4. Studies of employee absenteeism Treatment

	Treatment											
		Sample size		(T)		Control (C)		T–C		∆Post–	Savings	
No.	Yrs	Treat	Control	Pre	Post	Pre	Post	ΔPre	$\Delta Post$	∆Pre	in wage*	
Rand	Randomized control trial or matched control group											
1	1.0	919	867	36.0	34.4	36.0	38.8	0.0	-4.4	-4.4	\$721	
2	1.5	301	412	5.0	4.7	5.1	4.8	-0.1	-0.1	0.0	\$0	
3	1.5	180	412	5.2	3.2	5.1	4.8	0.2	-1.5	-1.7	\$280	
4	1.5	295	412	5.2	4.1	5.1	4.8	0.1	-0.7	-0.8	\$131	
5	1.0	266	1242	4.6	4.2	7.0	9.1	-2.4	-4.9	-2.5	\$413	
6	2.0	597	645	18.0	13.5	19.1	18.2	-1.1	-4.7	-3.6	\$590	
7	2.0	1406	487	5.9	5.6	5.3	6.0	0.6	-0.4	-1.1	\$173	
8	2.0	29315	14573	5.7	4.9	5.2	4.9	0.5	0.0	-0.5	\$82	
9	1.0	2546	7143	5.6	5.5	6.0	6.2	-0.4	-0.8	-0.4	\$70	
Non-	Non-randomized or unmatched comparison group											
10	1.0	392	142	0.3	0.1	0.1	0.5	0.1	-0.4	-0.6	\$92	
11	0.5	2586	50576	3.9	3.0	1.6	1.5	2.3	1.5	-0.8	\$123	
12	4.0	1275	2687	3.1	2.3	3.1	3.3	0.0	-1.0	-1.0	\$167	
13	2.0	221	296	8.7	9.0	10.0	12.4	-1.3	-3.4	-2.1	\$342	
14	6.0	2596	1593	6.6	17.2	6.6	23.3	0.0	-6.1	-6.1	\$1,000	
15	2.0	450	1178	29.2	27.8	33.2	38.1	-4.0	-10.3	-6.3	\$1,033	
16	1.0	469	415	12.4	11.0	14.3	14.2	-2.0	-3.2	-1.2	\$203	
17	4.0	3122	1850	9.1	10.2	9.1	10.8	0.0	-0.6	-0.5	\$88	
18	2.0	7178	7101	3.2	3.0	2.9	2.9	0.3	0.1	-0.2	\$33	
19	2.0	2232	5863	4.4	3.7	5.6	5.5	-1.2	-1.8	-0.6	\$102	
20	2.0	688	387	2.5	2.6	2.9	4.3	-0.4	-1.7	-1.4	\$225	
Miss	Missing group-level data											
21	3.0	727	1950							-0.7	\$115	
22	2.0	1264	4982							-3.0	\$492	

Source: Authors' calculations based on studies described in Appendix Table 1.

Absenteeism figures denote absenteeism days per employee per year
* Using uniform wage rate of \$20.49/hour, Bureau of Labor Statistics, 2009 (assuming 8 hours/day)