



*The* **SCHWAN**  
**FOOD COMPANY**

**Extending the reach of your  
health and wellness initiatives  
to surrounding communities**

November 13, 2014



# Today's Journey

- Humble Beginnings & Company Overview
- Health & Wellness at Schwan
- Forging Local Partnerships
- Paving the Road Ahead





The Schwan Food Company was established in 1952 and is a privately held, multibillion-dollar corporation headquartered in Minnesota.

**14,000**

employees in the United States



Maintain a frozen-food distribution in network

**48 STATES**



Operate approximately

**4,500**

home-delivery trucks



**ONE DOZEN**

food manufacturing facilities in the U.S.



State-of-the-art R&D FACILITY

**Reach Consumers**



at their doors



in stores



food-service

**70%**



of our home-delivery trucks run on alternative fuel (propane)



# Our Brands





# The Schwan Food Company

## business PRIORITIES

- 1 SAFETY
- 2 QUALITY
- 3 GROWTH
- 4 COST
- 5 SERVICE
- 6 CULTURE

## our FOCUS

Every decision we make must consider our



**CONSUMERS,**

**CUSTOMERS**



and



**EMPLOYEES**



## how we WORK

A culture of meaningful participation where consumers, customers and employees are advocates of our company.

- We **think** like the customer and consumer
- We **compete** to win
- We **act** like owners
- We **execute** with urgency
- We **operate** as one Schwan team
- We **believe** constructive conflict makes us better

## VISION

"My vision for our future is a **STRONG, SOLID, WELL-MANAGED, FAST-GROWING, EXCITING, INNOVATIVE** company with **HIGH BUSINESS ETHICS** and an **EXCELLENT REPUTATION** – a company that offers **GREAT OPPORTUNITIES**, a place **WHERE PEOPLE LIKE TO WORK.**" ~Marvin Schwan, founder

## VALUES

-  Growth
-  Hard Work
-  Helping One Another
-  Enthusiasm
-  Integrity



# The Cost of Doing Nothing

Annual out-of-pocket medical cost of someone without diabetes:	Annual out-of-pocket medical cost of someone with diabetes:	Annual out-of-pocket medical cost of someone with diabetes and associated conditions:
<b>\$3,673</b>	<b>\$9,202</b>	<b>\$17,762</b>

Economic Costs of Diabetes in the U.S. in 2012." Diabetes Care. March 6, 2013.

Centers for Disease Control and Prevention. National diabetes fact sheet: national estimates and general information on diabetes and prediabetes in the United States, 2011. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 2011.

# Schwan Data Highlights

- Emerging Trends:
  - Chronic conditions include diabetes, COPD, and hypertension
- Wellness program findings are consistent with medical claims
- Elevated risk factors can lead to longer leave of absence and also a greater chance for re-injury on the job

## Identified Risk Factors<sup>1</sup>

- Overweight
- High blood pressure
- High glucose (fasting)
- High cholesterol
- Physical activity
- Use of tobacco



## Health Conditions

- Osteoarthritis
- Coronary Artery Disease
- Diabetes
- Low Back Disorders
- Hypertension

<sup>1</sup>Source: RedBrick Health 2013/2014 health assessment & biometric screening results

# Health & Wellness at Schwan





# Health Management Approach

Goal – mitigate health care cost increases through education/awareness and rewarding positive actions/outcomes

## Plan Design

(premiums, deductibles, out-of pocket limits, etc.)

## Plan Mechanics

(prescriptions, ER visits, etc.)

## Wellness

(incentives, tobacco discount, healthy outcomes, etc.)



# Value Based Benefit Design

## Diabetes Condition Management Pilot

New in all 2015 health plans

- 100% coverage for the following:
  - Evidence-based lab/X-ray such as
    - AC every 3 months
    - Fasting lipid profile (annual):
      - total cholesterol
      - high-density lipoprotein (HDL cholesterol) and low-density lipoprotein (LDL cholesterol)
      - triglycerides
    - Laboratory evaluation
      - Fasting plasma glucose or random plasma glucose
    - Serum creatinine (annual)
    - Liver function test alanine
      - aminotransferase (ALT) or aspartate
      - aminotransferase (AST) (annual)
    - Annual screening for microalbuminuria



# Value Based Benefit Design (cont.)

## Diabetes Condition Management Pilot

New in all 2015 health plans

- 100% coverage for the following:
  - Annual dilated eye examination for diabetic eye disease
  - Annual foot exam
  - Annual influenza vaccine
  - Diabetic drugs and supplies
  - Insulin pumps and supplies
  - Outpatient self-management (intensive lifestyle modification) training that may include pharmacy, nutrition/weight loss (dietitian), and smoking cessation



# Communication

- Health Scoop
- Annual Enrollment Communication
- Targeted Communication



## CHRONIC CONDITION COVERAGE

Diabetes prevention and management

Taking care of yourself and your diabetes can help you feel good today and in the future.

### MANAGING YOUR DIABETES

When your blood sugar (glucose) is close to normal, you are likely to have more energy, heal better and have fewer skin or bladder infections.

You will also have less chance of having health problems caused by diabetes such as:

- heart attack or stroke
- eye problems that can lead to trouble seeing or going blind
- pain, tingling or numbness in your hands and feet, also called nerve damage (neuropathy)
- kidney problems that can cause your kidneys to stop working
- teeth and gum problems

### DIABETES CHRONIC CONDITION MANAGEMENT COVERAGE

#### What is included?

- 100 percent coverage for diabetic drugs and supplies
- 100 percent coverage for insulin pumps and supplies
- 100 percent coverage for evidence based lab and X-rays associated with managing diabetes (including HSA plans)
- 100 percent coverage for office visits related to a diabetes diagnosis (after deductible for HSA plans)

### WHO BENEFITS?

- All members covered under the Blue Cross and Blue Shield of Minnesota medical plan. Coverage applies to those who are diagnosed with either Type 1 or Type 2 diabetes.

### COVERAGE DETAILS

- Annual dilated eye examination for diabetic eye disease
- Annual foot exam
- Annual influenza vaccine
- Laboratory evaluation
- Fasting plasma glucose or random plasma glucose
- A1C every 3 months
- Fasting lipid profile (annual):
  - total cholesterol
  - high-density lipoprotein (HDL cholesterol) and low-density lipoprotein (LDL cholesterol)
  - triglycerides
- Serum creatinine (annual)
- Liver function test alanine aminotransferase (ALT) or aspartate aminotransferase (AST) (annual)
- Annual screening for microalbuminuria
- Outpatient diabetic training and nutritional counseling

Blue Cross® and Blue Shield® of Minnesota and Blue Plus® are nonprofit independent licensees of the Blue Cross and Blue Shield Association. X20633 (11/14)





# Metrics

How will we evaluate the Diabetes Condition Management Pilot?

- Schwan's diabetic population participation in disease management
- Pharmacy Adherence
- Adherence to evidence based medical treatment
  - ✓ A1C
  - ✓ Serum Creatinine
  - ✓ Liver function
  - ✓ Microalbuminuria
- Member Satisfaction



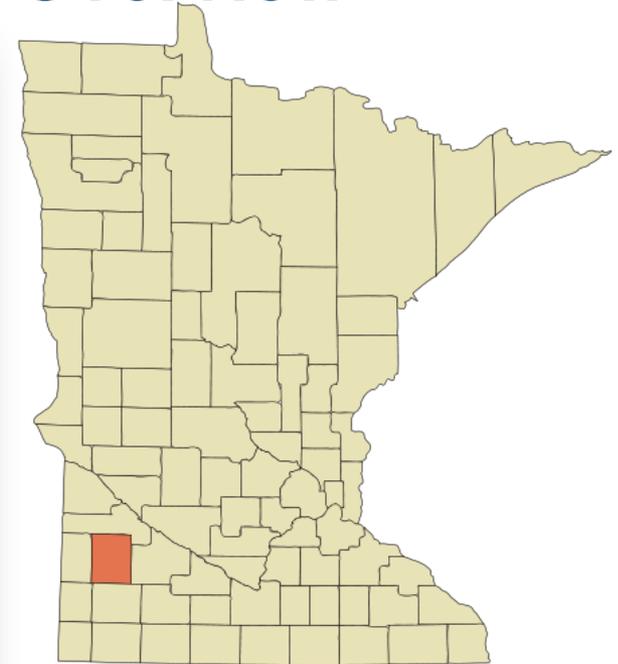
# Integrated Health

**Focus on health & wellness by integrating treatment/ prevention of occupational injuries and leaves of absence with active referral to resources, coaches, and nurses.**



# Marshall, MN

## Current Community Partnership Overview



Main Street in downtown Marshall, MN



# Opportunity for Collaboration

## Health outcomes

- Lyon County ranks 75th in the state for health outcomes out of 84 (ranked) counties.
- Rates of adult smoking, obesity, and physical inactivity are higher in Lyon County than nationally.
- **Two-thirds** of Lyon County residents are **overweight**, including one-third who are **obese**.
- Lyon County residents are **more likely to be obese** than the average resident of Minnesota or the region.
- Almost one-quarter said they had **not done any physical activity** other than their job in the past 30 days.
- Initiatives underway to improve the health of the community including *Statewide Health Improvement Program (SHIP)* and *Pioneering a Healthier Marshall*.



# TAKE ACTION



Evaluate Actions

Assess Needs & Resources



Focus on What's Important



Act on What's Important

Choose Effective Policies & Programs



# YMCA's Diabetes Prevention Program

## PROGRAM PURPOSE:

- Prevent Type II Diabetes

## PROGRAM GOALS:

- Reduce body weight by 7%
- Increase physical activity to 150 minutes per week

## PROGRAM QUALIFICATIONS:

- At least 18 years old,
- Overweight (BMI  $\geq 25$ ), and
- Prediabetes confirmed via one of 3 blood tests or previous diagnosis of gestational diabetes
- If no blood test, 9+ score on risk assessment

## THE PROGRAM IS:

- Led by a trained Lifestyle Coach
- A one-year program: 16 weekly sessions, then 8 monthly sessions
- Open to all community members; YMCA membership is not required
- A Centers for Disease Control and Prevention (CDC)-approved curriculum
- HIPAA COMPLIANT

Schwan will pay the full cost of the program for all Marshall area employees and health plan enrolled spouses.

# Best Practices

Open doors/Build Support/Get the word out

Cross Functional Community Advisory Board

Dedicated local YMCA Coordinator

Lifestyle Coaches

Position the program within the community

Logistics

Partner with Employers

Communication/ Testimonials

Measures & Metrics

*Just want to say thank you for offering this program to us. The program has provided us with a great instructor, introduced us to a super group of people with which to take this journey to a healthier lifestyle for us both. The principles of the program and tools provided have proven to be very helpful and are making a difference in our lives. I am an advocate and supporter of the program and wanted you to know that it is valued by Mary & I. Thank you & thanks to whomever authorizes such programs and makes them possible and available to us.*

## Marshall YMCA introduces diabetes prevention classes

By Anna Haecherl-Smith  
ahaecherl-smith@marshallindependent.com

MARSHALL — Diabetes is the No. 1 cause of kidney failure, non-traumatic lower-limb amputations and new cases of blindness in adults, and the risk of having a stroke or a heart attack can be two to four times higher for the people with diabetes. The preventable disease accounts for 17 percent of all deaths for individuals over the age of 25. People over the age of 45, who are overweight and inactive have the highest risk of developing diabetes.



Those statistics are why the YMCA has started offering diabetes prevention classes for individuals who are at risk of developing the disease. The year-long lifestyle modification program helps adults diagnosed with prediabetes reduce their risk for developing Type 2 diabetes.

"The purpose is to pre-Classes PAGE 8A

For more information and to register for the diabetes class, visit [www.marshallareaymca.org](http://www.marshallareaymca.org) and click on the link for Y Diabetes Prevention under the Healthy Living tab or contact the program coordinator at [ydiabete@marshallareaymca.org](mailto:ydiabete@marshallareaymca.org).



BIG

## Diabetes Prevention Program MARSHALL AREA YMCA

If you are at high risk of developing type 2 diabetes, the YMCA's Diabetes Prevention Program can help you make lifestyle changes that will improve your overall health and well-being and reduce your chances of developing the disease. Take the first step in controlling your health. Find out your risk for prediabetes.

In order to qualify for the YMCA's Diabetes Prevention Program, participants must be at least 18 years old, overweight (BMI  $\geq 25$ ) and at high risk for developing type 2 diabetes or have been diagnosed with prediabetes.\*

### TAKE THE TEST - KNOW YOUR SCORE!

Answer these seven questions - For each "yes" answer, add the number of points listed.

YES	NO
1	0
1	0
1	0
5	0
5	0
5	0
9	0

### AT-RISK WEIGHT CHART

Height	Weight (in pounds)
4'10"	129
4'11"	133
5'0"	138
5'1"	143
5'2"	147
5'3"	152
5'4"	157
5'5"	162
5'6"	167
5'7"	172
5'8"	177
5'9"	182
5'10"	188
5'11"	193
6'0"	199
6'1"	204
6'2"	210
6'3"	216
6'4"	221

TOTAL POINTS FOR ALL "YES" RESPONSES:

If you scored a 9 or higher, then you may be at risk for prediabetes or diabetes, and may qualify for the program. Contact Cindy Roca or Livak Anderson at 507-532-9622 for more information. This does NOT mean you have diabetes. You will need a blood test to confirm if you have diabetes.

\*Based on National BMI, DASH, NHL, Thompson, TG, Rogerson, WHI, AHA, NHL, A, and other standards to identify a person at risk for cardiovascular disease. Diabetes Care 1998; 21:1042-1047. \*Individuals who have already been diagnosed with either type 1 or type 2 diabetes do not qualify for this program.

PLEASE COMPLETE THE INFORMATION ON THE BACK OF THIS FORM.

# SMSU Exercise Science & Fitness Program

- 12-week program
- Pre & Post assessments including:
  - Height, weight, vital signs
  - Body Fat Analysis
  - Fitness testing
- One-on-one coaching and training with SMSU student trainers
- An individualized exercise prescription program with ongoing modifications based on progress



# Program Results (Pilot Group)

Significant improvements were made in systolic blood pressure, 1-mile walk time, plank-test duration, sit-ups, and sit and reach tests. A trend for improvement was seen in body mass, body mass index, skinfold-determined body fat %, resting heart-rate, mean arterial pressure, VO<sub>2</sub>max, and stork-balance tests in both legs

Variable	Pre-testing Result	Post-testing Result	P Value
Body Mass (kg)	86.7 ± 23.9	85.9 ± 22.8	0.11#
BMI	30.9 ± 6.6	30.6 ± 6.1	0.11#
Skinfolds (%)	35.3 ± 7.5	34.1 ± 7.2	0.14#
Resting Heart-rate (bpm)	76.4 ± 14.6	71.1 ± 10.0	0.06#
Systolic Pressure (mm Hg)	125.1 ± 9.3	120.8 ± 9.8	0.03*
Walk time (seconds)	852 ± 86	818 ± 101	0.03*
Plank (seconds)	68.9 ± 34.5	96.8 ± 61.5	0.02*
Sit-ups (repetitions)	13.7 ± 6.2	17.4 ± 5.4	<0.01*
Sit & Reach (cm)	42.6 ± 15.9	48.7 ± 17.9	0.02*
VO <sub>2</sub> max (ml/kg/min)	35.4 ± 8.1	37.1 ± 7.9	0.09#

\* = significantly different post-test from initial. # = trend for significance.

# Targeted Communications



*"This experience with the Schwan's clients helped out greatly in my profession because it allowed me to put everything I learned in my three years here at SMSU altogether. It helped me grow because each one to one with a client is different and helping them improve their fitness and lifestyle. From a scientific perspective it helped me put everything I learned into this program to help my clients. On a personal level it gave me the confidence to be able to work with other people and help them improve their lifestyle. This experience showed me I can work with any client and help them obtain their goals."*

*SMSU Exercise Science Student*

The Exercise Science Student Trainers are in their Junior or Senior year of their education at SMSU.

They have completed all of their basic Exercise Science coursework and are currently undergoing practical application for their coursework. This program as part of their coursework, offers service learning and real world hands on experience.

*but we understand time is precious!*

#### PRE AND POST PROGRAM ASSESSMENTS

- Height, weight, vital signs
- Body fat analysis utilizing skin fold calipers, bio-electric impedance,





# Broader Impact of Diabetes

## Workers' Compensation

Higher Average WC indemnity claim costs for the diabetic claimants

## Non-Occupational Absence



Lost days for STD and sick time

## Safety

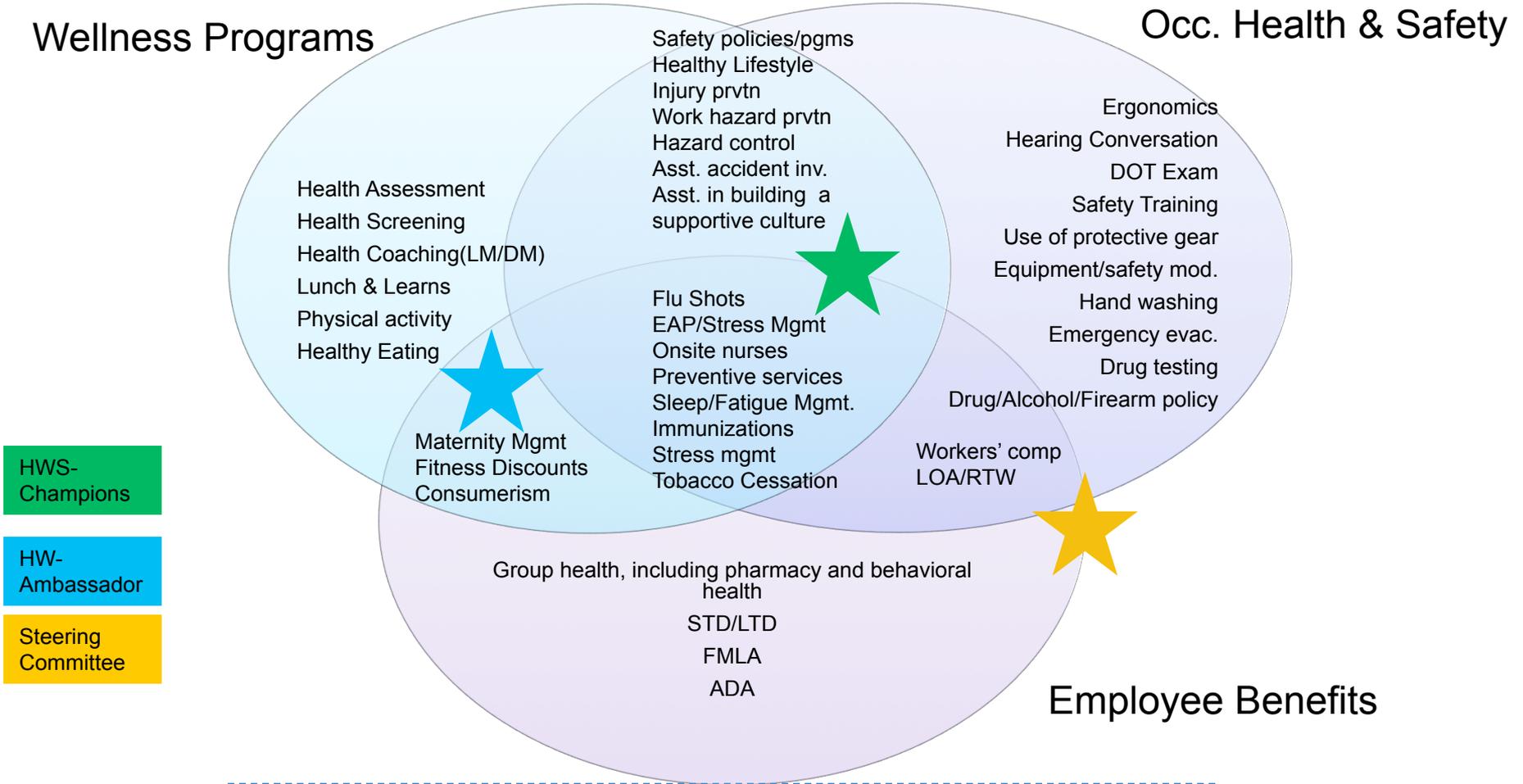
Those with diabetes have higher safety incidence rates

# Link Between Engagement and OSHA Frequency Rates<sup>1</sup>

- 75% of our employees agree that Schwan supports them in having a healthy life
- The item impact that had the strongest correlation to lower OSHA frequencies YTD was a higher engagement score on the following item:
  - *“Our Company supports me (programs, resources, benefit plans, education) in having a healthier life.”*

<sup>1</sup>OSHA frequency rates are calculated to be interpreted as the approximate number of injuries per 100 employees

# Integrating Health, Wellness, & Safety in the Workplace



HCMS Data Warehouse(Predictive & overlay)  
 Health & Wellness Scorecard (Historical)  
 Company Scorecard (Rolling)

# Thank you!

## Contact Information

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The more original the discovery, the more obvious it seems afterwards.

~Arthur Koestler