



# **EAP Business Case Research: Human Capital Outcomes Metrics**

***Mark Attridge***

Attridge Studios

(612) 889-2398    [mark@attridgestudios.com](mailto:mark@attridgestudios.com)

**EAPA Upper Midwest Chapter Meeting  
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# AGENDA

**EAP Business Value Model**

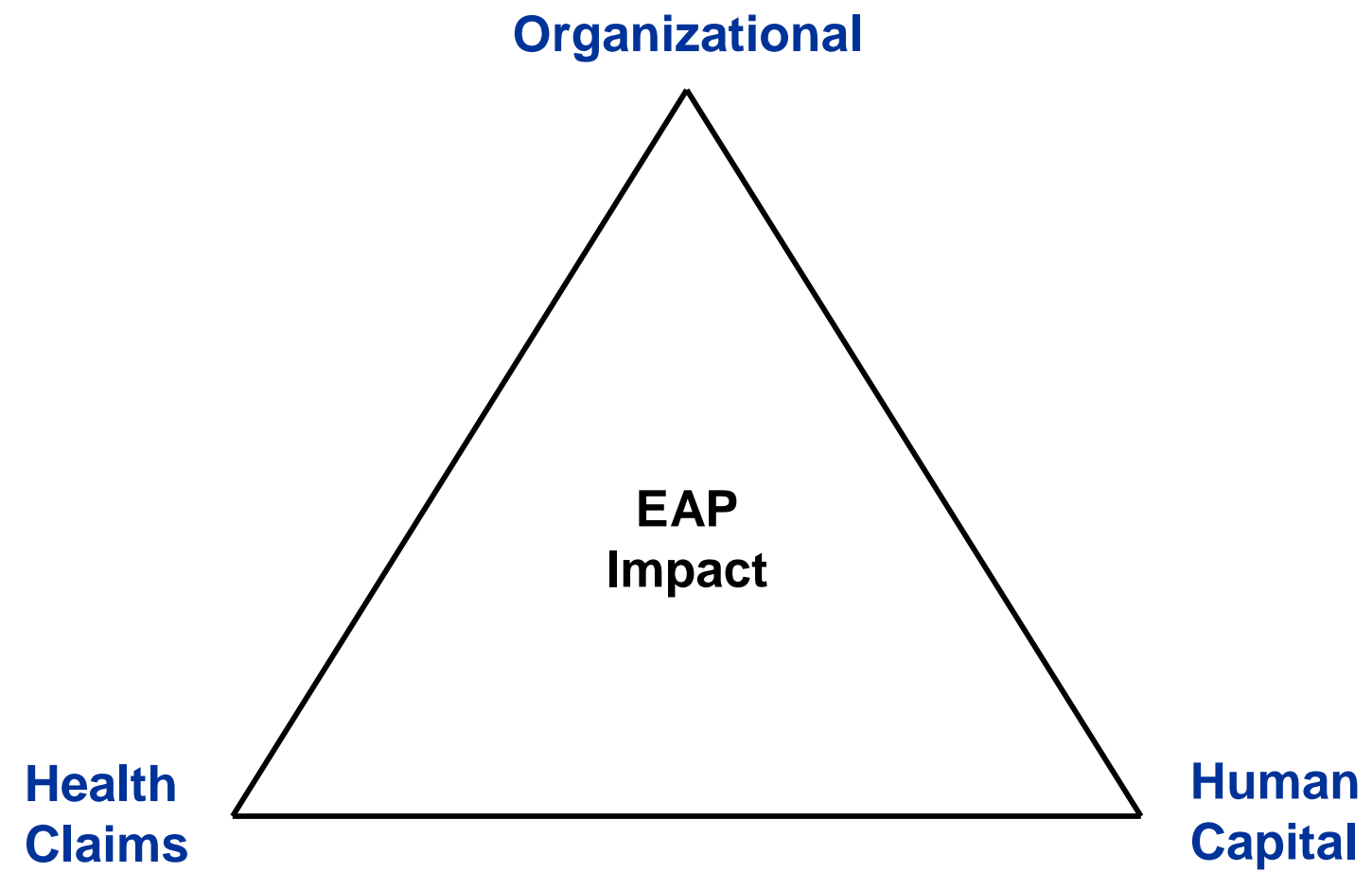
**Integration Trends – Case Studies**

**Role of Partners in Driving Value**

**Measurement Implications**

# The EAP Business Value Model™

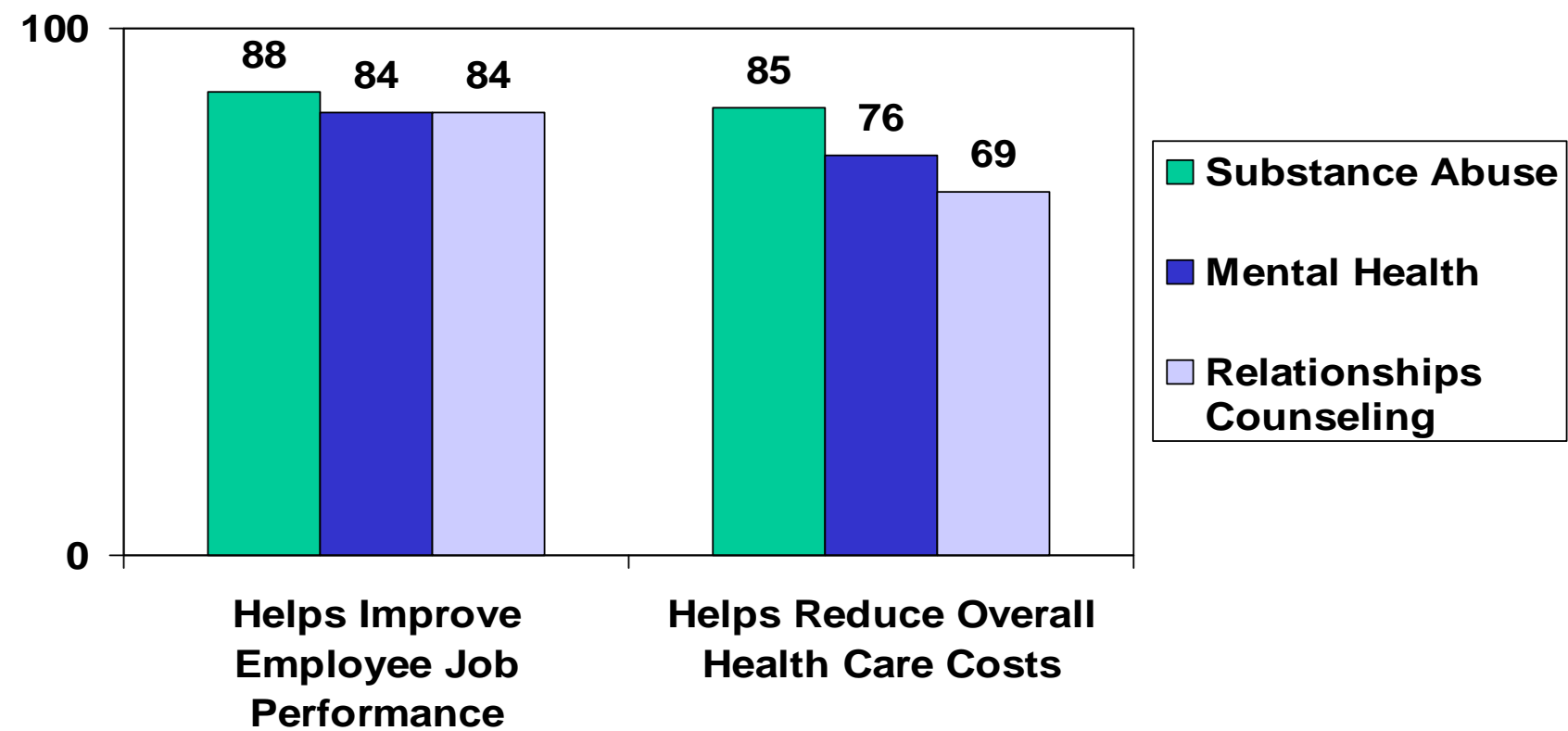
Attridge & Amaral, 2004



# EAP Case-Related Services

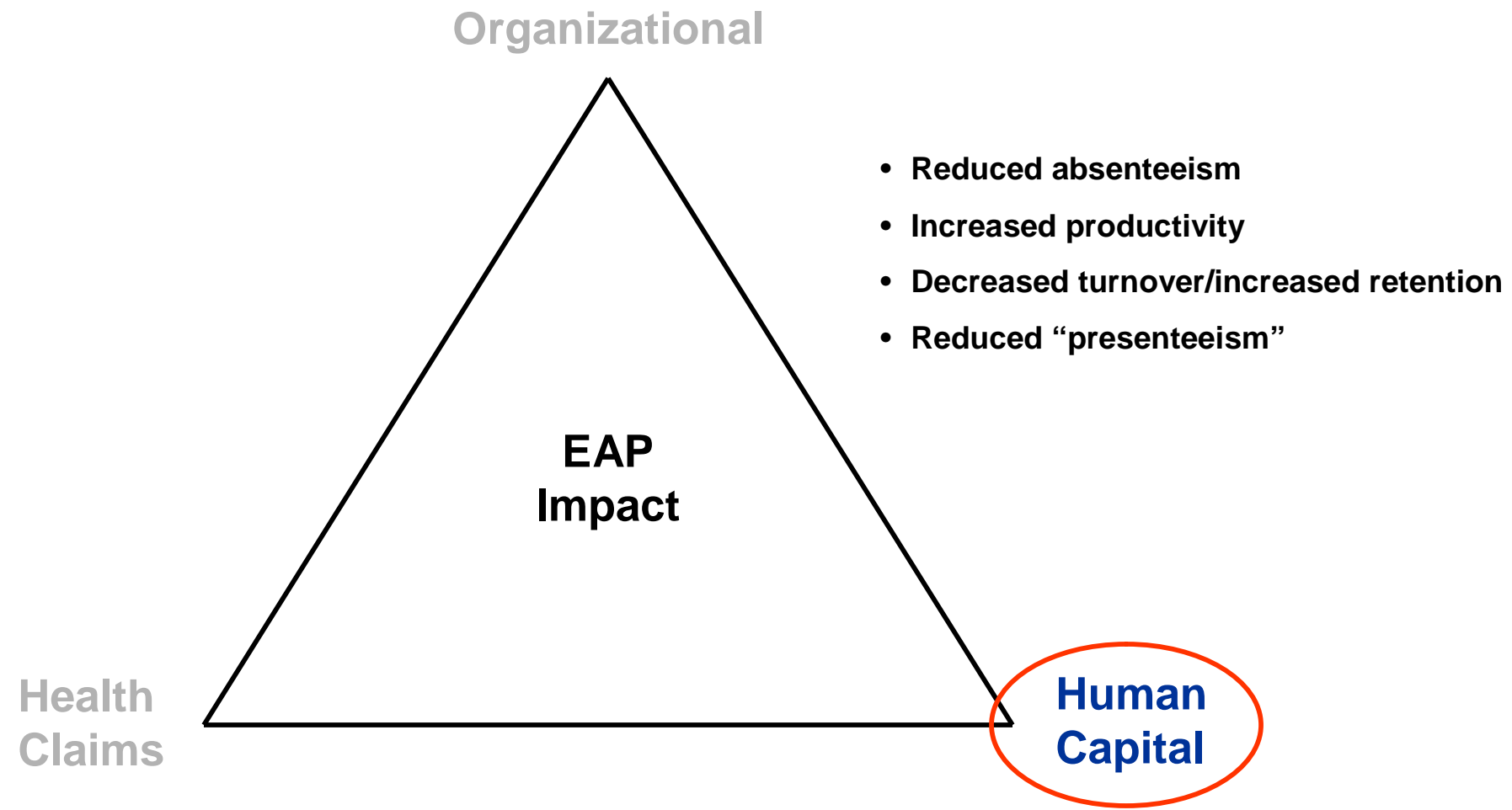


## Benefits Managers Perceived Business Value from Use of EAP Core Services



Source: 1996 national survey of 473 Companies. Attridge, [APA/NIOSH](#).

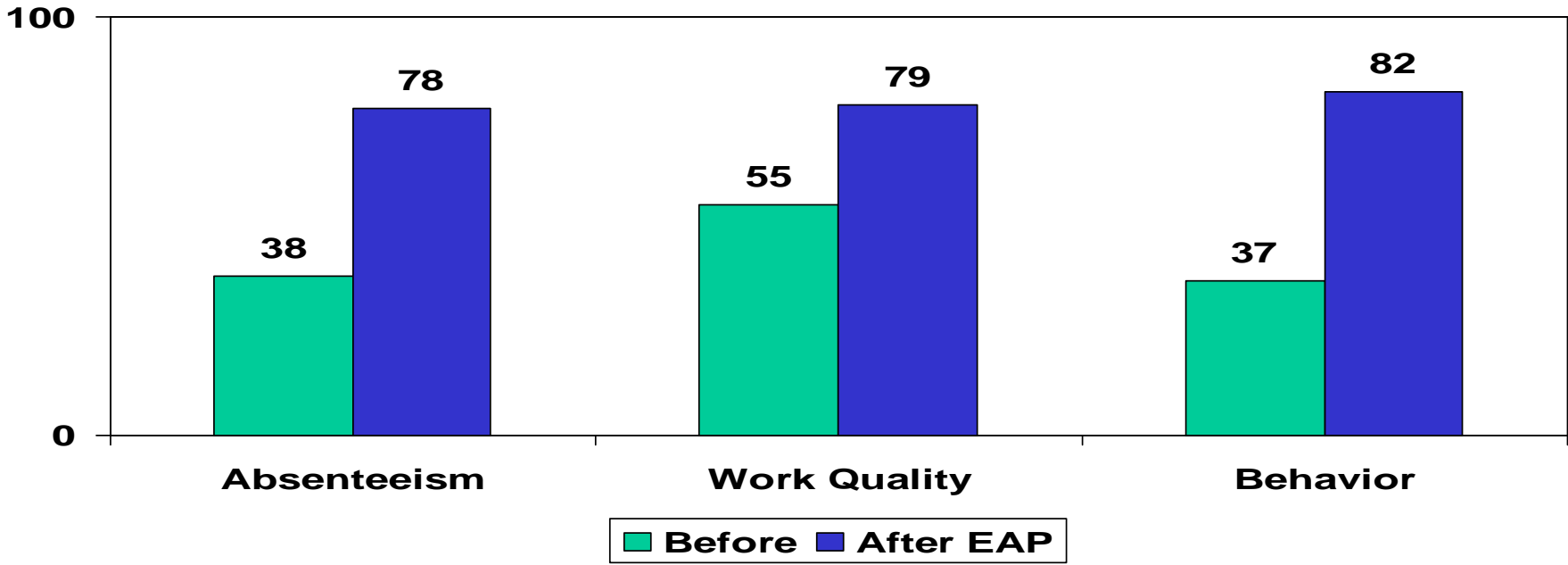
# EAP Impact: Human Capital Gains



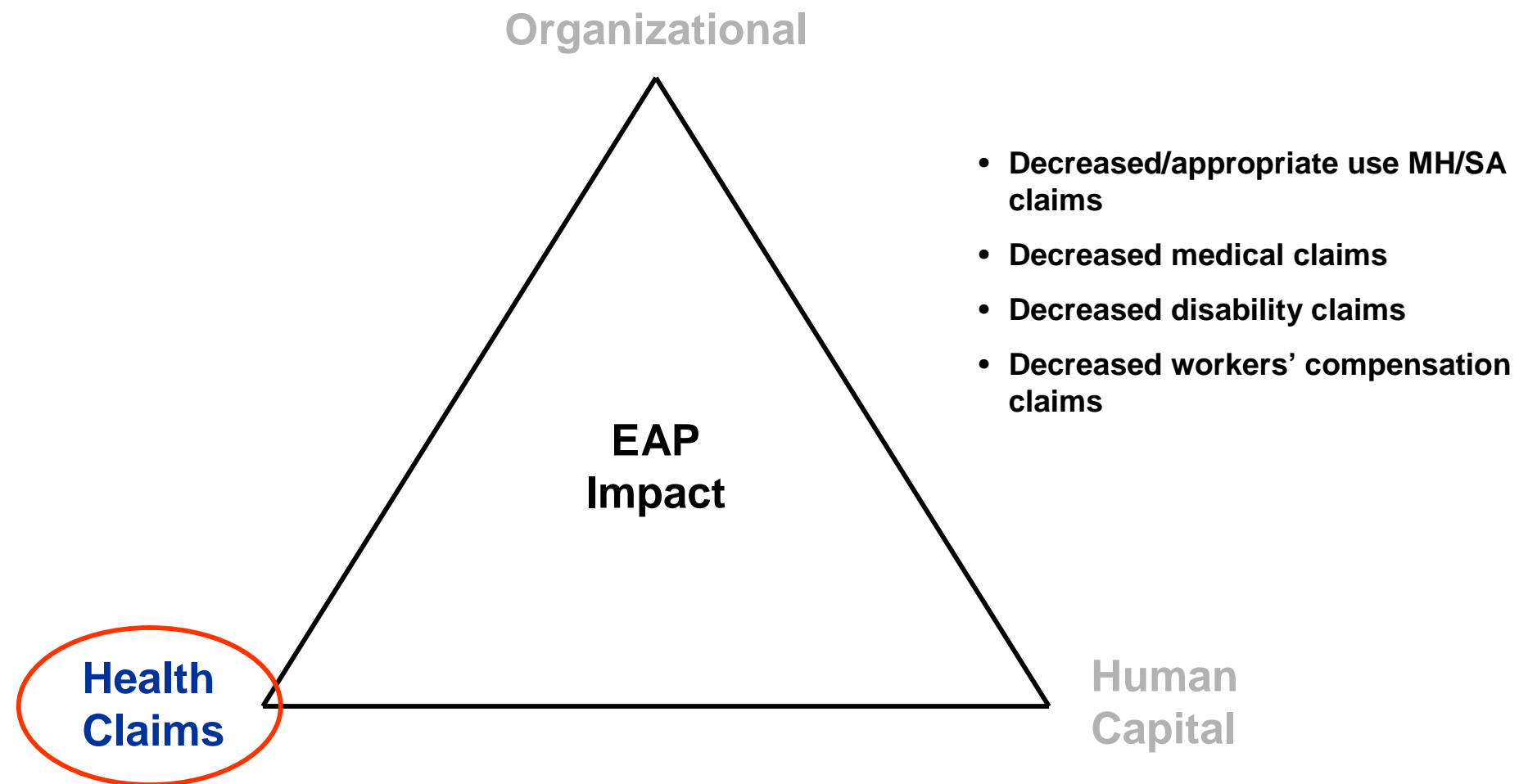
# EAP Outcomes: Job Performance

## Supervisor Ratings of Employee's Performance Before and After Supervisory Referral to EAP (% rated well or satisfactory)

Study: Jardine & Lieberman (1993), [Behavioral Healthcare Tomorrow](#)



# EAP Impact: Health Claims Savings







## EAP Effectiveness Research

- **Review of early alcohol-based EAPs in US (*Blum & Roman, 1995*)**
- **Review of 30 outcome studies in UK (*McLeod & McLeod, 2001*)**
- **Client follow-up data from EAP providers (*Ceridian, FOH, Optum*)**

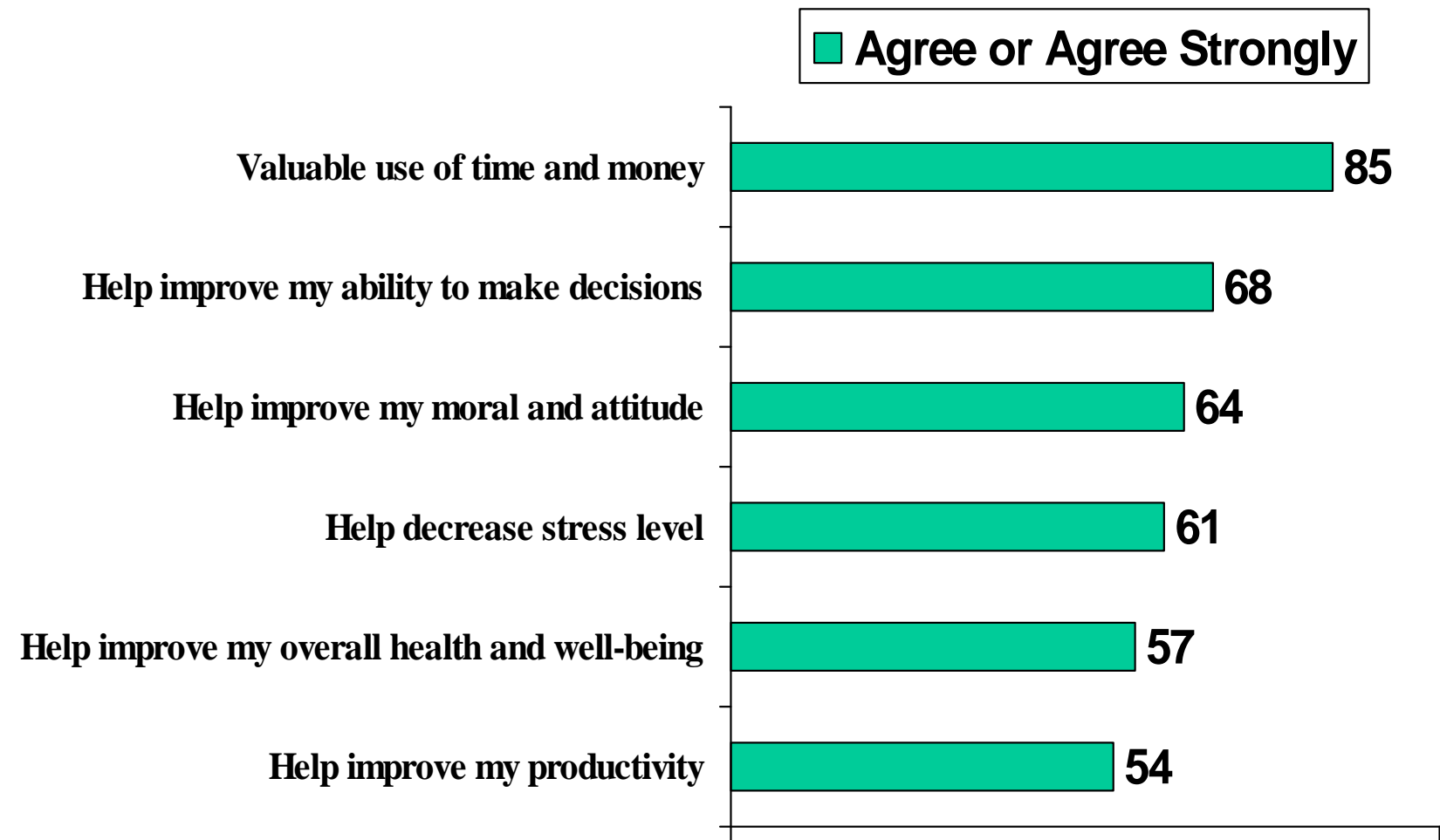
# EAP Non-Case Services



# EAP Impact: Organizational



# EAP Training Participant Evaluations



Source: *N* > 3,500 Employees in 190 Trainings. Attridge, EAPA, 1999 Conference



## EAP Management Consultations

### Evaluations of Management Consultation Services (N = 73)

- **70% MC helped to better understand and respond**
- **93% overall satisfied with MC service**
- **92% would recommend MC to other managers**
- **94% rate MC service as very valuable or valuable**
- **Manager's see employees improvement after consultation in areas of work productivity, absenteeism, morale and safety**
- Source: Parker et al. (2002). Helping managers manage workplace crises: The results of Optum management consultation evaluation surveys. *Acta Academia*, 176-182.



## **EAP and Organizational Development**

- **EAP staff consultation with human resources and other departments on employee health policy and design of programs and services**
- **EAP staff role in managing organizational change and company downsizing processes**
- **EAP staff assist with leadership development and executive coaching services**

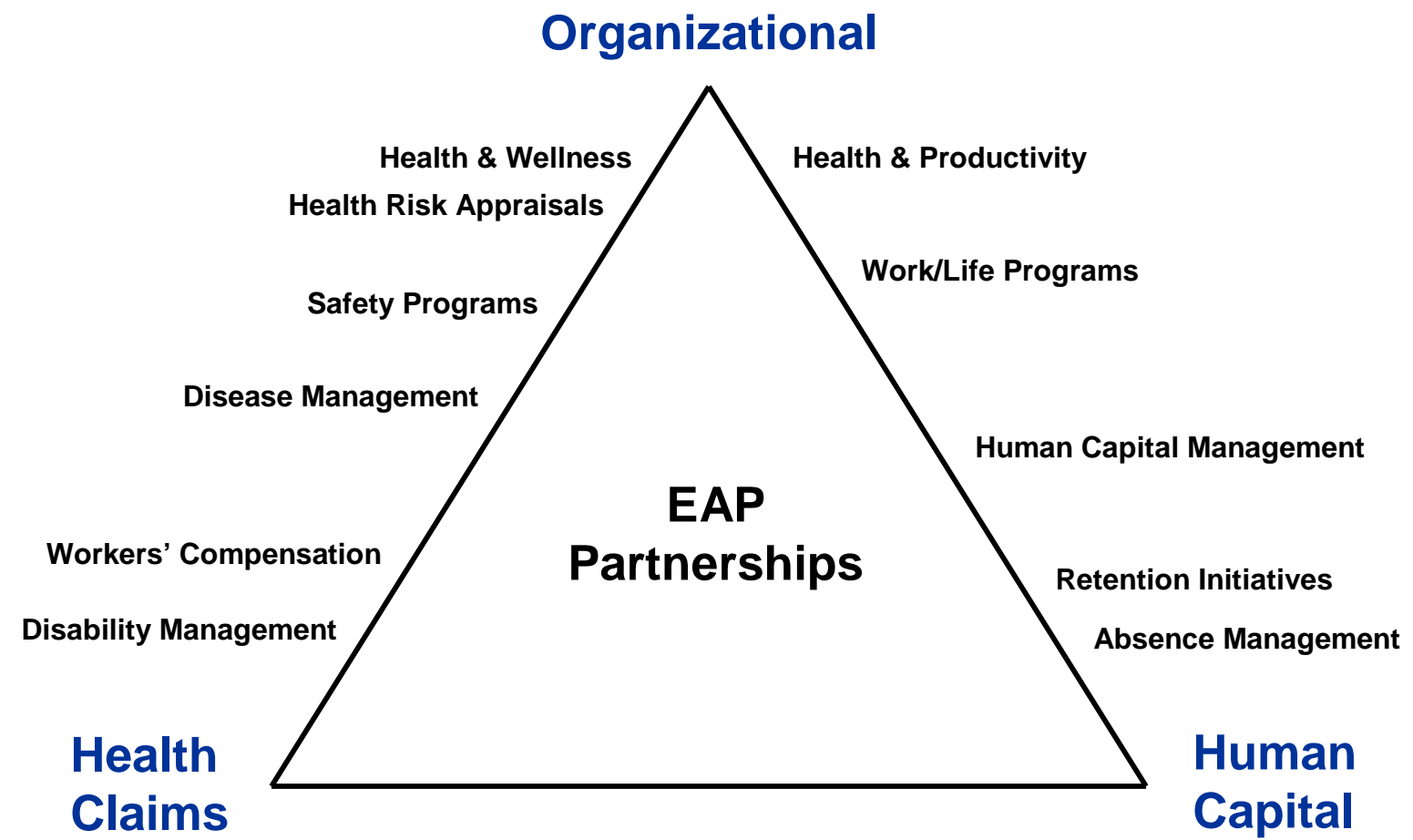
***Outcomes and ROI Research is lacking for EAP organizational development services***



## **Part 2**

# **Partnerships and the EAP Business Value Model**

# EAP Partners







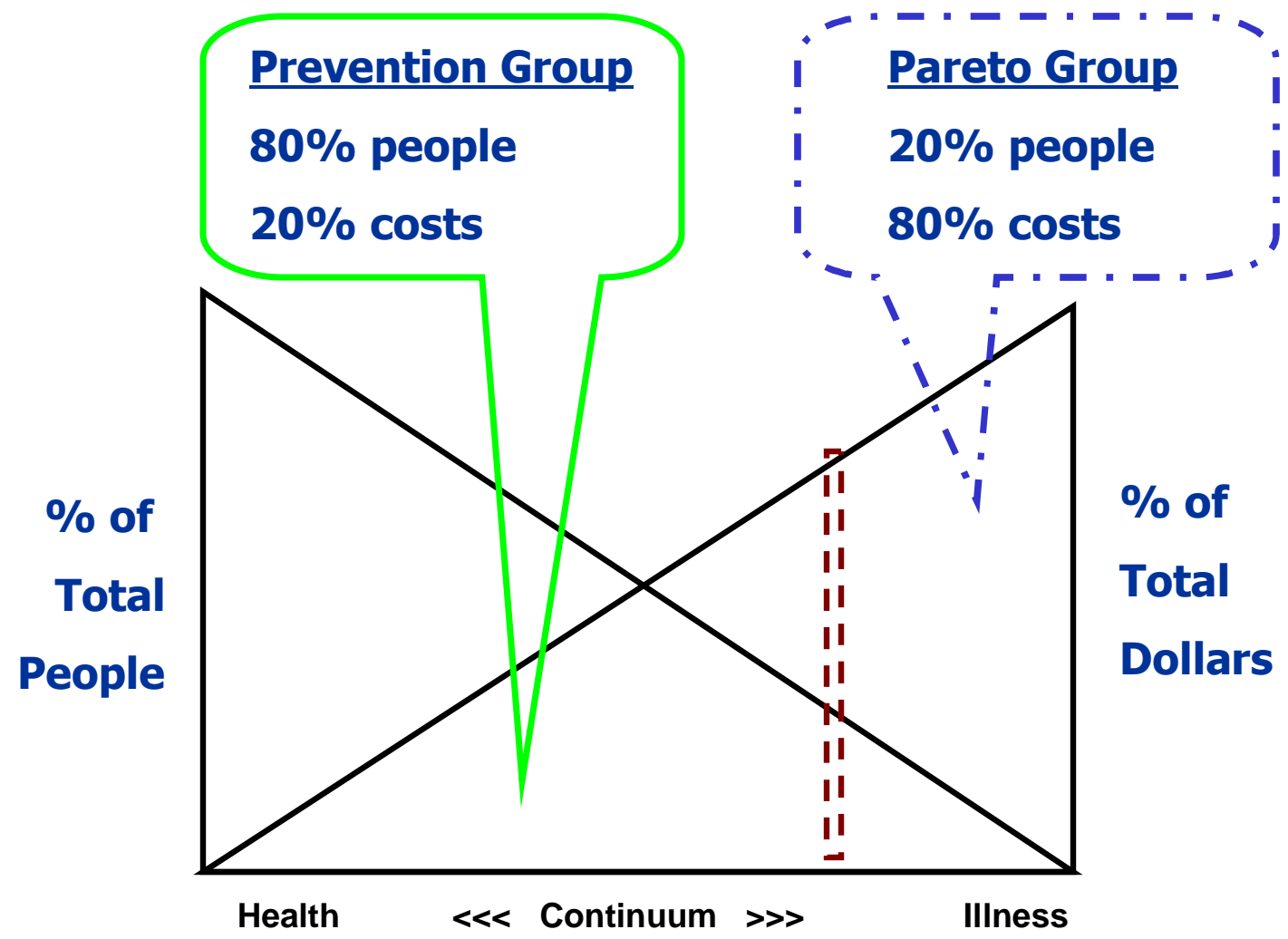
# **EAP Partnership Types**

## **Two Basic Types of EAP Partners**

**Based on the**

**Health Care Cost Continuum**

# Population Health Management: One Year Snapshot

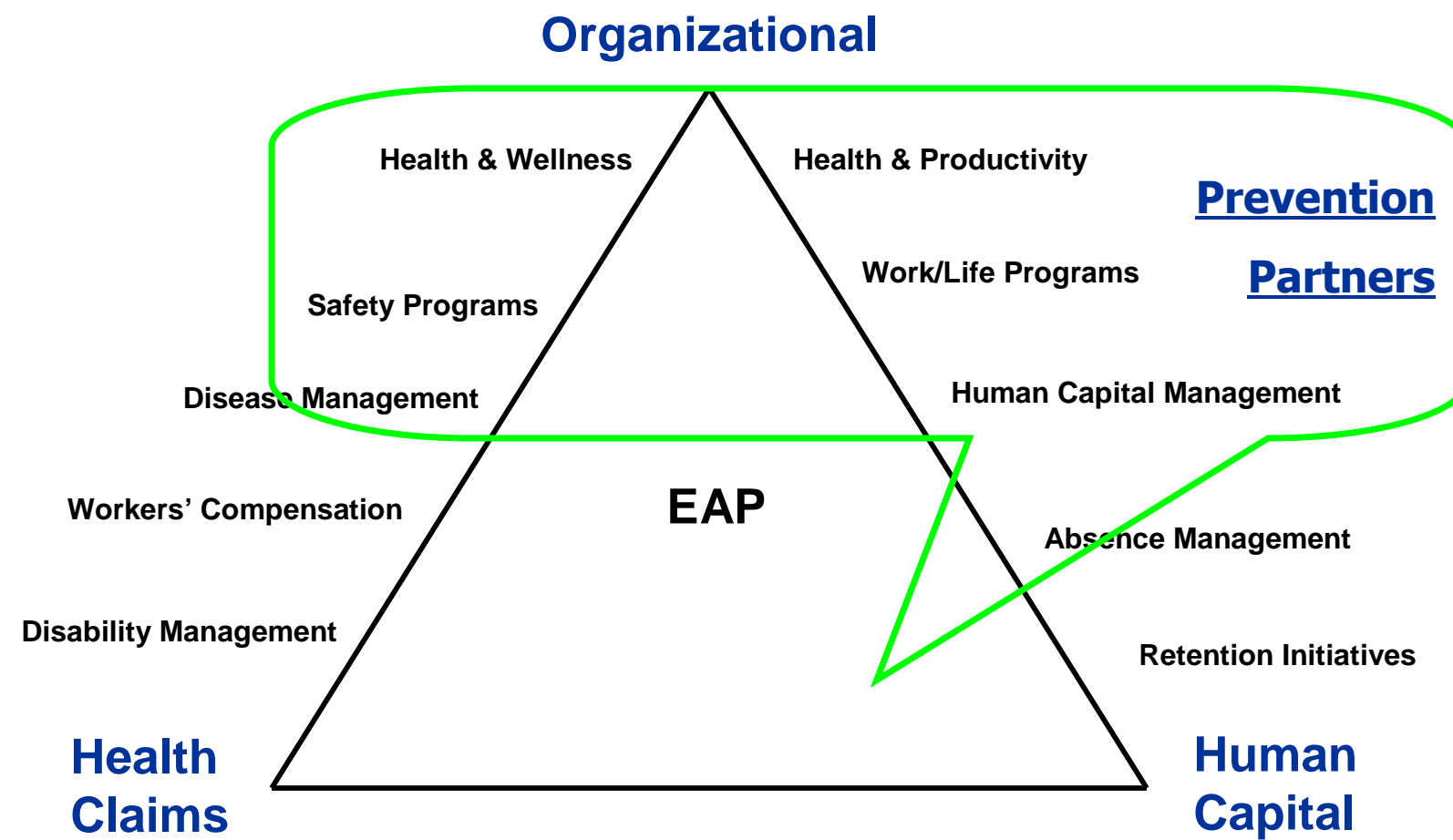




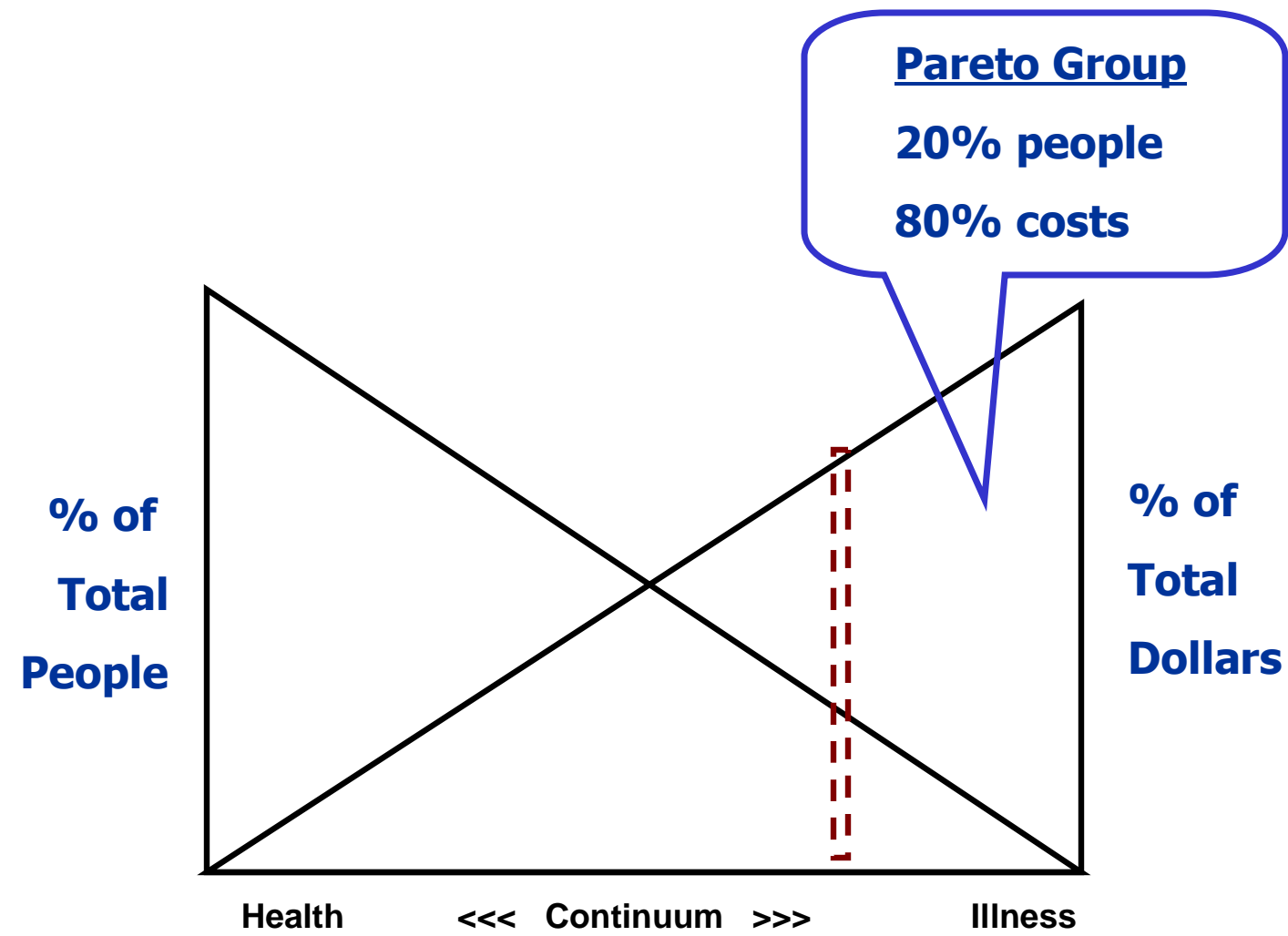
# Prevention Partners

- **Educational, lifestyle behavior change and acute event management efforts for the large part of population who can become high cost in the future without appropriate assessment and early action**
- **Safety and Critical Incidents**
- **Wellness & Occupational Health**
- **Health and Productivity Management**
- **Work/Life**
- **Absence Management**

# EAP Partnerships: Prevention



# Population Health Management: One Year Snapshot





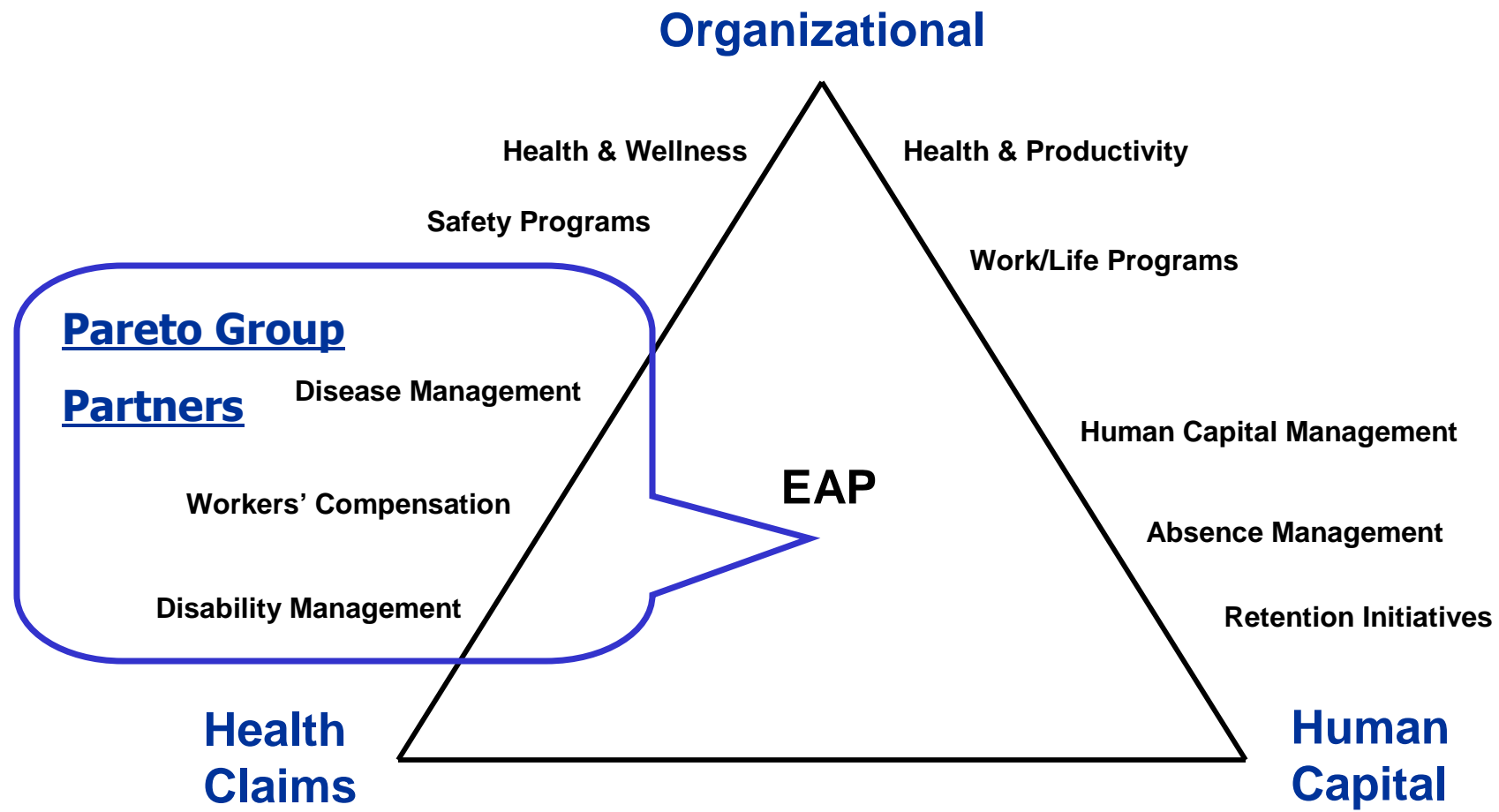
## Pareto Analysis at State of MN

### Analysis of Health Care Claims Data:

- **33% of members accounted for 70% of all costs**
- **These members had one or more disease states**
- **Most common high-cost diseases were asthma, diabetes, cancers, heart conditions, hypertension, cholesterol and *psychosocial* (depression, anxiety, substance abuse, psychosis)**
- **Behavioral health patients have 2.7 X avg. cost**
- **Anti-depressants were top drug (\$8M in 2003)**

**Source: Birkland & Birkland (in-press JWBH)**

# EAP Partnerships: Pareto





## Pareto Partners

- **High-risk case management and outreach efforts for the small part of population who already have high costs or are predicted to create the majority of costs**
- **Disability (STD and LTD)**
- **Workers/Compensation**
- **Disease Management – Medical**
- **Depression (as disease and as co-morbidity)**
- **Alcohol and Drug**





## **Part 3**

# **Case Study Examples of EAP Integration with Work/Life and Wellness**



# **Journal of Workplace Behavioral Health**

**(Formerly Employee Assistance Quarterly – EAQ)**

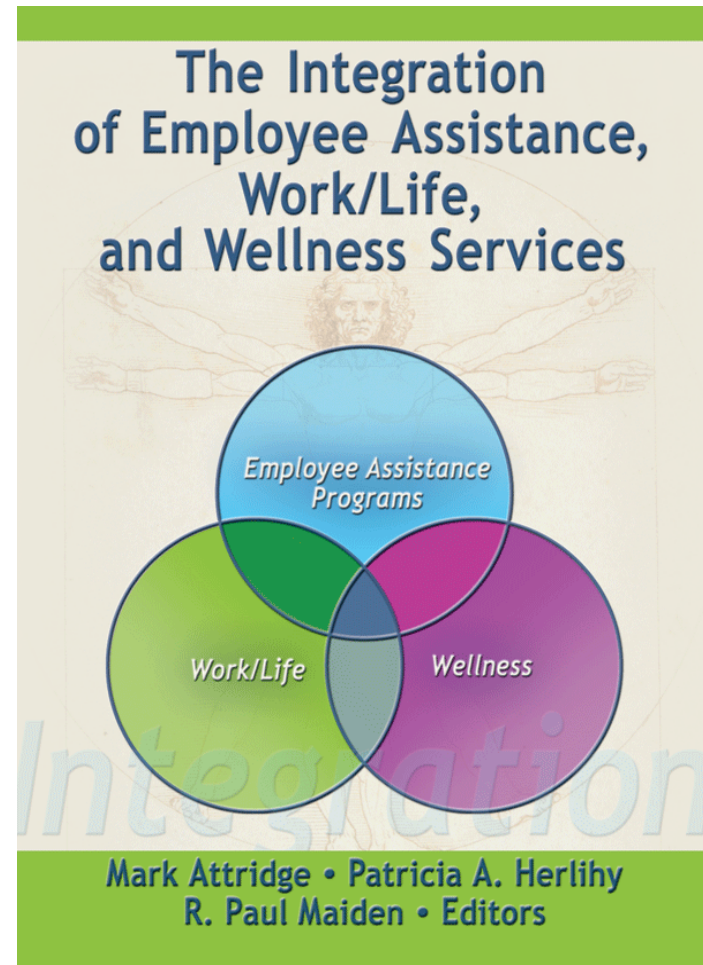
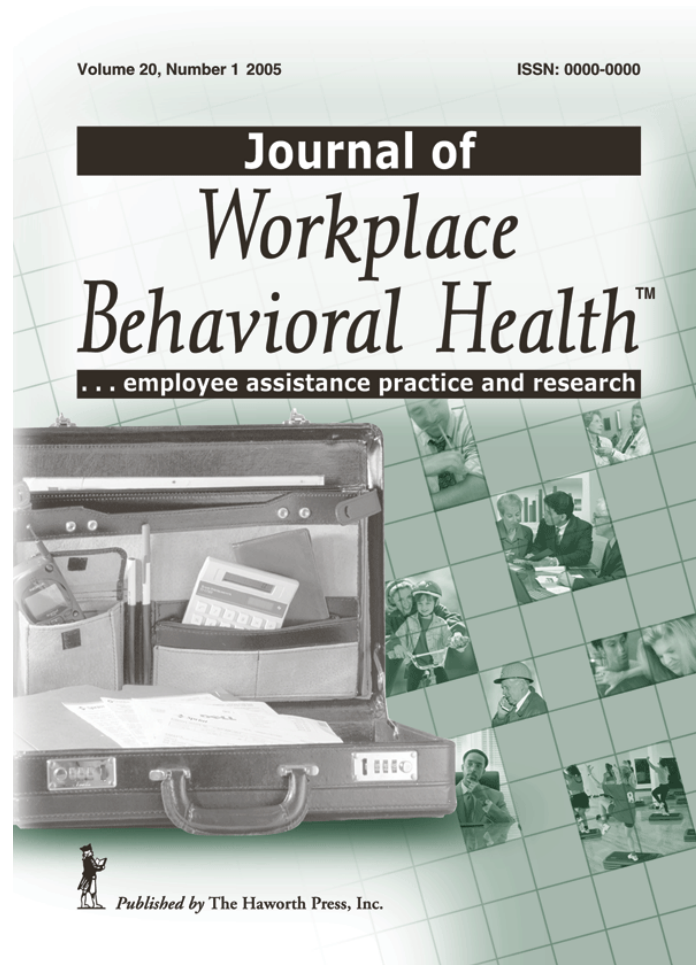
***Special Double Issue of the Journal in 2005***

***Also Published as a Book by Haworth Press in 2006***

*Integration of EAP, Work/Life and Wellness Services*

*Editors: Mark Attridge, Pat Herlihy and Paul Maiden*

# New Research on Integration





**Vendor: Integrated EAP, Work/Life and Health  
Technological Sophistication**

**EAP Partners:**

**Work/Life**

**Health Wellness**

**Customer Programs**

**HR Outsourcing**

**Special Projects:**

**Face to Face EAP model**

**Phone model**

**Web-based EAP:**

**Website Resources**

**Online clinical contact model**

**Voice Over Internet Protocol**

**Instant Messaging**

**Source: Kelly, Holbrook & Bragen (in-press JWBH)**

# FOH Federal Occupational Health

**Special Model: Sell Programs to 370+ other agencies  
1.5 Million US government employees in 140 countries**

## **EAP Partners:**

**Work/Life**

**Wellness/Fitness**

**Clinical (medical via  
on-site MDs, RNs)**

**Environmental Health**

## **Special Projects:**

**Smoking Cessation**

**Crisis Response**

**Organizational integration via**

- standing advisory committees
- task forces
- work groups

**Source: Stephenson & Delowery (in-press JWBH)**

The logo for Ernst & Young is centered within a horizontal rectangular banner. The banner has a dark blue background with a pattern of glowing green lines and dots, resembling a digital or data visualization. The text "Ernst & Young" is written in a white, sans-serif font across the center of the banner.

# Ernst & Young

**Internal Director with External Vendors for EAP & Work/Life  
100,000+ employees global / 23,000 US national**

**EAP Partners:**

**Corporate HR**

**EAP Vendor = MHN  
(Managed Health Network)**

**W/L Vendor = LifeCare**

**Special Collaborative Projects:**

**Program promotion branding**

**Develop website resources**

**Account management**

**Operational practices & data**

**Source: Turner, Weiner & Keegan (in-press JWBH)**



# State of Minnesota

**Mixed Model: Internal Staff and EAP Vendors**

**52,000+ employees at state government**

**EAP Partners:**

**Risk Management**

**Occupational Health & Safety**

**Workers Compensation**

**Disability**

**Case Management**

**Special Projects:**

**Cross referral of participants**

**Depression**

**Violence & Hostility**

**Organizational Consulting**

**Source: Birkland & Birkland (in-press JWBH)**



**Internal Model: Employee Assistance *Consultants***

**146,000+ employees – US national and global**

**EAP Partners:**

- Corporate HR**
- Employee Relations**
- Corporate Security**
- Corporate Benefits**
- Employment Law**
- Disability**
- Risk Management**

**Special Projects:**

- Violence Free Workplace Training**
- MH/SA referral via EAC**
- Complex Case Management**
- Critical Incident Response and  
Emergency Preparedness**
- Depression Awareness/Screening**
- Organizational Consulting**

**Source: Bidgood et al. (in-press JWBH)**





## **Part 4**

# **Measurement Implications**



# Measurement Levels

- **Level 1**
- **EAP client outcomes collected from clinical assessments and/or client self-report surveys**

Value = direct outcomes from participant experience

# EAP National Outcome Study

Clinical Outcomes % Yes

Improved Health & Well-being - 73%

Decreased Level of Stress - 75%

Improved Daily Life Activities - 67%

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Work Outcomes % Yes

Productivity Gain = 72%  
1-10 self-rating change:  
before 4.7 vs after 8.2

Absenteeism Avoided = 60%  
2 work days saved

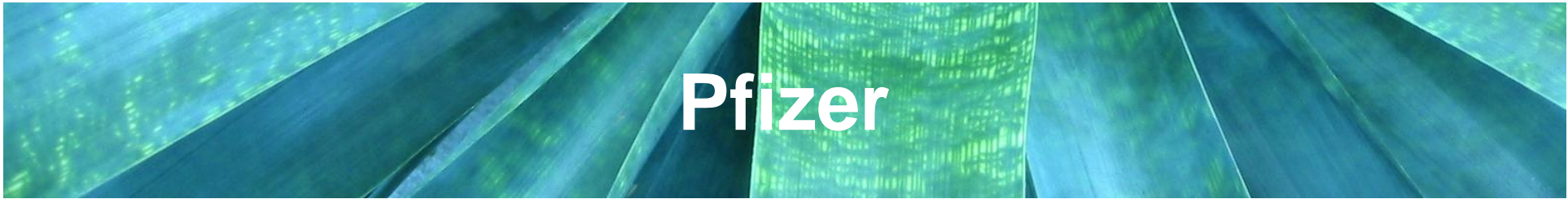
Source: N = 1,025 EAP Cases. Reidel & Attridge (2000) IHPM.



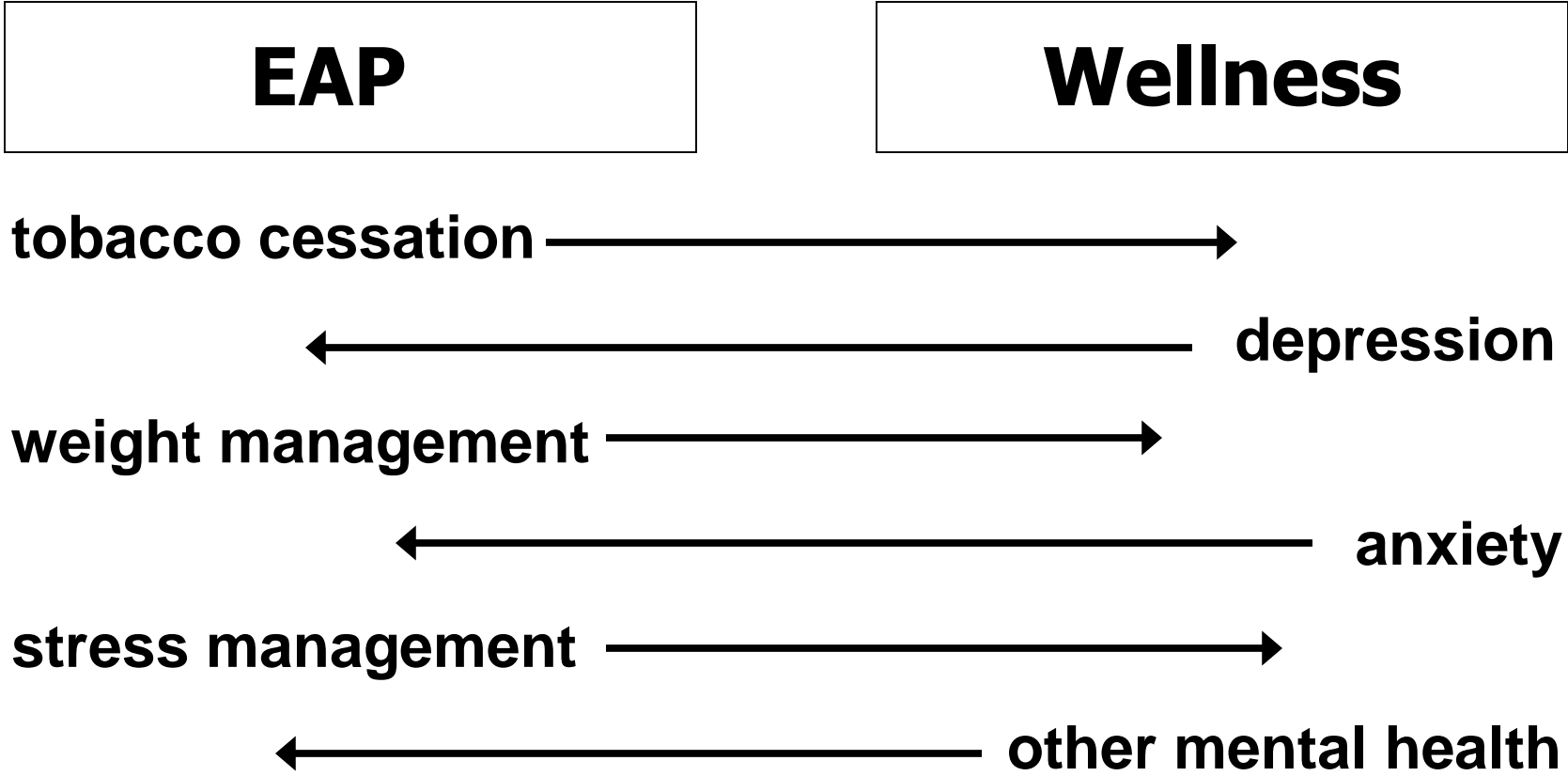
## Measurement Levels

- **Level 2**
- **Other partner data on client use rates**

Value = additional referral case yield into other programs  
– which adds extra events to their value model



### Cross Referral between Programs



Source: Mulvihill (in-press JWBH)

A horizontal banner with a blue and green abstract background featuring glowing lines and data-like patterns. The text "Measurement Levels" is centered in white.

# Measurement Levels

- **Level 3**
- **Integrated Databases**

Value = better data from non-EAP sources:

Administrative records of employee absence

Disability (STD / LTD) & Workers Compensation

Health care claims benefits



# Fairview Health Services

**Mixed Model: Fairview Alive! Integrated Program**

**13,000+ employees in Minnesota**

**EAP Partners:**

**Human Resources**

**Health Promotion**

**Occupational Health**

**Benefits**

**Watson Wyatt**

**Special Projects:**

**Depression**

**Cross Promotion and Referral**

**Award-winning Results:**

**Program use 3-year: 54% to 82%**

**EAP use: 4.3% to 5.9%**

**Decreased health risks**

**\$ Savings Medical, W/C & Absence**

**Source: Eischen, Grossmeier & Gold (in-press JWBH)**



## Measurement Levels

- **Level 1 – EAP client outcomes collected from clinical assessments and/or client self-report surveys**
- **Level 2 – Other partner data on client use and outcome**
- **Level 3 – Integrated Databases**