

October 25, 2019

The Honorable Gene. L. Dodaro
Comptroller General of the United States
U.S. Government Accountability Office
441 G St, NW
Washington, DC, 20548

Dr. Mr. Dodaro,

We write regarding the high cost of healthcare in this country and with the knowledge that the leading causes of death and disability in the United States are both preventable and responsive to workplace interventions,¹ and request that the Government Accountability Office conduct a comprehensive investigation into the state of federal workplace health and wellness programs.

In the United States, 70 percent of the total disease burden is made up of preventable or postponable illnesses,² and 99 percent of the adult U.S. population has at least one of seven cardiovascular health risks that lifestyle change can often alter: high blood pressure, high cholesterol, high blood glucose, unhealthy weight, tobacco use, physical inactivity, poor diet.³ Additionally, a Stanford University study from 2015 found that more than 120,000 deaths a year, and roughly 5 to 8 percent of annual healthcare costs, may be attributable to how U.S. companies manage their workforces—which would make it the fifth leading cause of death in the U.S.⁴

The burden of chronic disease is not just hurting individuals, but is also contributing to the rising cost of healthcare—which has put a strain not only on family budgets but also on employers. The average premium for employer-sponsored coverage for a family of four now exceeds \$18,000, and employee contributions exceed \$5,500 annually.⁵ According to the Medical Expenditure Panel Survey (MEPS), the average emergency room visit cost \$1,003 in 2016; almost 10 times the cost of a visit to a family physician.

With 151 million U.S. adults in the civilian non-industrialized workforce, the workplace is an ideal setting to improve population health. Many private companies recognize the impact of the social environment in the workplace on health, and are implementing programs that, in some cases, show a reduction in medical costs of approximately \$3.27 for every dollar spent on workplace wellness programs.⁶ While the methods of intervention can vary, many programs often include health education,

¹ <https://www.opm.gov/policy-data-oversight/worklife/health-wellness/#url=Overview>

² <https://www.ncbi.nlm.nih.gov/pubmed/18173386>

³ <https://www.healthaffairs.org/doi/full/10.1377/hlthaff.2016.1273>

⁴ <https://www.baltimoresun.com/health/bs-hs-workplace-cause-death-20180328-story.html>

⁵ <https://www.kff.org/health-costs/press-release/benchmark-employer-survey-finds-average-family-premiums-now-top-20000/>

⁶ <https://www.healthaffairs.org/doi/10.1377/hlthaff.2009.0626om>

programs.⁶ While the methods of intervention can vary, many programs often include health education, nutrition services, lactation support, physical activity promotion, screenings, vaccinations, traditional occupational health and safety, disease management, and linkages to related employee services. There is substantial evidence, gathered over time, that well-designed and implemented (utilizing best practices) wellness programs can improve the health of participants and minimize health risk factors that could lead to health problems and chronic conditions. In one study of a company with over 100,000 employees, the company saved \$535 in annual medical costs of wellness program participants compared to the sample group between 2002-2008.⁷

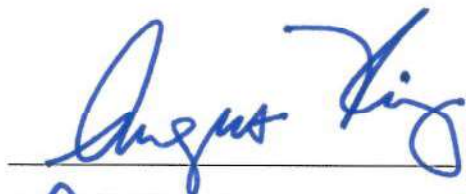
As noted by the Office of Personnel Management (OPM), “Worksite health and wellness programs help employees modify their lifestyles and move toward an optimal state of wellness.”⁸ As the nation’s largest employer, it is essential that the federal government utilize workplace wellness programs strategically. Compared to private companies, the federal government is in a unique position as a steward of taxpayer dollars, and thus should actively seek ways to minimize cost and maintain healthy employees. According to OPM, federal agencies are encouraged to develop and sustain programs that address the current and future needs of their employees to produce the healthiest possible workforce.

Given this, we would like GAO to address the following questions:

- (1) What workplace well-being and wellness programs do federal employees currently have access to? What is the level of participation?
- (2) What resources and support systems are made available to managers and persons in positions of leadership to implement programs to support the health of employees?
- (3) How does the federal government collect data on the efficacy of workplace wellness programs?
- (4) To what extent has the federal government evaluated the effectiveness of its expenditures on workplace wellness programming, considering such factors in employee health and satisfaction such as productivity, absenteeism, and retention?

Thank you for your attention to this important issue.

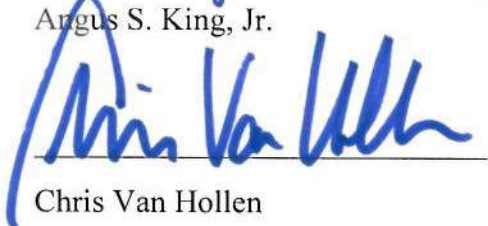
Sincerely,



Argus S. King, Jr.



Benjamin L. Cardin



Chris Van Hollen

⁶ <https://www.healthaffairs.org/doi/10.1377/hlthaff.2009.0626om>

⁷ <https://www.healthaffairs.org/doi/full/10.1377/hlthaff.2010.0806>

⁸ <https://www.opm.gov/policy-data-oversight/worklife/health-wellness/#url=Overview>