

Question: Chevron provides a Wellness Function that comprises Employee Assistance, WorkLife Services, Health and Productivity (cardio program, HRAs, fitness centers, smoking cessation, resources for prevention of repetitive stress injury as well as other health promotion resources), and non-occupational disability management.

Can you let us know the approach your company takes on how these groups are organized:

1. Specifically does your company align and integrate physical wellness resources and psychological health resources, and strive to realize synergies between these two traditionally separate health domains? Any examples?
2. Do EAP, WorkLife services, and Well-being resources function pretty much independently, i.e., managed under different vendors, or out of different departments. or reporting into different managers? Are some or all of these resources bundled within insurance benefit plans and/or HMOs?
3. Is the arrangement somewhere in-between these organizational configurations or delivery models, i.e., some cross over integrations, other separate missions, some integrated within health benefit plans?

Sara Kashima, Chevron, 9/21/2011

COMPANY & CONTACT NAME	COMMENTS
Deere & Company Gail Henderson	<ol style="list-style-type: none"> 1. Under the V.P. of Human Resources (who reports in to the CEO) we have a department called Global Health, Work-life and Safety that focuses on total employee well being. In this group is Corporate Occupational Health which owns disability management, global travel management and traditional on-site Occupational Health Services. Wellness includes the management of the Health Risk Assessment and other traditional wellness resources such as tobacco cessation, health coaching and weight management for example. Work-life covers the psychological health resources, EAP for example and other work-life resources such as workplace flexibility solutions. And last but not least, global safety which includes programs for both on and off the job. 2. We use different vendors, for example in the U.S. we use ComPsych for EAP for WebMD for our health risk assessment and health coaching service. We have not bundled our wellbeing resources with our other benefit plans because of possible negative perceptions of them being included and, we have a global focus and our health benefit plans generally only cover U.S. employees. These resources are all managed from the Global Health, Work-life and Safety department.

	<ol style="list-style-type: none"> 3. We package everything in-house at John Deere, however we do require that our vendors have integration points. For example, if an employee calls our Employee Assistance Program and is presenting with more serious psychological issues, the Employee Assistance Program will direct the employee to the mental health & substance abuse benefits through United Behavioral Health.
Pearson, Inc. Christine Pfeiffer	<ol style="list-style-type: none"> 1. We have started to address this issue by combining our EAP with our medical plan intake. This will begin on Jan 1, 2012. We also are working to make sure our STD plan administrator includes EAP in treatment and return-to-work planning. 2. For 2011 we changed our EAP vendor to line up with a medical vendor change we planned for 2012 so the integrated model begins Jan 1. I work closely with the Director of Benefit Plans on this integrated approach. We both report to the same SVP. We also work closely with the Wellness Program Manager to create combined messages and make sure our programs are complimentary.