

Group Summary Report

Group Health Risk

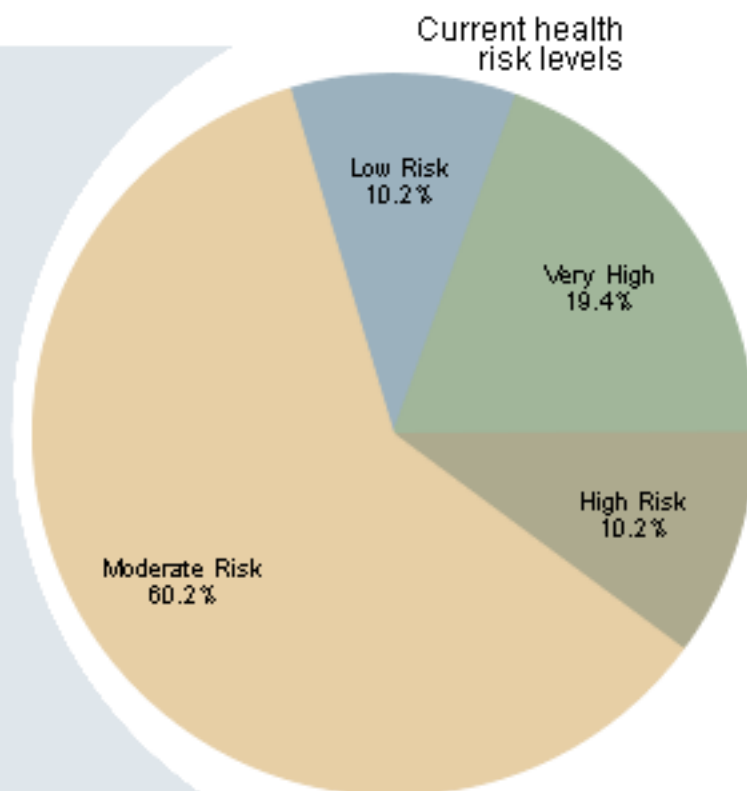
This report will show the information gathered through the health assessments survey conducted with your group. Complete data was collected on 42849 individuals. Graphs will show you how the group ranks as a whole, what their achievable risks are, the diseases and modifiable habits that affect your group.

Low risk members are the healthiest and statistically have the best chance of living long and healthy lives. These people eat properly, watch their weight and diet, and use good sense in regards to traffic safety.

Those in the moderate risk group are "average", they may be a touch overweight or have one or two habits that while not the healthiest are not causing any serious problems. People in this group respond well to health promotion since they do not have far to go.

The high risk group has one or more categories where they are more than twice the average statistical risk for their sex and age. This group will suffer some health care problems, and will benefit greatly from intervention programs.

Very high risk individuals are at significant risk for an early death from disease or accidents. These people can cost their employers in high insurance claims and absenteeism due to health issues and accidents.



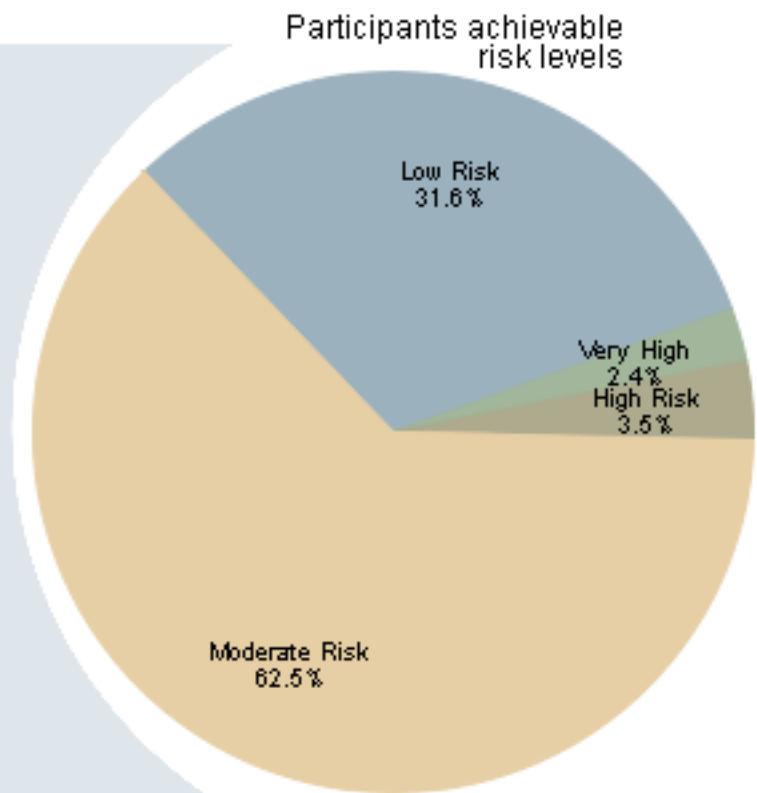
Graph created using data within the specified criteria from:

- ◆ Health Risk Assessment
- ◆ General Health Assessment

Achievable Risk

Achievable Group Risk

The achievable risk graph shows what could happen if the group were to follow all the recommendations for good health. While this won't eliminate all risks, it will significantly decrease them.



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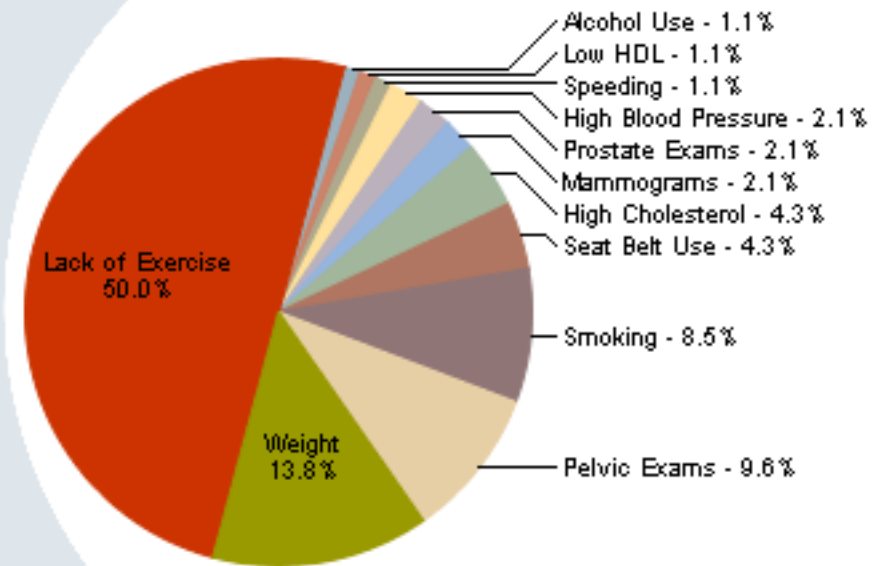
- ◆ Health Risk Assessment
- ◆ General Health Assessment

Modifiable Behaviors

Group Contributing Risk Factors

Members of this group have many habits that if modified would decrease the risks of disease and accidents. This graph shows the number of people negatively affected by each behavior. Maximize your intervention programs by targeting the largest slices of the pie.

Modifiable behaviors



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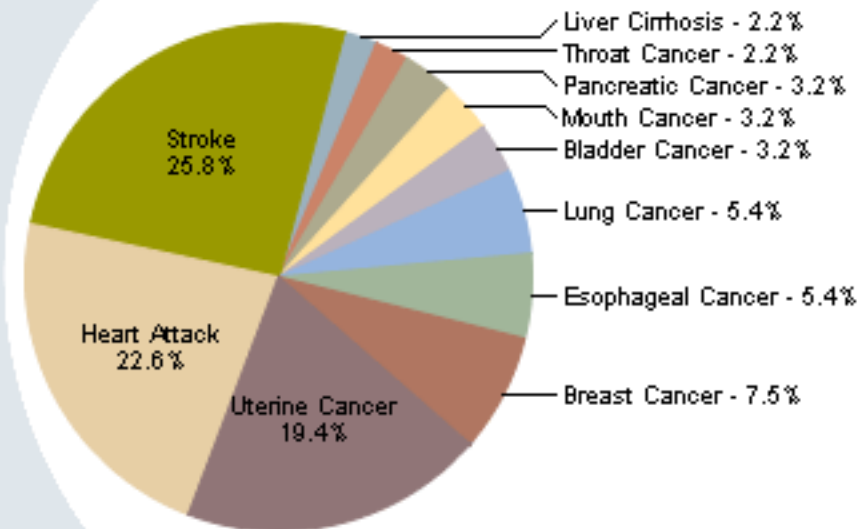
- ◆ Health Risk Assessment
- ◆ General Health Assessment

Specific Disease Risks

Preventable Deaths by Disease

Based on the results of the assessment, the graph will show the impact of risky behavior based on the number of participants with above average risks for each disease.

Preventable Deaths by Disease



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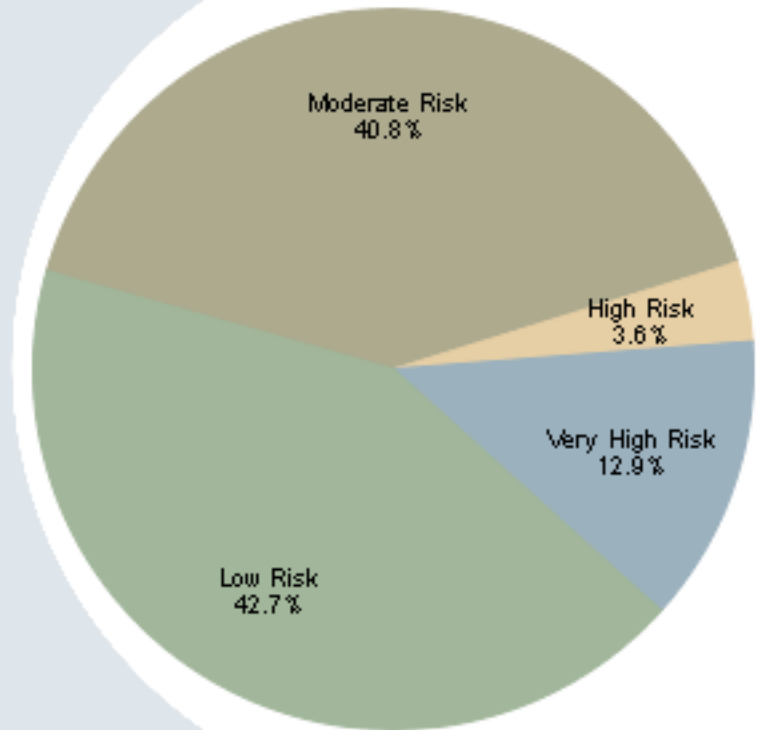
- ◆ Health Risk Assessment
- ◆ General Health Assessment

Cardiac Risk Report

Cardiac Assessment Results

These are the results from your members that have taken the disease specific cardiac risk assessment. Complete data was collected on 11063 individuals. This graph shows the break down of cardiac risk across your group.

Group Risk Levels



Graph created using data within the specified criteria from:

◆ Cardiac Risk Assessment

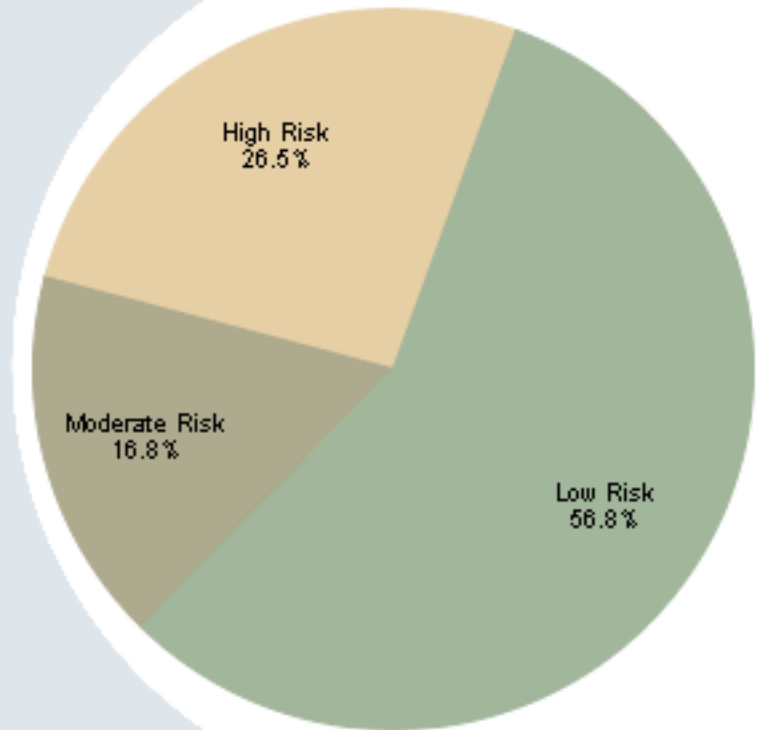
Diabetes Risk Report

Diabetes Assessment Results

9.6 percent of adults in America have diabetes. 41 million Americans are estimated to have pre-diabetes. Most people with pre-diabetes develop type 2 diabetes within 10 years, unless they make changes to their diet and physical activity that results in a loss of about 5-7 percent of their body weight.

These are the results from your members that have taken the disease specific diabetes risk assessment. Complete data was collected on 5478 individuals. This graph shows the breakdown of diabetes risk across your group.

Group Risk Levels



Graph created using data within the specified criteria from:

◆ Diabetes Risk Assessment

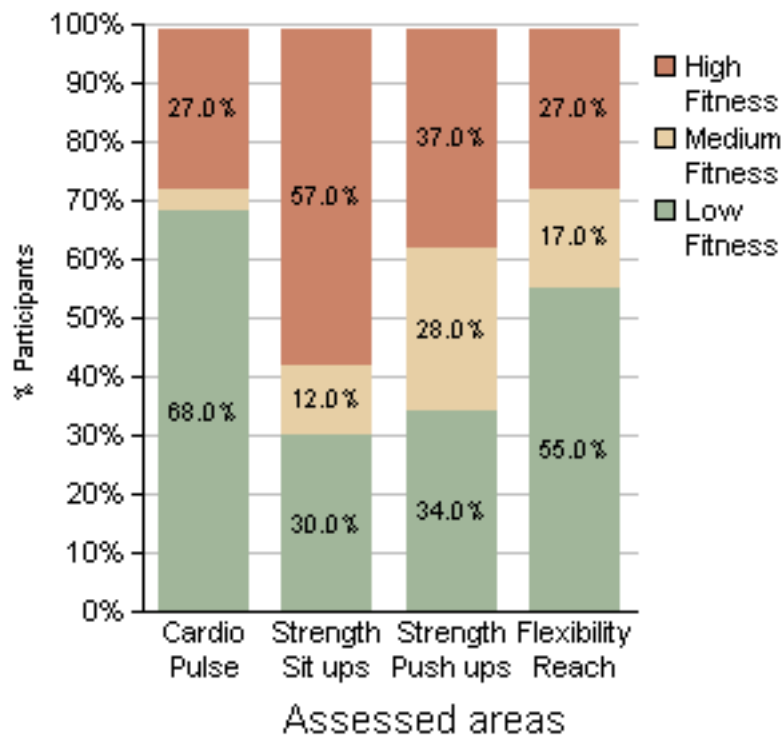
Fitness Report

Fitness Assessment Results

These are the results from your members that have taken the fitness assessment. Complete data was collected on 5617 individuals. This graph shows the break down of the physical condition in four different areas for your group.

Significant health benefits can be obtained by including a moderate amount of physical activity (e.g., 30 minutes of brisk walking or raking leaves, 15 minutes of running, 45 minutes of playing volleyball). Additional health benefits can be gained through greater amounts of physical activity.

Heart disease is the leading cause of death among men and women in the United States. Physically inactive people are twice as likely to develop coronary heart disease as regularly active people.



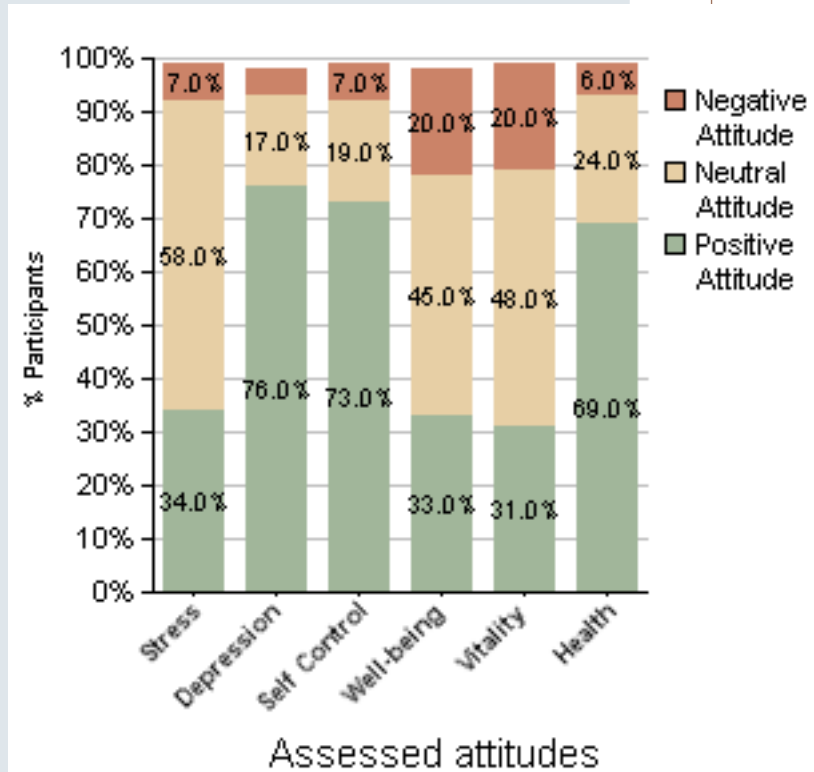
Graph created using data within the specified criteria from:

◆ Fitness Assessment

General Well-being Report

General Well-being Assessment Results

These are the results from your members that have taken the well-being assessment. Complete data was collected on 7645 individuals. This graph shows the break down of the perceptions of your group in six key areas.



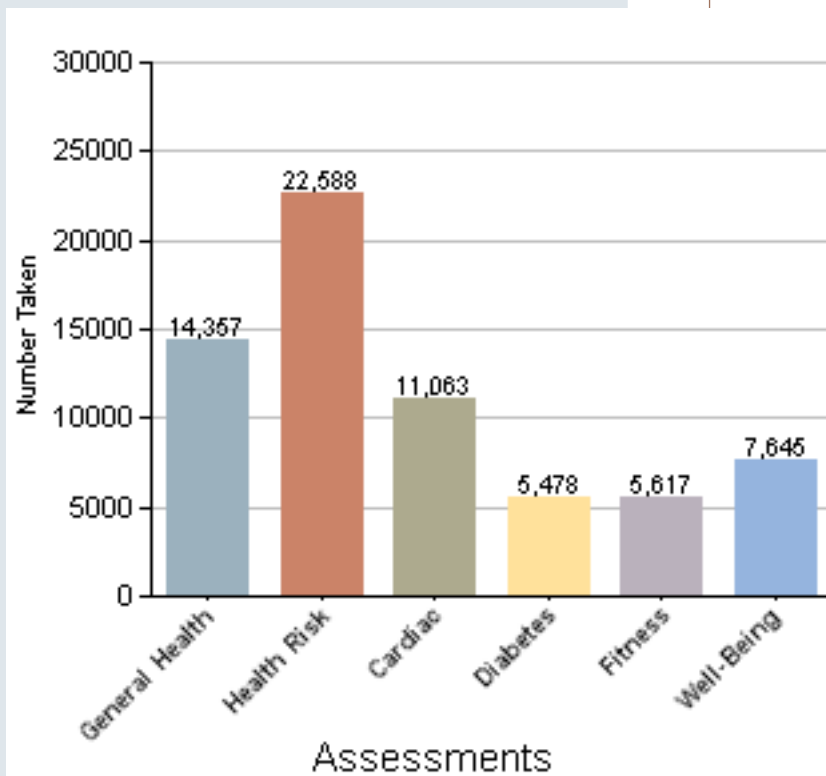
Graph created using data within the specified criteria from:

◆ General Well-being Assessment

Total Assessments Taken

Number of Assessments Taken

This graph indicates the number of each assessment your group has completed. This can help put in perspective the graphs in this report, that show the results as percentages



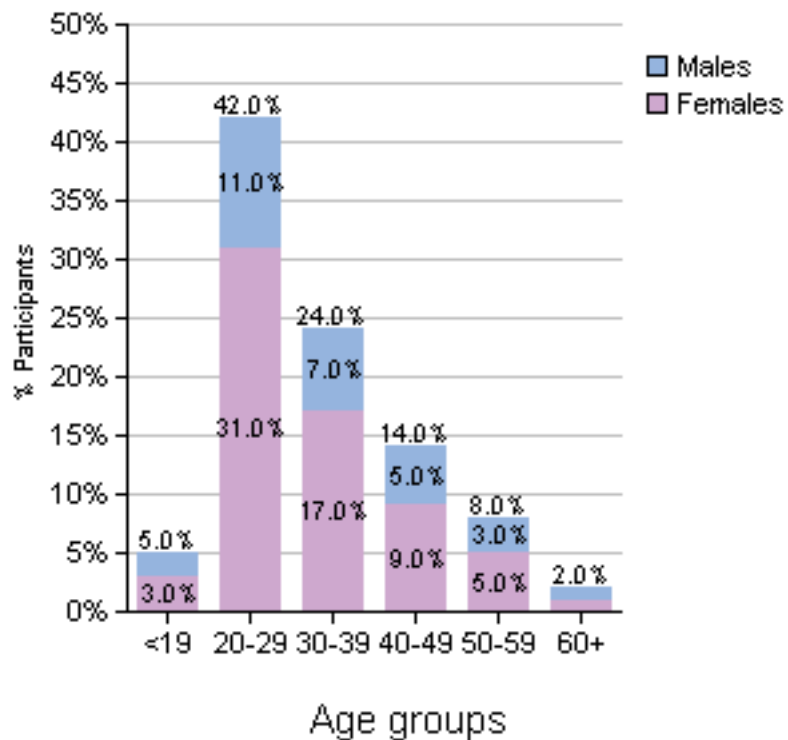
Graph created using data within the specified criteria from:

◆ All Assessments

Age and Sex Demographics

Sex by Age Group

Knowing the age and sex of your group are important as you analyze the results. In many instances younger people will show lower risk levels, even if they have poor health habits. Changing these modifiable habits before they become ingrained will significantly reduce their risks as they get older. Women can reduce their risks by having regular pelvic and breast exams.



Graph created using data within the specified criteria from:

◆ All Assessments

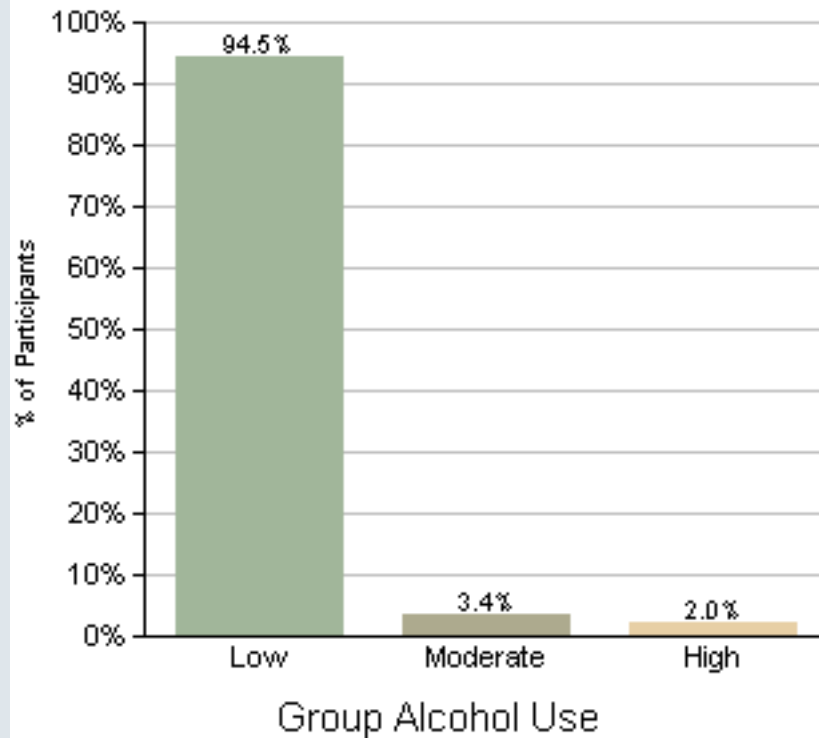
Alcohol

Drinks in a Week

Liver disease and alcohol related motor vehicle deaths are two of the top killers in the US. Healthy People 2010 has targeted substance abuse reduction in its list of health issues.

Males that drink eight or less drinks in a week and females that drink four or less drinks in a week are categorized as low use. Men that drink fifteen or more drinks in a week or women that drink more than seven drinks in a week are considered to be high users.

This group has fewer moderate and heavy drinkers than the US average. Of this group, 5367 participants out of 36945 reported either drinking and driving or riding with someone who had too much to drink in the last month.



Goal:

Less than 6% drink 14 or more drinks a week.

Graph created using data within the specified criteria from:

- ◆ Health Risk Assessment
- ◆ General Health Assessment

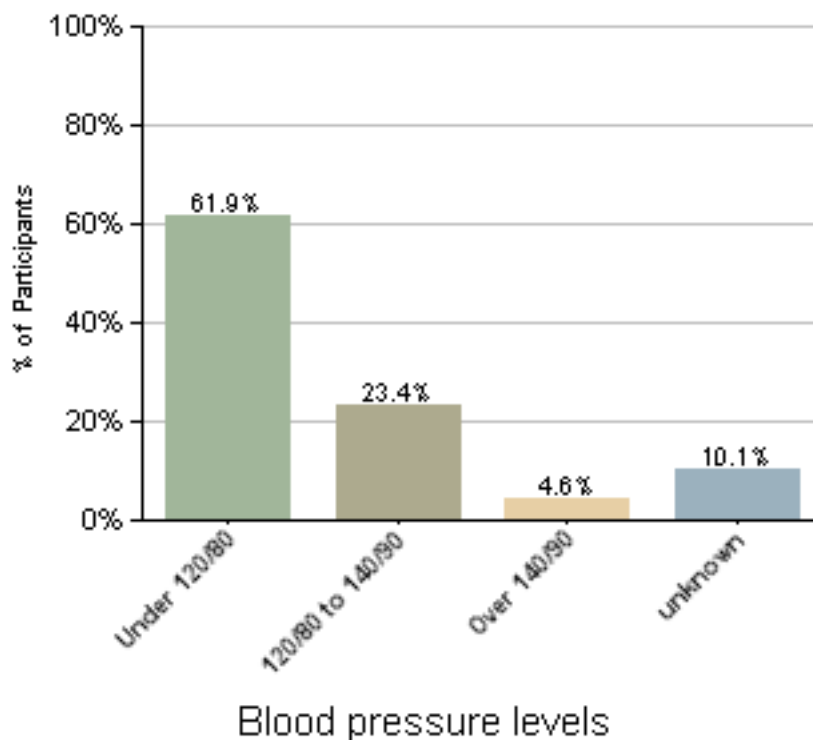
Blood Pressure

Group Blood Pressure

High blood pressure is known as the silent killer and remains a major risk factor for CHD, stroke, and heart failure. About 72 million adults in the United States have high blood pressure. From 1994 to 2004 the death rate from high blood pressure increased 15.5 percent and the actual number of deaths rose 41.8 percent. High blood pressure also is more common in older persons.

Both the systolic and diastolic readings must be below 120/80 for the user to achieve a normal or low ranking. If either the systolic or diastolic parts of the blood pressure exceed 139/89 the person is considered to have high blood pressure. When both the systolic and diastolic numbers fall between these ranges it is called prehypertension.

There are a high number of participants with blood pressure higher than recommended. Of these, 1440 are on medication to reduce their blood pressure. 461 individuals in this group have high blood pressure and are not taking medicine for it. Screening should be done for those in this group that do not know their blood pressure.



Goal:

Less than 16% of adults with high blood pressure.

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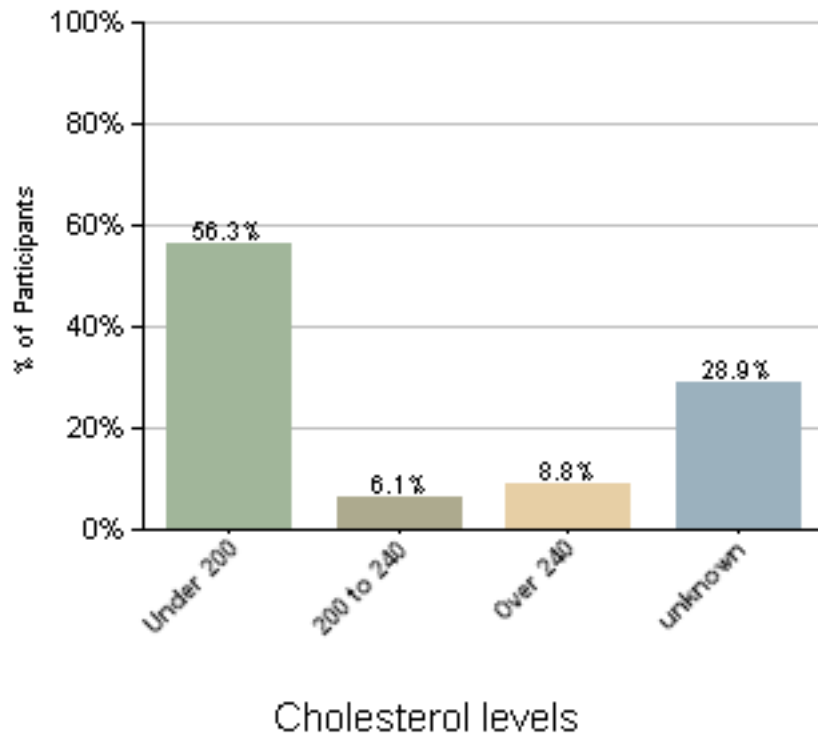
- ◆ Cardiac Risk Assessment
- ◆ Health Risk Assessment
- ◆ General Health Assessment

Cholesterol

Group Cholesterol

High blood cholesterol is a major risk factor for heart disease. About 17 percent of adult Americans aged 20 and older have high total cholesterol (240 mg/dl or above). In a survey conducted by the Centers for Disease Control 23 percent of the individuals reported they have never had their cholesterol checked.

Blood cholesterol levels less than 200 mg/dL are considered desirable. Levels of 240 mg/dL or above are considered high. Levels of 200-239 mg/dL are considered borderline. This group is below the US average for high cholesterol. Screening should be done for those in this group that do not know their cholesterol.



Goal:

Less than 17% of the population with high cholesterol.

Graph created using data within the specified criteria from:

- ◆ Cardiac Risk Assessment
- ◆ Health Risk Assessment
- ◆ General Health Assessment

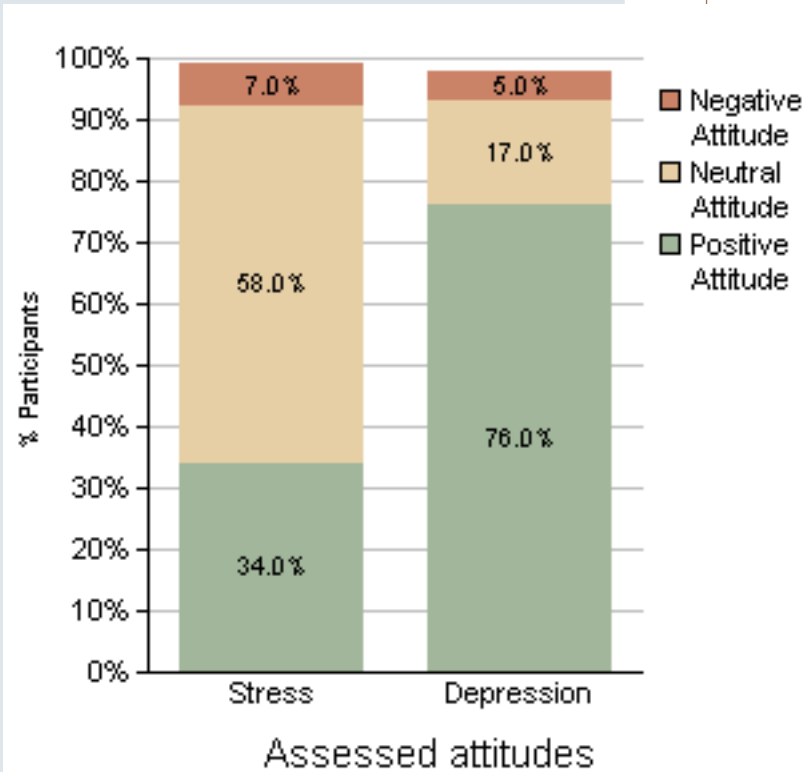
Depression Report

Stress and Depression Results

These are the results from your members that have answered questions regarding depression. This graph shows the level of stress and people with symptoms of depression within the group.

According to the National Institute of Mental Health, about 9.5 percent of the adult population suffers from clinical depression and more than 16 percent suffer from depression severe enough to warrant treatment.

The depression and stress score is based on answers to questions found in the General Well-being or General Health assessments. A cumulative score is generated for both categories and the range is measured against a standard scoring chart that determines a person's current attitudes toward stress and depression. Values may not add up to 100% due to rounding.



Graph created using data within the specified criteria from:

- ◆ General Health Assessment
- ◆ General Well-being Assessment

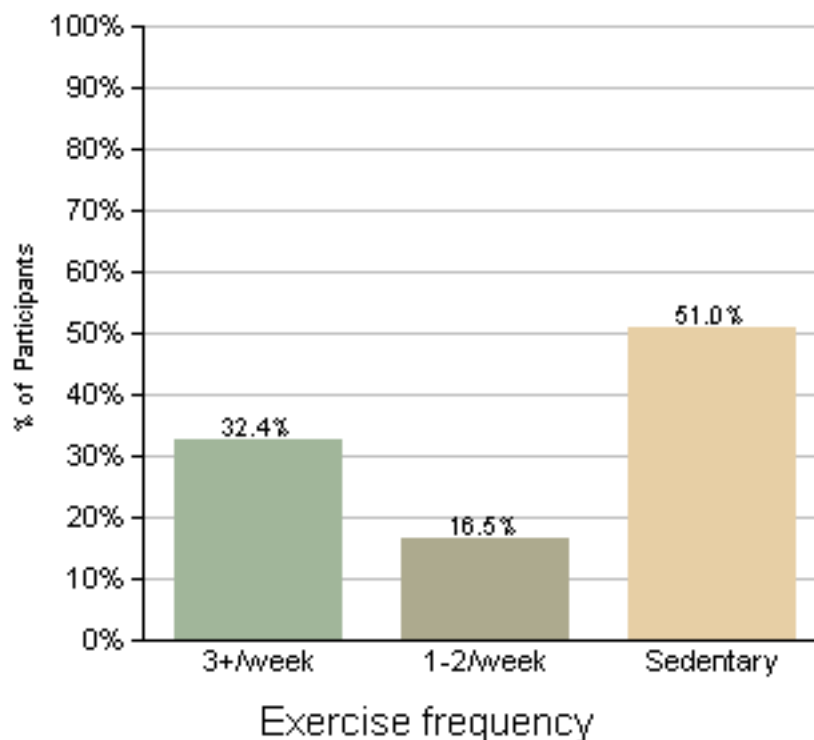
Exercise

Group Exercise Habits

Regular physical activity throughout life is important for maintaining a healthy body, enhancing psychological well-being, and preventing premature death. A Surgeon General's report on physical activity and health concluded that moderate physical activity can reduce substantially the risk of developing or dying from heart disease, diabetes, colon cancer, and high blood pressure.

The proportion of the population reporting no leisure-time physical activity is higher among women than men, higher among African Americans and Hispanics than whites, higher among older adults than younger adults, and higher among the less affluent than the more affluent. Participation in all types of physical activity declines strikingly as age or grade in school increases. In general, persons with lower levels of education and income are least active in their leisure time. Adults in North Central and Western States tend to be more active than those in the Northeastern and Southern States. People with disabilities and certain health conditions are less likely to engage in moderate or vigorous physical activity than are people without disabilities. Health promotion efforts need to identify barriers to physical activity faced by particular population groups and develop interventions that address these barriers.

37 percent of adults report they are not physically active and only 30 percent performed the recommended amount of physical activity.



Goal:

80% of the population getting regular exercise.

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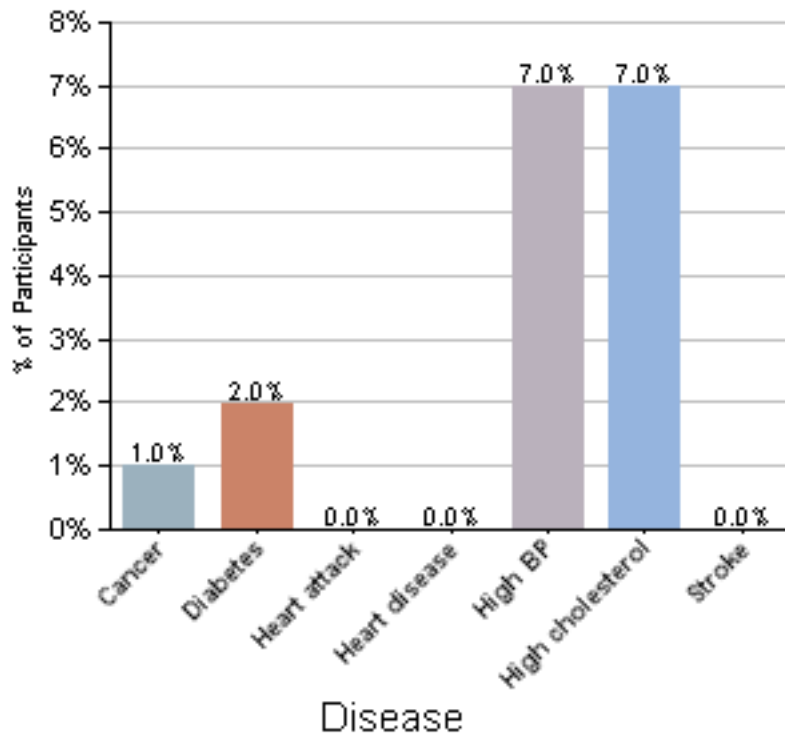
- ◆ Cardiac Risk Assessment
- ◆ General Health Assessment
- ◆ Health Risk Assessment



History - Personal

Personal Conditions

These are the results from your members that have answered questions regarding their own disease history. This graph shows the number of self reported personal conditions within the group.



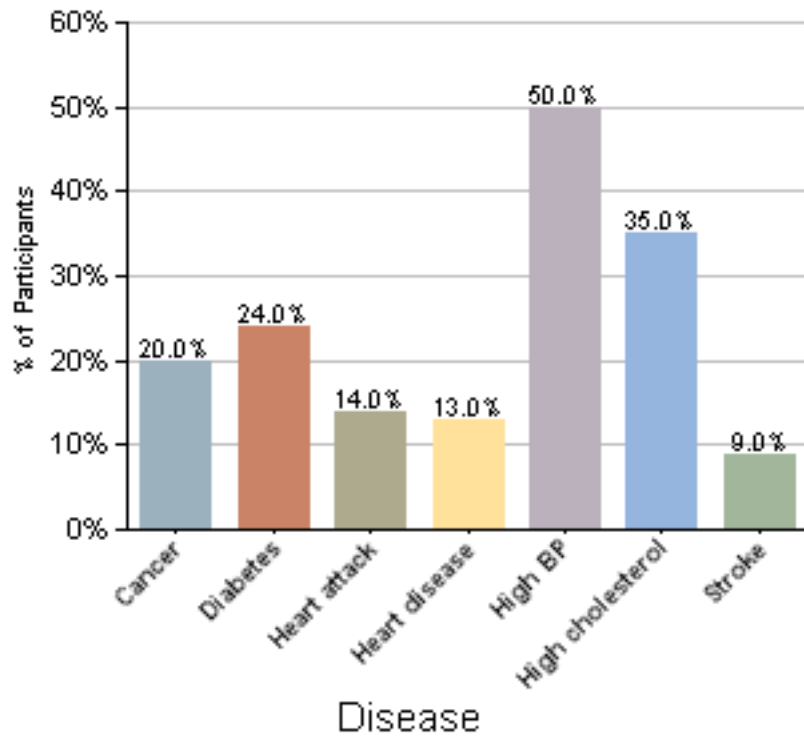
Graph created using data within the specified criteria from:

◆ General Health Assessment

History - Family

Family Conditions

These are the results from your members that have answered questions regarding their family disease history. This graph shows the number of self reported family history conditions within the group.



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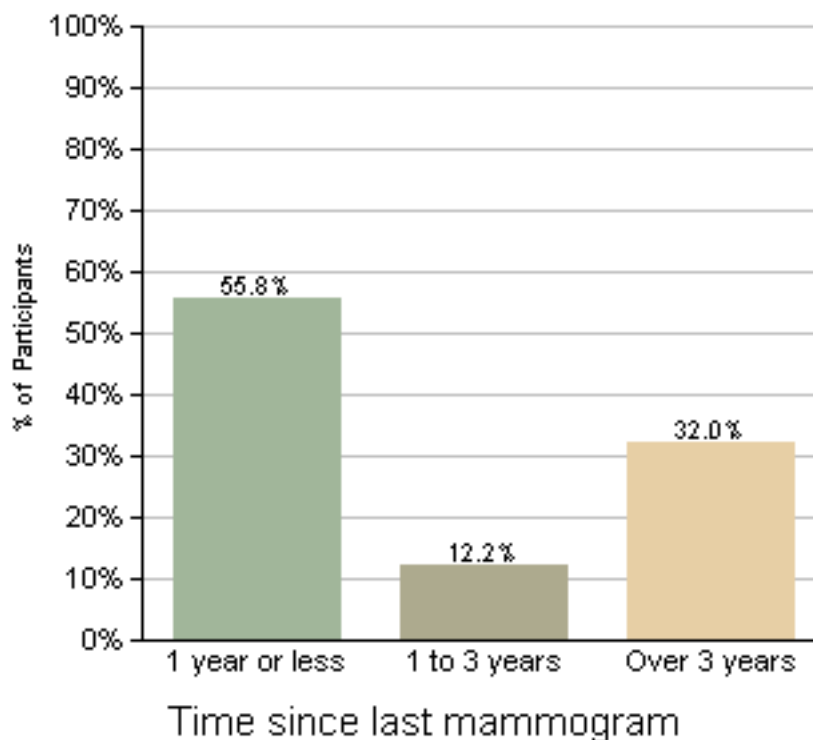
◆ General Health Assessment

Mammograms

Group Mammograms (females 40 and older)

Breast cancer is the most common cancer among women in the United States. An estimated 212,290 new cases were expected to be diagnosed in 2006. About 40,970 U.S. women were expected to die from breast cancer in 2006.

Death from breast cancer can be reduced substantially if the tumor is discovered at an early stage. Mammography is the most effective method for detecting these early malignancies. Clinical trials have demonstrated that mammography screening can reduce breast cancer deaths by 20 to 39 percent in women aged 50 to 74 years and about 17 percent in women aged 40 to 49 years. Breast cancer deaths can be reduced through increased adherence with recommendations for regular mammography screening. There are a high number of participants that have not had a screening recently.



Goal:

Screening of all women over 40 years of age.

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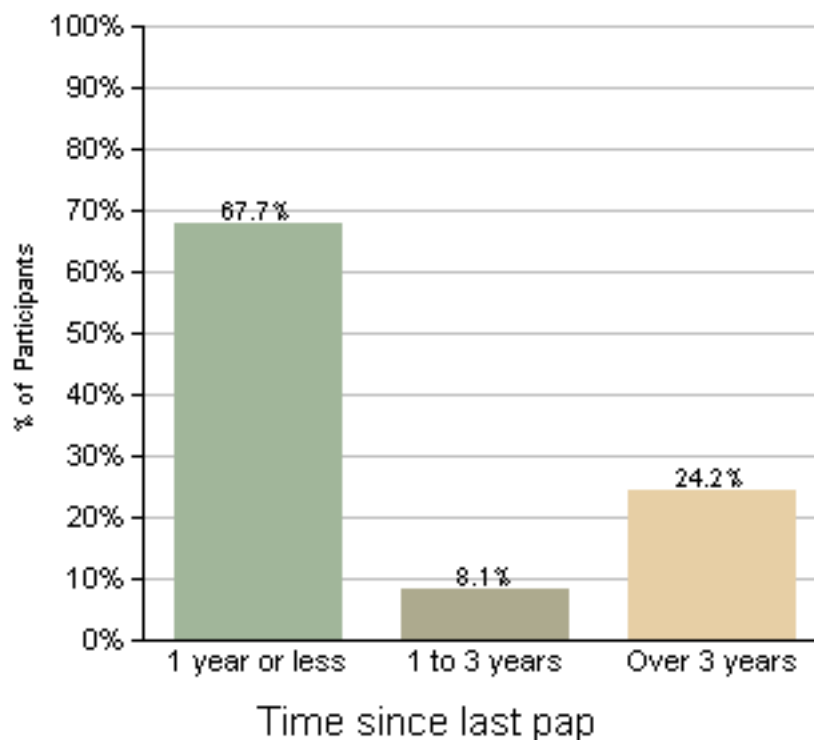
- ◆ General Health Assessment
- ◆ Health Risk Assessment

Pelvic Exams

Group Pap Examinations

Cervical cancer is the 10th most common cancer among females in the United States, with an estimated 12,800 new cases in 2000. The number of new cases of cervical cancer is higher among females from racial and ethnic groups than among white females. An estimated 4,600 U.S. females were expected to die from cervical cancer in 2000. Cervical cancer accounts for about 1.7 percent of cancer deaths among females. Infections of the cervix with certain types of sexually transmitted human papilloma virus increase risk of cervical cancer and may be responsible for most cervical cancer in the United States.

Considerable evidence suggests that screening can reduce the number of deaths from cervical cancer. Invasive cervical cancer is preceded in a large proportion of cases by precancerous changes in cervical tissue that can be identified with a Pap test. If cervical cancer is detected early, the likelihood of survival is almost 100 percent with appropriate treatment and followup; that is, almost all cervical cancer deaths could be avoided if all females complied with screening and followup recommendations. There are a high number of participants that have not had a screening recently.



Goal:

Annual Pap exams for women over 18 years old.

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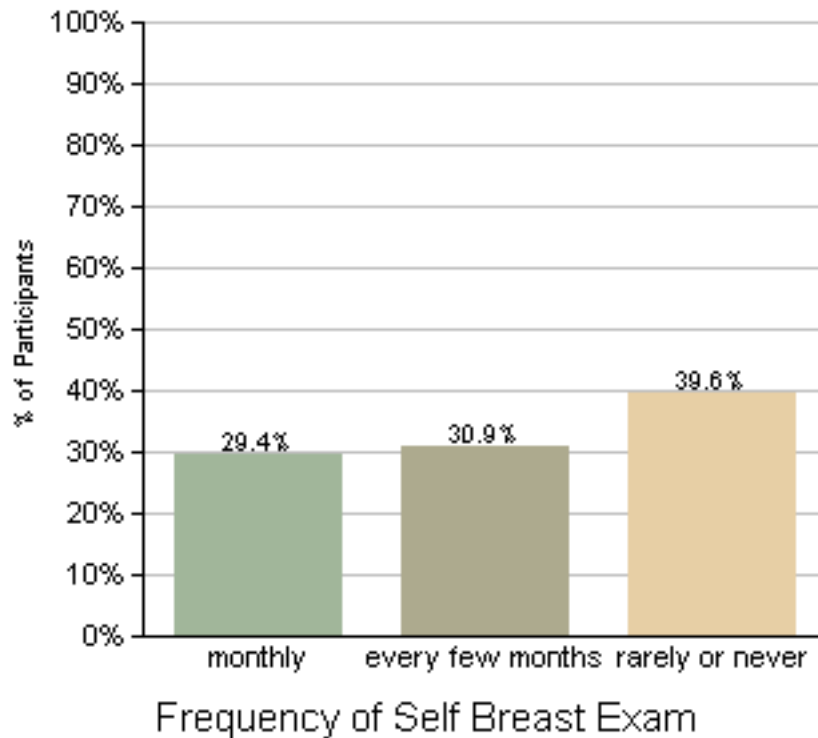
- ◆ General Health Assessment
- ◆ Health Risk Assessment

Self Breast Exam

Self Breast Exam Habits

The American Cancer Society recommends that women age 20 or older should perform a breast self-examination (BSE) every month. By doing the exam regularly, you get to know how your breasts normally feel and you can more readily detect any signs or symptoms.

Women who follow the above recommendations from the American Cancer Society have the best chance of early detection and the best prognosis should cancer be found. Breast cancer will affect one in eight women during their lifetime, this is up from one in twenty in the 1960's. There are a high number of participants that have not been performing self exams as often as they should.



Graph created using data within the specified criteria from:

- ◆ General Health Assessment
- ◆ Health Risk Assessment

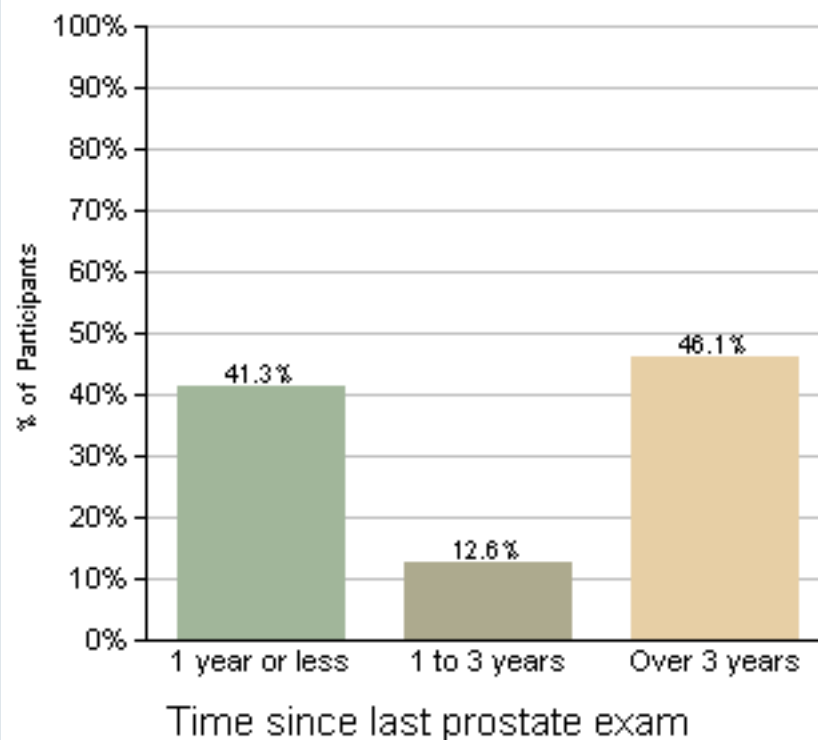
Male Prostate Exam

Group Prostate Exams (males 40 and older)

Both the prostate-specific antigen (PSA) blood test and digital rectal examination (DRE) should be offered annually, beginning at age 50, to men who have at least a 10-year life expectancy. Men at high risk (African-American men and men with a strong family of one or more first-degree relatives [father, brothers] diagnosed before age 65) should begin testing at age 45. Men at even higher risk, due to multiple first-degree relatives affected at an early age, could begin testing at age 40. Depending on the results of this initial test, no further testing might be needed until age 45.

Prostate cancer is the most common cancer among men, excluding skin cancer. Men have a one in six probability of developing prostate cancer in their lifetime.

Men who follow the above recommendations from the American Cancer Society have the best chance of early detection and the best prognosis should cancer be found. There are a high number of participants that have not had a screening recently.



Graph created using data within the specified criteria from:

- ◆ General Health Assessment
- ◆ Health Risk Assessment

Seatbelts

Group Seatbelt Use

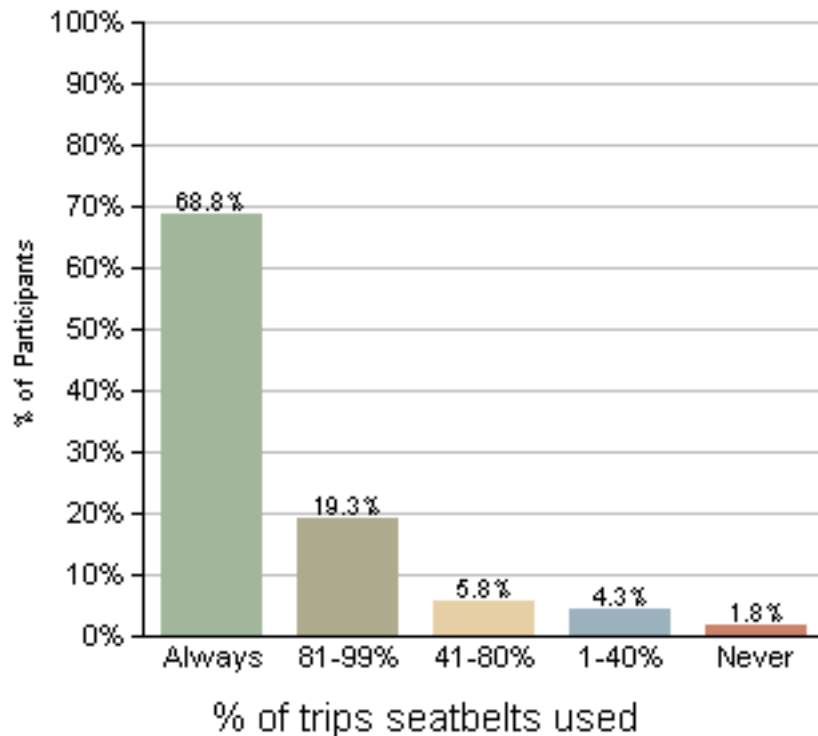
Motor vehicle crashes are often predictable and preventable. Increased use of safety belts and reductions in driving while impaired are two of the most effective means to reduce the risk of death and serious injury of occupants in motor vehicle crashes. As of March 2003, the national safety belt use rate was 75 percent.

When used properly, seatbelts reduce the risk of fatal injury to front seat vehicle occupants by 45 percent. In rollovers, seatbelts are 80 percent effective in preventing death in light trucks and 74 percent effective in cars.

Death rates associated with motor vehicle-traffic injuries are highest in the age group 15 to 24 years. In 1996, teenagers accounted for only 10 percent of the U.S. population but 15 percent of the deaths from motor vehicle crashes. Those aged 75 years and older had the second highest rate of motor vehicle-related deaths.

Nearly 40 percent of traffic fatalities in 1997 were alcohol related. Each year in the United States it is estimated that more than 120 million episodes of impaired driving occur among adults. In 1996, 21 percent of traffic fatalities of children aged 14 years and under involved alcohol; 60 percent of the time the driver of the car in which the child was a passenger was impaired.

This group of participants is doing very well in regards to seatbelt usage. Of this group, 5367 participants reported either drinking and driving or riding with someone who had too much to drink in the last month.



Graph created using data within the specified criteria from:

- ◆ General Health Assessment
- ◆ Health Risk Assessment

Smoking

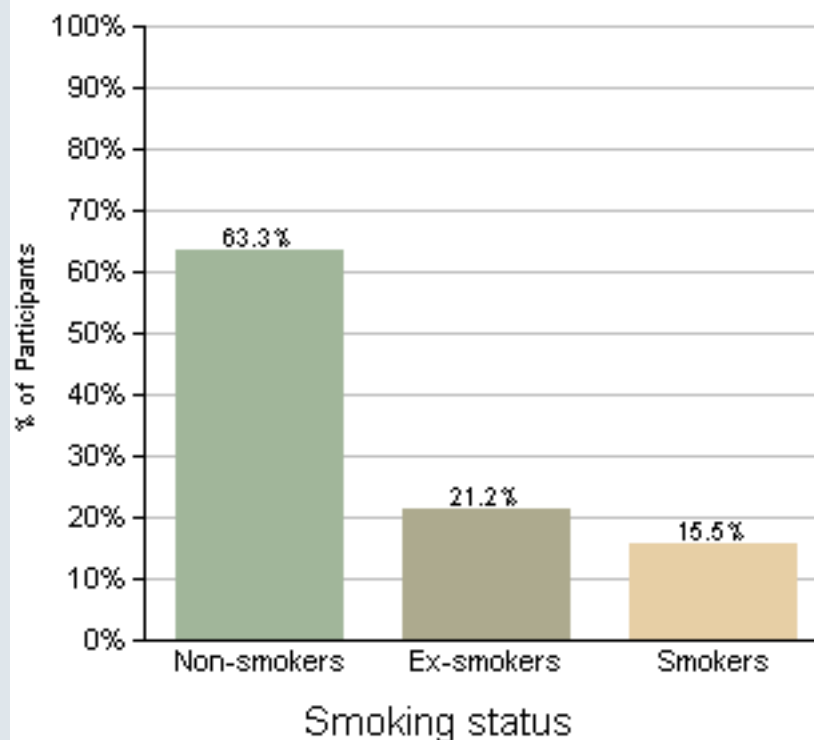
Group Smoking Habits

Cigarette smoking is the single most preventable cause of disease and death in the United States. Smoking results in more deaths each year in the United States than AIDS, alcohol, cocaine, heroin, homicide, suicide, motor vehicle crashes, and fires combined.

More people die from lung cancer than any other type of cancer, in 2003 it accounted for more deaths than breast cancer, prostate cancer and colon cancer combined.

Tobacco-related deaths number more than 430,000 per year among U.S. adults, representing more than 5 million years of potential life lost. Direct medical costs attributable to smoking total at least billion per year.

In 1999, 35 percent of adolescents were current cigarette smokers. In 1998, 24 percent of adults were current cigarette smokers. This group has smoking habits less than the national average of 24% smokers.



Goal:

Less than 12% of adults smoke.

Graph created using data within the specified criteria from:

- ◆ Cardiac Risk Assessment
- ◆ General Health Assessment
- ◆ Health Risk Assessment

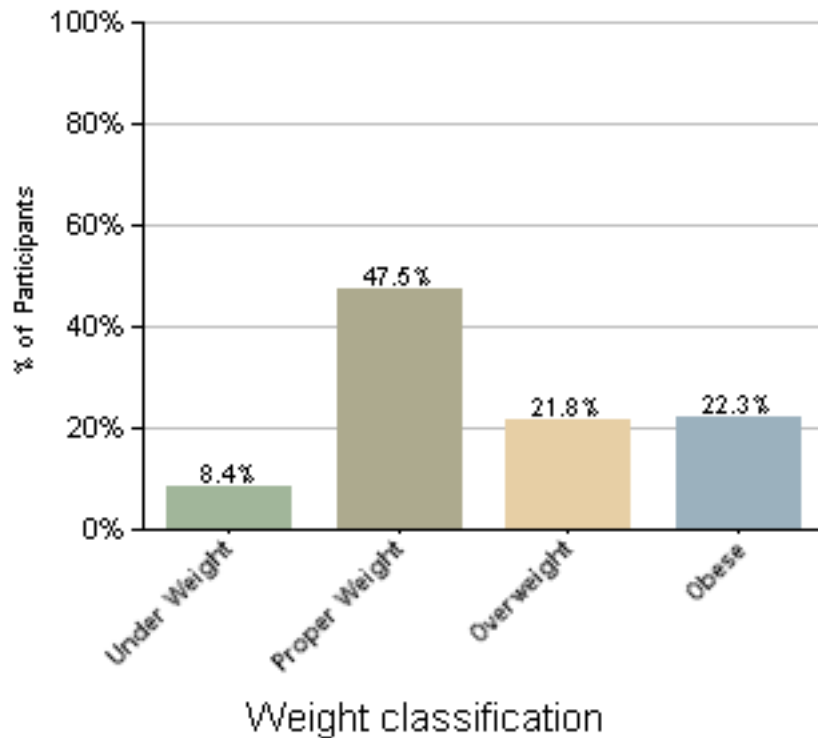
Weight

Group Weight

Overweight and obesity are major contributors to many preventable causes of death. On average, higher body weights are associated with higher death rates. The number of overweight children, adolescents, and adults has risen over the past four decades. Total costs (medical cost and lost productivity) attributable to obesity alone amounted to an estimated billion in 1995.

More than half of adults in the United States are estimated to be overweight or obese. The proportion of adolescents from poor households who are overweight or obese is twice that of adolescents from middle- and high-income households. Obesity is especially prevalent among women with lower incomes and is more common among African American and Mexican American women than among white women. Among African Americans, the proportion of women who are obese is 80 percent higher than the proportion of men who are obese. This gender difference also is seen among Mexican American women and men, but the percentage of white, non-Hispanic women and men who are obese is about the same.

During 1999-2002, 65 percent of adults aged 20 years and older were considered overweight or obese. There is a large percentage of participants above their healthy weight.



Goal:

Increase the proportion of adults who are at a healthy weight to 60%.

Graph created using data from:

- ◆ Cardiac Risk Assessment
- ◆ Diabetes Risk Assessment
- ◆ Fitness Assessment
- ◆ General Health Assessment
- ◆ Health Risk Assessment