



INSIGHTS

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Nothing in Life is Free

I had the pleasure of hearing Mary Johannesson of ESI Canada speak at the 2007 Solareh Conference in May. ESI is one of Canada's premier health benefits management companies. The information that she presented was from ESI's annual Outcomes Conference- a conference where the latest pharmacy/dental trend research, and benefit plan analysis is presented.

I came away with more than a few thoughts: Firstly, I learned that drug costs per claimant increased by 8.4% in 2006, while utilization per claimant was up by 3% to 11%. Further, I was reminded of the fact that there are several new, ongoing factors affecting drug costs; and lastly, that employees continue to value their benefit plans.

There was a lot buzzing through my mind as I made the drive home that night, but the thought that "if you want healthcare, you have to pay for it" never left me. Canadians are coming around to this way of thinking too. According to the 2006 edition of the Avenir Healthcare survey, 45% of employees are willing to pay more for health coverage, and a further 31% are willing to pay a higher portion of the cost when they actually use medical services.

I'm not so sure that employees understand as costs are going up, there is a greater likelihood that their benefits may be threatened. I do however, believe that they would prefer to keep their benefits and pay a little bit more to keep them. Employers and consultants need to be making employees aware of what the actual costs of providing benefits are, and to that end, making the appropriate changes to plan design to manage them.

The Pulse on Plan Members survey done by Benefits Canada also indicated Canadians are open to assisting employers in saving benefit costs. It found that 74% of health plan members said they would participate in cost control by using generic drugs, 48% would pay pharmacy dispensing fees, and 48% would pay or increase their deductible.

Employees are learning that there is a finite amount of contribution an employer can make, and they know the end user is going to have to step up and assume some of the financial responsibility.

Educating employees about the impact of Direct to Consumer marketing through TV ads, letting them know

that dispensing fees are increasing, and making them aware of the two-tiered pricing model that has now been implemented by Bill C102 only helps to remind them that employers can't do it alone.

Engaging plan members in dialogue about their plan and teaching them about the role they can play in managing costs is essential. Employees want comprehensive benefit packages, but only if they are brought into the discussion so they can understand what it's costing their employer, why costs will continue to increase, and what they can do about it.

The Romanow Report was an excellent summary of what needed to be done to fix the Canadian Healthcare System. However, it led Canadians to believe that the system could be improved at no additional cost to themselves. That is just not the case. What is encouraging is that Canadians are beginning to understand this and they are now willing to listen.

The same comment could be made another way to employers: Employees want to be part of the solution. The time is right to dialogue with plan members, and if appropriate, to make the changes to plan design to ensure that future plan costs remain affordable for both employers and employees alike.

Until next time...

Should Unhealthy Workers Pay More?



U.S. employers say workers who lead unhealthy lifestyles - such as smoking, a poor diet, and inadequate exercise - should be required to pay more for their healthcare, says a PricewaterhouseCoopers Health Research Institute survey. Nearly two-thirds of employers shared this view, up from the 48% who felt that way in 2005. Eight in 10 employers believe that providing financial incentives for employees participating in healthy lifestyle programs could reduce their company's healthcare costs. Such incentive programs range from cash rewards for completing health risk appraisals to rewards for accomplishing agreed-upon goals such as a specified amount of weight loss or smoking cessation.

When Good Intentions Go Astray

When Good Foods Do Bad Things



If you like grapefruit, you might want to check your medicine cabinet before eating it. The fruit tops a list of everyday foods that can cause side effects, even life-threatening problems, when consumed with certain medications.

Oatmeal, yogurt, aged cheese, leafy greens and even vitamin and herbal supplements can interfere with drugs.

Whether you take prescription or over-the-counter medications, the foods you eat can make a drug work faster or slower, or prevent it from working at all.

Calcium in foods and supplements, for instance, can bind to the antibiotic tetracycline, reducing the amount that's absorbed by the body. Some breakfast cereals and fibre supplements can also reduce the absorption of certain drugs.

Foods can also interfere with the action of a medication once it's absorbed. Vitamin K in liver, spinach, cabbage and Brussels sprouts can decrease the effectiveness of prescription anticoagulants, drugs that decrease the clotting ability of the blood.

A substance called tyramine in fermented foods such as aged cheese, sauerkraut, pickled herring, fava beans, Chianti wine and yeast extracts (such as vegemite and marmite) can interact with potent antidepressant medications called monoamine oxidase inhibitors and cause dangerously high blood pressure.

The impact of food-drug interactions depends on the dosage of the drug, a person's age, body size and state of health, and the timing of eating a food and taking the medication. While some foods and medications can simply be taken at different times, other foods must be avoided altogether if you are taking certain drugs.

Individuals at higher risk include those who take multiple medications, who take medications for long periods of time or who are chronically ill, as well as those who take medications for heart disease and high blood pressure.

Also, as we get older, changes in the gastrointestinal tract and liver can affect the absorption, metabolism and excretion of medications and increase the risk of side effects.

Preventing a food-drug interaction requires open communication with your health-care provider.

Tell your doctor, pharmacist, dietitian and naturopath everything you're taking including medications, vitamin and herbal supplements, as well as alcohol. Be sure to inform your physician and pharmacist about any unusual or

uncomfortable side effects that occur when taking a medication.

Develop a relationship with one pharmacy so the pharmacist has a record of everything you're taking.

Read warnings and follow directions on how to take medication - prescription and over-the-counter.

If you're unsure whether a medication interacts with a food or supplement, ask your pharmacist.

Can Vitamins Be Harmful?

Here are some common food/nutrient and drug interactions:

Grapefruit

Eating grapefruit or drinking grapefruit juice can block the body from breaking down medications, leading to serious, even life-threatening side effects.

Medications influenced by grapefruit include certain drugs used to treat high blood pressure, elevated blood cholesterol, migraines, depression, anxiety and male impotence. If you take medications for any of these conditions, check with your pharmacist to see if it is affected by grapefruit.

Vitamin K

If you take a blood-thinning medication called warfarin (Coumadin), you need to regulate your intake of vitamin K, present in high doses in leafy greens, liver and some multivitamins.

Fibre

High doses of fibre can interfere with the absorption of medications including digoxin (Lanoxin), used to treat heart disorders.

Supplements

High doses of vitamin E, fish oil and certain herbal supplements such as garlic, ginkgo biloba, ginseng, feverfew, and St. John's Wort can thin the blood and counteract medications like warfarin, thereby increasing the risk of abnormal bleeding.

Supplements that stimulate the immune system, such as Echinacea, could interfere with medications designed to suppress the immune system.

Iron and calcium supplements can reduce the effectiveness of levothyroxine (Synthroid), a medication used to treat an under-active thyroid gland. Be sure to take calcium or iron pills at least two hours before or after taking levothyroxine. Mineral supplements such as calcium, magnesium, iron and zinc can also interfere with the absorption of the antibiotic ciprofloxacin (Cipro).

Avoiding Common Fitness Pitfalls

While exercising isn't complicated, it's very easy to make mistakes. Regardless of the reason for the mistakes, they can lead to injuries or at the very least be counter-productive to your fitness goals.



Take note of the following common mistakes and how to avoid them. These tips will help ensure your workout time is effective and help prevent injuries.

Too much, too soon

Many new exercisers try to lose weight or tone up too quickly, by exercising too frequently or trying exercise programs that are too difficult for their fitness level. Be sure to start with an exercise plan that takes your current fitness regimen (or lack of) into account.

Pie in the sky goals

Despite what many advertisers would like you to believe, it's unrealistic to think you can lose 30 pounds in 30 days or that you can have Hollywood abs simply by doing 10 minutes of crunches a day. It's good to set goals but be sure they aren't too aggressive and realize it's okay to periodically re-define them.

Not staying hydrated

Drinking enough water on a daily basis is important. When you exercise you need to consume even more water. You should drink 16 ounces for every hour of exercise you complete. Plus you should try to consume 1-2 cups of water about 30 minutes before you begin working out.

Eating too little

No, that's not a typo. Not eating enough can be as detrimental as eating too much. When the body is not fed consistently, it goes into a starvation mode. Five to six smaller meals evenly spaced throughout the day helps keep the metabolism running smoothly. Just be sure to control portion size.

Fixating on the scale

If you think the scale doesn't lie, consider this. Many professional athletes would be considered obese based on their weight alone. Look at the bigger and more relevant picture. Monitor your body fat percentage, if possible. Otherwise track measurements. Also don't underestimate the importance of improved physical and mental well-being.