

Best practices for a successful health screening program

Identify risk. Connect to care.
Empower better health.

Identify health risks in your employee population



Biometric health screenings provide data and insights that can motivate individuals to improve their health. Screenings also provide valuable data about your population that can be used to identify key population health trends.

At the end of every Quest Diagnostics screening program, employers are provided with population-level aggregate reporting.* This report provides insights about your employee population that can help guide planning for benefits and well-being initiatives. For multi-year programs, cohort reporting is also available to track changes in the health of your population.



Building a successful screening program

When designing your program there are a variety of factors to ensure you receive the most valuable population-level data for your organization. As a leader in population health with over 3.5 million participants screened every year, Quest Diagnostics has the experience to provide insight around screening best practices. By answering the questions that follow, you can build a program that makes the most sense for your organization.

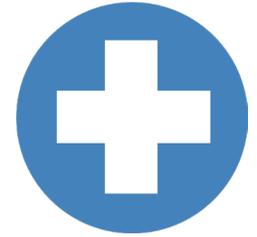


“The only reason I was alerted that I had an issue was because I now worked for an employer who used venipuncture testing with a comprehensive panel. All along I just thought I was tired because I am on the go with two young children. Had I still been with a company using fingerstick screening, I might still be in the dark to what was really going on inside my body.”

-Grace Hanne, screening participant

What is the goal of your screening program?

The testing panel and ways employees can complete screenings are essential decisions for any screening program. Instead of simply looking at the differences between screening panels and testing options, however, it is better to examine your overall goals and desired outcomes.



- **My goal is helping employees know their numbers**
 - Both fingerstick and venipuncture screenings are beneficial in improving health literacy. With a venipuncture panel, though, additional test measures are available. These measures may help lead to a diagnosis that would have been missed with a fingerstick screening.
- **My goal is to offer comprehensive population health screenings.**
 - With venipuncture screenings, you have access to additional tests that support a more comprehensive view of your population's health. Additional tests include hemoglobin A1c, cotinine, hsCRP, TSH, PSA, and CBC. Some additional measures are also available with fingerstick screenings, but require use of a dried blood spot collection card in addition to the fingerstick.
- **My goal is to give employees actionable results to take to their primary care physicians.**
 - Venipuncture testing is considered "clinical" in comparison to fingerstick testing which is considered "screening." This is because venipuncture testing is performed on the laboratory instruments that offer diagnostic levels of precision and accuracy. Venipuncture testing is more likely to be considered "actionable" by a physician.
- **My goal is to get the most participation in the screening program so I receive more valuable aggregate data.**
 - Regardless of the panel and screening modality chosen, offering a wide variety of ways for employees to complete a screening is key to a high participation rate. In order to increase participation, Quest recommends offering work-site screenings, as well as the option to screen offsite at a local Patient Service Center. Additional screening options, such as at-home testing and Physician Results Forms, can also be made available for employees who cannot attend an onsite event or visit a PSC.



Is a fasting or non-fasting program better for my population?

At Quest Diagnostics we always recommend the use of a fasting panel for both venipuncture and fingerstick screenings. This allows for more accurate results for glucose and cholesterol measurements.

However, we recognize that non-fasting panel may be a must-have for your organization. Non-fasting panels provide flexibility you may need to accommodate employees who work various shifts. We also recognize that, in some industries,

it may not be wise to have employees operating certain machinery or handling hazardous materials on an empty stomach.

- Non-fasting venipuncture screenings still allow you to effectively screen for type 2 diabetes risk. Fingerstick screenings that do not require fasting are weak in their evaluation of diabetes risk, because glucose testing is heavily impacted by foods recently eaten.
- Hemoglobin A1c (a measure that looks at glucose over a 2- to 3-month time period) is not available with fingerstick screenings alone due to FDA and CLIA regulations. This measure requires an additional dried blood spot test. However, hemoglobin A1c can be easily added to a non-fasting venipuncture panel to effectively assess risk.
- Additionally, testing for hemoglobin A1c as well as fasting glucose, which is more cost-effective through a venipuncture panel, has been proven to help organizations identify individuals at risk for type 2 diabetes and intervene before those individuals become high-cost claimants.*



Is tobacco use something we would like to discourage?

In order to reduce healthcare costs associated with tobacco use, many employers provide incentives to employees who do not use tobacco. Generally, the primary driver for incentive qualification is a self-reported tobacco status.

While we'd all like to think our employees are honest in every situation, when it comes to monetary incentives toward healthcare premiums and costs, there's always a chance that some may be attesting they are tobacco-free, when they are not.

To protect the integrity of your program, we recommend using cotinine testing to identify participants who use tobacco. Cotinine is a metabolite of nicotine, which can linger in the blood for 24 hours to 3 days.

In a study conducted by Quest Diagnostics, 47,824 screening participants were asked about their tobacco use in a health questionnaire, and then tested for blood cotinine. Nearly 1 in 10 tested positive for cotinine. Of the 4,636 who tested positive, 20.6% had attested to being non-users of tobacco on the health questionnaire by answering "nonuser" or "past user").

If you're offering an incentive for nonuser status, cotinine testing can help ensure those incentive dollars are being applied appropriately.

Is participation or health improvement more important for our program at this time?

In our experience, the best wellness program incentives are those that are communicated with precision to employees, and gradually increase in participant engagement.



*Shiffman, Dov, et al. Elevated hemoglobin A1c is associated with incident diabetes within 4 years among normoglycemic, working-age individuals in an employee wellness program. *Diabetes Care*. 2018. Accessed December 30, 2019. <https://care.diabetesjournals.org/content/early/2018/04/11/dc17-2500>.

If your organization has never provided an incentive for any element of screening, the best way to begin is to start slow, with a participation incentive. Simply rewarding your population to complete their screenings provides a more comprehensive view of your population's health in post-program reporting. This allows you to make informed decisions about future benefit offerings. Then, after a few years of rewarding for participation, you can choose to transition to provide incentives for achieving select outcomes.

When deciding what type of incentive to offer, it's essential to balance your participation goals with what you are able to offer within your budget. With simple incentive offerings, we generally see 15%-20% participation in the program depending on the appeal of the incentive. Groups that offer premium reductions as an incentive see the most participation (over 30%).

If it is within your wellness budget, we always recommend offering premium reductions (or an equivalent) as an incentive so you are more likely to have higher participation and receive more meaningful post-program data.

For more information on best practices for population health programs and health screenings, visit [QuestForHealth.com](https://www.questforhealth.com).