Does your benefits strategy account for these top health trends?

Employee health and wellness is critical to workplace productivity and satisfaction. Yet rates of stress, burnout, and chronic disease are rising. To support your workforce and ensure all employees are empowered to achieve their best health, consider these top health trends as you build your benefits strategy.

1

Chronic disease management

The facts are clear. Chronic disease is the top driver of employer healthcare costs.

$1.1T in healthcare costs can be attributed to chronic disease[1]

$2.6T in productivity is lost annually[1]

12% of at-risk employees will develop a chronic condition within the next year[2]

Psychology-driven solutions create meaningful, lasting change.

Noom is leading the charge on behavior change by combining psychology with clinical expertise to address the root causes of unhealthy behaviors and improve employee outcomes.

64% of Noom Diabetes Prevention Program users prevented or delayed the onset of diabetes[3]

↓0.28% reduction in HbA1c levels among users who completed the program[4]

Noom generated potential healthcare cost savings of **$1,219** per user after 2 years[5]

2

AI tools for health

With AI on the rise, healthcare is seeing new possibilities emerge.

55%

of Americans say they regularly use AI[6]

The global AI in healthcare market is expected to reach

$45.2B

by 2026[7]

AI-driven tools boost engagement for better health.

Noom's AI features empower employees to more easily track and manage their health through tools like simplified food logging and virtual body scan.

25%

average employee adoption rate of Noom[8]

Noom Body Scan offers high precision, delivering reliable metrics to help employees address risks associated with chronic conditions like obesity and diabetes[9]

3

Weight management & GLP-1 coverage

The workforce's awareness and desire for GLP-1s has created significant demand for employers to balance effective healthcare strategies with fiscal responsibility.

30%

of working adults have obesity[10]

81%

of HR decision-makers say their employees would be interested in GLP1-1 coverage[11]

44%

of people with obesity would change jobs to gain coverage for obesity treatment[12]

Behavior change support enhances weight loss success.

Noom Med combines clinical expertise with behavior change support to optimize GLP-1 use and outcomes while protecting ROI.

are expected to start with an alternative to GLP-1s[13]

↑ **1.4x**

more weight loss reported when pairing Noom with an early GLP-1 vs. a GLP-1 alone[14]

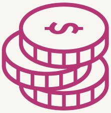
4.1x

projected ROI in healthcare and cost savings over 3 years[15]

4

Health equity and inclusivity

Traditional wellness programs often fail to account for systemic inequities within the workforce.



↓ **$42B**

is lost in lost productivity due to health inequity[16]

↓ **$320B**

is lost in excess cost from spending related to health inequities[17]

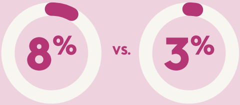
Personalized digital health programs break down barriers.

Noom supports your workforce’s unique health and well-being needs and enables them to engage with their health from anywhere, driving better outcomes and cost savings.

5%

2.6 million participants engaging with Noom’s digital weight program have lost >5% of their initial body weight[18]

BODY WEIGHT LOST



Participants who logged meals at least five times per week lost 8% of their body weight on average, compared to just 3% for less frequent logging[19]

Noom’s digital content considers different **social**, **cultural**, and **lifestyle** barriers and helps employees incorporate healthy behaviors that work for their unique circumstances.

5

Mental and emotional well-being support

Rising mental health challenges are putting a growing strain on employee wellness and productivity.

↑ 300%

Employee leaves of absence for mental health issues are up a staggering 300% from 2017 to 2023[20]

Over 1/3 of U.S. employees experience symptoms related to depression or anxiety on any given day[21]

Integrated mental well-being resources enhance whole-person health.

Noom fosters continuous mental well-being in every one of our cardiometabolic programs, providing employees with access to real-time support to navigate challenges with resilience. Noom users saw:[22]

↑ 42%

improvement in anxious feelings after 16 weeks and maintained through 32 weeks

↑ 36%

improvement in depressive feelings after 16 weeks and maintained through 32 weeks

↑ 24%

improvement in perceived stress after 16 weeks and maintained through 32 weeks

↓ 48%

decrease in days missed at work after 16 weeks

$4 FOR EVERY $1

Employers that support mental health see a return of $4 for every $1 invested in mental health treatment[23]

The bottom line

One size won’t fit all when it comes to building an effective benefits strategy – it needs to meet the unique needs of employees to drive utilization, outcomes, and cost savings.

Noom Health’s enterprise solutions offer a comprehensive, holistic approach that empowers employees to take control of their health, wherever they are on their health journey – reducing long-term health risks and promoting sustainable outcomes.

Ready to enhance your benefits offering? Learn how Noom Health can help your workforce thrive.

ENDNOTES

[1] https://business.kaiserpermanente.org/california/care-value/managing-costs/chronic-conditions.

[2] https://www.noom.com/health/resources/blog/four-important-trends-you-need-to-know-about-employee-h ealth/.

[3] Internal analysis that was submitted to the CDC for routine program reporting.

[4] https://pubmed.ncbi.nlm.nih.gov/32459631/.

[5] https://mhealth.jmir.org/2023/1/e47473/.

[6] https://www.nu.edu/blog/ai-statistics-trends/.

[7] https://www.forbes.com/councils/forbestechcouncil/2021/04/28/the-current-state-of-the-healthcare-ai-revo lution/.

[8] Noom internal data.

[9] Tinsley et al., “Smartphone Three-Dimensional Imaging for Body Composition Assessment Using Non-Rigid Avatar Reconstruction.”

[10] https://www.globaldata.com/health-economics/US/Employers/Overweight-Obesity-Impact-on-Employers.pdf.

[11] https://ir.accolade.com/news-releases/news-release-details/glp-1-coverage-employer-plans-could-nearly -double-2024.

[12] https://www.fiercehealthcare.com/digital-health/employers-grapple-soaring-demand-obesity-care-benefits.

[13] Third-party validated actuarial analysis, October 2024. This projection is based on a comparison to a status quo scenario where GLP-1 medication spending is uncontrolled. ROI may vary based on factors such as company size, employee health profiles, and current healthcare costs.

[14] Based on a retrospective study of self-reported data of pounds lost for active versus passive users who were offered the Noom program when being prescribed an early stage GLP-1.

[15] Third-party validated actuarial analysis, October 2024. This projection is based on a comparison to a status quo scenario where GLP-1 medication spending is uncontrolled. ROI may vary based on factors such as company size, employee health profiles, and current healthcare costs.

[16] https://www2.deloitte.com/us/en/insights/industry/health-care/economic-cost-of-health-disparities.html.

[17] https://www2.deloitte.com/us/en/insights/industry/health-care/economic-cost-of-health-disparities.html.

[18] Heather Behr et al., “Changes in Health-Promoting Behaviors and Their Association With Weight Loss, Retention, and Engagement on a Digital Program: Prospective Study,” Nutrients 14, no. 22 (November 14, 2022): 4812, https://doi.org/10.3390/nu14224812. Internal retrospective analysis of all-time weight loss data.

[19] Alissa Carey et al., “The Relationship Between Weight Loss Outcomes and Engagement in a Mobile Behavioral Change Intervention: Retrospective Analysis,” JMIR Mhealth and Uhealth 9, no. 11 (September 19, 2021): e30622, https://doi.org/10.2196/30622.

[20] https://www.shrm.org/topics-tools/news/benefits-compensation/anxiety-top-mental-health-issue -workplace-compsych.

[21] https://executive.berkeley.edu/thought-leadership/blog/impacts-poor-mental-health-business.

[22] Based on an internal one-arm prospective study (with no control group) of 273 participants from May 2023. Participants used Noom Mood for 16 weeks, followed by a 16-week follow-up period with no Noom Mood use. Absenteeism is the self-reported number of days participants missed work (were absent). https://pubmed.ncbi.nlm.nih.gov/38935946/.

[23] https://www.nsc.org/newsroom/new-mental-health-cost-calculator-demonstrates-why.