



# **Implementation and Participation in State Agency Worksite Wellness**

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**As Required by  
Texas Government Code,  
Section 664.053**



**TEXAS**  
Health and Human  
Services

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**Texas Department of  
State Health Services**

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# Table of Contents

<b>Executive Summary .....</b>	<b>1</b>
<b>1. Introduction .....</b>	<b>2</b>
<b>2. Background .....</b>	<b>3</b>
<b>3. Assessment of Implementation and Participation .....</b>	<b>5</b>
Level of Wellness Program Development .....	5
State Employee Use, Needs, and Interests.....	6
Implementation Going Forward .....	7
<b>4. Conclusion .....</b>	<b>8</b>
<b>List of Acronyms .....</b>	<b>9</b>
<b>Appendix A. Results of Wellness Liaison Survey .....</b>	<b>A-1</b>
<b>Appendix B. Results of State Employee Survey .....</b>	<b>B-1</b>
<b>Appendix C. State Agency Wellness Accomplishments .....</b>	<b>C-1</b>

## Executive Summary

[Texas Government Code, Section 664.053](#) requires the Texas Department of State Health Services (DSHS) to designate a statewide wellness coordinator to create and promote a model wellness program for state agencies. Statute also directs DSHS to study the implementation and participation rates of state agency worksite wellness programs, and report the findings to the Legislature biennially.

In 2018, DSHS conducted two surveys: one asking agency wellness liaisons from across Texas state agencies about wellness programs at their respective worksites, and a second asking state employees about their use of wellness-related resources.

Of the responding wellness liaisons, 89 percent reported that their agency has a wellness policy, and 71 percent had a wellness plan that involved implementing activities. However, 76 percent of liaisons reported their agency did not provide a wellness budget.

Most wellness activities implemented among state agencies required minimal resources, and/or were developed and administered by other agencies or external organizations.

State employees are interested in and use wellness benefits and resources. Nearly 90 percent of employees indicated interest in receiving monthly or quarterly communications about health and wellness opportunities, though more work is needed to raise awareness of these benefits.

DSHS leadership and the Statewide Wellness Coordinator will continue to provide technical assistance to wellness liaisons as they implement wellness programs at their agencies, and will carry out statewide initiatives that align with the objectives of the model wellness program, known as Work Well Texas.

# 1. Introduction

The Department of State Health Services (DSHS) supports Texas state agencies by providing guidance and resources to create effective wellness programs that will improve employee health, decrease healthcare expenditures, and increase productivity.

The purpose of this report is to study the implementation and participation rates of state agency worksite wellness programs, as directed by [Texas Government Code, Section 664.053](#). DSHS submits this report to the Legislature biennially.

This report outlines the results of two surveys conducted among wellness liaisons and employees throughout Texas state agencies. These results provide information on the level of wellness program development among state agencies and the perceptions of state employees towards health and the wellness programs that serve them. The report will end with a discussion of future steps DSHS will take to improve state wellness programs.

## 2. Background

The health of state employees affects the state's healthcare expenditures and the productivity of state agencies. For example, obese individuals cost employers an average of \$5,555 per year in covered medical, sick day, short-term disability, and workers' compensation claims combined. Average cost for an employee of recommended weight is \$3,839 per year.<sup>1</sup>

Studies show that within the first year of implementing evidenced-based wellness programs, employers can see increased productivity, reduced absenteeism, and lower turnover. These studies also show that measurable health plan savings can be seen in as little as two years if appropriate wellness initiatives are implemented and employee participation is significant.<sup>2,3,4</sup>

[Texas Government Code, Section 664.053](#), directs the Department of State Health Services (DSHS) to designate a state wellness coordinator and to create and develop a model statewide wellness program to improve the health and wellness of state employees. The model statewide wellness program may include:

- education that targets the costliest or most prevalent health claims;
- sharing or use of available health risk assessment tools or programs;
- strategies to promote health, nutritional, and fitness-related resources;

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<sup>1</sup> Van, K., Globe, D., Ng-Mak, D., Cheung, H., Sullivan, J., & Goldman, D. (2014). The association between employee obesity and employer costs: Evidence from a panel of U.S. employers. Retrieved from <https://www.ncbi.nlm.nih.gov/pubmed/24779722>

<sup>2</sup> Halpern, M. T., Dirani, R., & Schmier, J. K. (2007). Impacts of a smoking cessation benefit among employed populations. *Journal of Occupational and Environmental Medicine*, 49(1), 11-21 10.1097/JOM.1090b1013e31802db31579.

<sup>3</sup> Meenan, R. T., Vogt, T. M., Williams, A. E., Stevens, V. J., Albright, C. L., & Nigg, C. (2010). Economic evaluation of a worksite obesity prevention and intervention trial among hotel workers in Hawaii. *J Occup Environ Med*, 52 Suppl 1, S8-13. doi: 10.1097/JOM.0b013e3181c81af9

<sup>4</sup> Naydeck, B. L., Pearson, J. A., Ozminkowski, R. J., Day, B. T., & Goetzel, R. Z. (2008). The impact of the highmark employee wellness programs on 4-year healthcare costs. *J Occup Environ Med*, 50(2), 146-156. doi: 10.1097/JOM.0b013e3181617855

- environmental change strategies that integrate healthy behaviors and physical activity; and
- optional incentives to encourage participation in the wellness program.

Though state agencies are not required to provide wellness services, they may implement a wellness program based on the model program or its components. Section 664.053 does direct state agencies to designate an employee to serve as the wellness liaison between the agency and the DSHS statewide wellness coordinator.

In 2008, a panel of experts from DSHS and other state agencies including the Employees Retirement System of Texas, Office of the Comptroller of Public Accounts, Board of Nursing, and Department of Aging and Disability collaboratively reviewed literature on wellness, health promotion, and prevention strategies and services. From this review, six priority objectives were identified to include in the Texas State Agency Model Wellness Program, known as Work Well Texas. These objectives represent the foundation on which agencies build their wellness program activities:

- increase use of preventive screenings and services;
- improve tobacco prevention and cessation;
- increase physical activity;
- increase healthy eating;
- improve stress management (including Employee Assistance Program services); and
- support nursing mothers.

The expert panel identified and incorporated strategies into the model program that are shown to be effective, or show strong promise for success; are cost-effective; and are feasible within a public agency. Only strategies that met all three criteria were included in the model wellness program. Information about the specific strategies and implementation resources is available on the Work Well Texas website at [www.wellness.state.tx.us](http://www.wellness.state.tx.us).

### 3. Assessment of Implementation and Participation

In 2018, the Department of State Health Services (DSHS) conducted two surveys: one asking wellness liaisons about wellness programs in their worksite supporting [Texas Government Code, Chapter 664](#), and a second asking state employees about their use of wellness-related infrastructure. Surveys were developed using *SurveyMonkey* and distributed via email to state employees by the wellness liaison in their respective agency. The results of the surveys are described below.

#### Level of Wellness Program Development

DSHS surveyed wellness liaisons at each state agency to assess the level of program implementation and infrastructure at their worksites. Of those surveyed, 45 out of 206 wellness liaisons responded (22 percent response rate).

Most (89 percent) liaisons reported their agency has some kind of wellness policy in place. The most common provisions of these policies were allowing employees time for physical activity or attending on-site wellness education, and awarding leave for completing an annual health risk assessment and a physical exam.

Also, 71 percent of liaisons reported their wellness plan involved implementing wellness activities. A similar proportion, 76 percent, reported that their agency provided no dedicated wellness budget, with 13 percent relying on individual funding requests for specific activities/events.

Most wellness activities implemented among state agencies required minimal resources, and/or were developed and administered by other organizations.

- For example, the wellness programs in most agencies had a policy allowing employees to be physically active during the work day, but lacked the dedicated space or equipment to support this activity.
- Also, many agencies relied on the Group Benefit Plan and Employee Assistance Program to provide services and resources; although robust, these programs do not necessarily address policies and facilities that enhance environmental support within a state agency.

A complete description of the results of this survey are found in [Appendix A](#).

## State Employee Use, Needs, and Interests

DSHS surveyed state employees for information on their use, interest, and perspectives of wellness-related infrastructure and activities. About 5,143 state employees out of approximately 200,000 responded (2.6 percent response rate) to the survey.

When state employees were asked to rate 10 wellness benefits/services in terms of importance a majority of respondents rated 6 of the benefits/services as “Very Important.” Only tobacco cessation and lactation resources were rated “Not Very Important” by a majority of respondents.

State employees were also asked to identify what workplace factors would best help them improve their physical activity and health eating. The most selected factor to improve physical activity was a place to exercise on site. For healthy eating, the most selected factor was healthier options in the vending machine. Only 10 percent expressed no interest in getting more physical activity at work and 11 percent expressed no interest in eating healthier at work.

DSHS also asked state employees to identify which health benefits they used in 2017-2018. The overall use of health benefits was relatively low. Respondents identified “Available exercise time” (the policy of granting employees 30 minutes of exercise time 3 times per week) as the benefit they used the most; however, only 31 percent of respondents say they used this benefit in 2017-2018. The least frequently used benefit was tobacco cessation services (1 percent).

Results from the surveys indicated low availability and low awareness of some wellness resources. When asked about newly available Blue Cross Blue Shield of Texas (BCBS) wellness resources, as many as 80 percent of respondents reported they were unaware of some individual services. Respondents were most aware of the discounted gym membership service (34 percent were unaware). Between the two weight management resources, *Real Appeal* (introduced in 2016) and *Naturally Slim* (introduced in 2017), 64 percent and 77 percent, respectively, reported themselves as “not familiar at all with this resource”. Survey results also indicated that direct communications with employees is a potential avenue for raising awareness.

General interest in wellness resources remains high among respondents year-to-year. Nearly 90 percent indicated an interest in receiving monthly (60 percent) or quarterly (29 percent) communications about health and wellness opportunities.

A complete description of the results of this survey are found in [Appendix B](#).

## **Implementation Going Forward**

Over the last two years, DSHS, through the Statewide Wellness Coordinator, has made great strides in supporting state agencies by providing guidance and resources. Major accomplishments are described in [Appendix C](#).

However, these surveys provided DSHS with valuable lessons on how to further improve wellness programs for state agency employees. Data shows that while most agencies offered a basic level of services/activities to address the Texas Model Wellness Program, there is significant room for improvement to meet employee interest and expand wellness infrastructure.

During the next two years, DSHS will focus on implementing statewide initiatives that align with the objectives of the model wellness program, and will continue to support wellness liaisons as they implement related activities in their agencies. Additionally, DSHS plans to initiate demonstration projects at state agencies that currently do not participate in wellness programming. Such projects may include promotion of smoke-free campus policies; partnering with cafeteria/vending operators to increase healthy food options in state buildings; and maintaining annual initiatives such as the fitness challenge, wellness conference, and the Farm To Work Program.

Pre-tested, ready-to-implement activities will decrease the time and effort other agencies need to spend developing their own activities. State agencies would only need to make minor logistical changes to integrate activities into their system.

Finally, through ongoing collaboration with the Employees Retirement System of Texas (ERS), DSHS will continue to address state-level issues related to improving employee health, building wellness infrastructure across all agencies, and providing resources and technical assistance.

## 4. Conclusion

[Texas Government Code, Section 664.053](#) requires the Texas Department of State Health Services (DSHS) to study the implementation and participation rates of state agency worksite wellness programs, and report the findings to the Legislature biennially.

In 2018, DSHS conducted two surveys: one asking agency wellness liaisons from across Texas state agencies about wellness programs at their respective worksites, and a second asking state employees about their use of wellness-related infrastructure.

Most state agencies offered a basic level of services/activities to address the Texas Model Wellness Program. However, there is significant room for improvement to meet employee interest and expand wellness infrastructure. Likewise, DSHS also found that there are opportunities to promote and increase awareness of current wellness services.

To support other state agencies, DSHS leadership and the Statewide Wellness Coordinator will

- continue to provide technical assistance to wellness liaisons;
- implement statewide initiatives aligned with the objectives of the model wellness program;
- initiate demonstration projects in state agencies that currently do not participate in wellness programming; and
- continue to collaborate with the Employees Retirement System of Texas (ERS), to address state-level issues related to improving employee health and building wellness infrastructure.

## **List of Acronyms**

<b>Acronym</b>	<b>Full Name</b>
DSHS	Department of State Health Services
BCBS	Blue Cross Blue Shield of Texas
ERS	Employees Retirement System
HRA	Health Risk Assessment
EAP	Employee Assistance Program
HHS	Health and Human Services
DADS	Department of Aging and Disability Services

## Appendix A. Results of Wellness Liaison Survey

**Table 1. Prevalence of Wellness Policy Provisions Among Agencies, n=45 responding state agencies**

Provision	Percent of Agencies
Time for physical activity (e.g., 3 x 30 minutes/week)	69%
Permission to attend wellness education opportunities	62%
Leave incentive (e.g., eight hours) to complete health risk assessment (HRA) and physician visit	56%
Creation and operation of a wellness council	38%
Designated senior-level support for wellness activities	29%

**Table 2. Prevalence of Suggested Programming among Agencies, n=45 responding state agencies**

Programming	Percent of Agencies
Increase physical activity	96%
Support stress management	93%
Support breastfeeding	91%
Support health risk assessments/screenings	89%
Support tobacco cessation	87%

Programming	Percent of Agencies
Increase healthy eating	60%

**Table 3. Most Commonly Implemented Programming, n=45 responding state agencies**

Programming	Percent of Agencies
<u>Increase Physical Activity</u>	
Allowing employees to take/flex 30 minutes a day, three times per week to be physically active	67%
Providing on-site fitness classes	44%
Providing facilities/areas for physical activity	44%
<u>Support Health Risk Assessments (HRA)/Screenings</u>	
Providing flu vaccination clinics	73%
Providing incentives for completion of HRA	58%
Providing incentives for completing an annual exam	51%
<u>Support Stress Management</u>	
Offering a flexible work schedule	76%

<b>Programming</b>	<b>Percent of Agencies</b>
Promoting EAP services once or more per year	67%
Offering telecommuting	56%
<u>Support Breastfeeding</u>	
Providing a private, comfortable room for breastfeeding	80%
Meet/Exceed Texas Mother-Friendly Worksite criteria	36%
<u>Increase Healthy Eating</u>	
Farm-to-work program	36%
Increasing availability of healthy foods in vending machines	24%
Increasing availability of healthy foods in cafeterias	24%
<u>Tobacco Cessation</u>	
Outdoor areas restrict smoking or tobacco use except in designated areas	67%
Outdoor areas are tobacco-free (no tobacco products of any kind are permitted)	20%

## Appendix B. Results of State Employee Survey

Figure 1. Importance of Benefits/Services to Employees, n=5,143 responding state employees

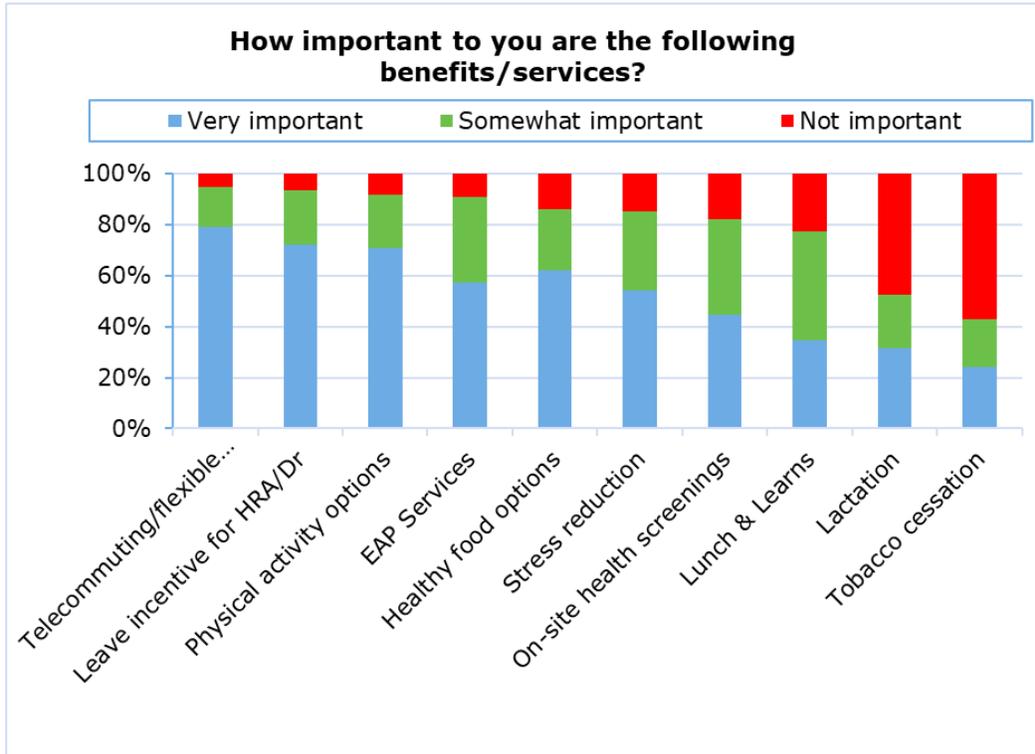


Table 4. Staff utilization of wellness benefits/services from 2017-2018, n=5,143 responding state employees

Benefits/Services	Percent of Staff
Available exercise time (e.g., 3 x 30 min/week)	31%
Leave incentive (eight hours) for HRA	25%
Physical activity programs	16%
Real Appeal	16%

Benefits/Services	Percent of Staff
Stress reduction activities/services	15%
On-site massage therapy	15%
On-site health screenings	13%
Lunch & Learns	13%
Employee Assistance Program	13%
Healthy eating programs (not incl. Real Appeal)	12%
Breastfeeding facilities	2%
Tobacco cessation services	1%

**Table 5. Perceived Facilitators to Healthy Behaviors, n=5,143 responding state employees**

Facilitator	Percent of Staff
<u>Physical activity</u>	
If there was a place to exercise on site	51%
If there were showers on site	37%
If my manager supported taking/flexing time to be active	35%
If there were workout classes on site	35%
If there were walking groups	24%
Other	15%
More or better supports for individuals with limited ability	9%
Not interested in getting more physical activity at work	10%

Facilitator	Percent of Staff
<u>Healthy eating</u>	
If there were healthier options in the vending machines	44%
If there were healthier options in the cafeteria	35%
If there were nutrition programs available	33%
If there were healthier options offered at meetings or office events with food	32%
If coworkers participated in healthy eating efforts with me	23%
Other	16%
Not interested in eating healthier at work	11%

**Table 6. Awareness of BCBS/ERS wellness resources, n=5,069 responding state employees**

*How familiar are you with the following Blue Cross Blue Shield wellness resources?*

Resource Name	I've never heard of this resource	I've heard of this resource but don't know much about it	I'm familiar with this resource but haven't tried it	I have used this resource
Well onTarget member portal	71%	15%	8%	6%
Online health assessment	62%	17%	9%	13%
Discounted gym membership	34%	26%	33%	7%
Blue Points incentive program	67%	18%	12%	3%
Self-directed health courses	78%	11%	8%	2%
Fitness device synching	67%	14%	11%	8%

Resource Name	I've never heard of this resource	I've heard of this resource but don't know much about it	I'm familiar with this resource but haven't tried it	I have used this resource
Health Coaching	70%	16%	12%	2%
Blue365 discount program	71%	16%	12%	2%
Alternative medicine discounts	81%	11%	7%	1%
Naturally Slim	77%	11%	7%	5%
Real Appeal	64%	11%	8%	16%

**Table 7. Communications, n=5,143 responding state employees**

*Please indicate how often you would be interested in receiving email updates about health and wellness opportunities at your work site.*

Frequency	Responses
Monthly	60%
Quarterly	29%
Never	11%

## **Appendix C. State Agency Wellness Accomplishments**

Over the last two years, DSHS, through the Statewide Wellness Coordinator, committed resources and time to implement Government Code, Chapter 664. This resulted in numerous accomplishments, including several initiatives described below.

### **Farm to Work Program**

The Farm to Work Program improves healthy eating choices by increasing the availability of farm-fresh produce to state employees at their worksites. Employees order a basket of produce online by Friday of each week for delivery to their worksites the following week. Each basket costs an employee \$22 and contains vegetables and fruit grown by local central Texas farmers. The Farm to Work Program has expanded to 16 state agency worksite locations. Between September 1, 2016 and August 31, 2018, the program reached an annual average of 3,050 unique customers, and sold a two-year total of 17,221 baskets, which generated more than \$321,167 for Central Texas farmers.

### **Flu Vaccination Clinics**

Each fall, DSHS provides training to state agencies on strategies for hosting onsite flu clinics. Coordinated by wellness liaisons, these clinics provide vaccinations for an average of 1,820 state employees each year. Since 2014, the Statewide Wellness Coordinator, in partnership with the Employees Retirement System of Texas and United Healthcare, has identified vaccination providers to offer on-site clinics and only bill the health plan, resulting in zero cost for employees. As a result of this new benefit, participation is expected to grow in coming years.

### **Get Fit Texas! State Agency Physical Activity Challenge**

Since 2013, DSHS and the Department of Aging and Disability (DADS) collaborated each year to offer the Get Fit Texas! State Agency Physical Activity Challenge. This event encourages state employees to achieve 150 minutes of physical activity per week for ten weeks (150 minutes is the recommended minimum of moderate-to-vigorous physical activity per week for adults). To add incentive, agencies compete against each other to see which organizations finish with the highest percentage of employees who complete the challenge and earn the Fittest State Agency Award in their size category.

In mid-2016, DSHS took responsibility for hosting the initiative and launched a more user-friendly redesign of the challenge website. An interim competition called the Everything's Fitter in Texas Challenge (EFT) was deployed in early 2017 until the new website could be completed in time for the next initiative. The interim EFT challenge drew an unprecedented 20,000 participants, and gave DSHS valuable insight into features to include in the permanent website.

In early 2018, DSHS unveiled the newly redesigned Get Fit Texas! Challenge web platform, which participants and agency administrators praised for its ease of use and streamlined functionality. Nearly 22,000 state employees participated in the 2018 Challenge and numbers for total hours recorded (almost 667,000) and number of Challenge completions (14,978) jumped to record-breaking levels (previous numbers were about 167,000 hours and 10,492 completions). In May 2018, the Challenge culminated in an awards ceremony organized by DSHS recognizing state agencies with the highest levels of staff participation. DSHS expects that as word spreads about the improved website, participation will continue to grow and support lasting behavior change among state employees.