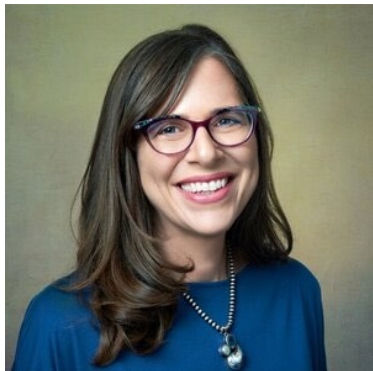


# The ROI of Food as Medicine: In the Workplace and Beyond



**Diet ID™**  
DIET IS A VITAL SIGN

Food Truths Webinar • Hosted by Diet ID • July 7, 2021



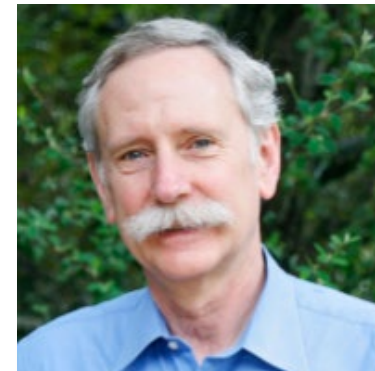
**Sari Kalin, MS, RD, LDN**

*Assistant Director, AVP of  
Health and Well-Being Strategy,  
Liberty Mutual Insurance*



**SARA MARTIN**

*CEO  
WELCOA*



**WALTER WILLETT, MD, DrPH**

*Professor of Epidemiology and  
Nutrition, Harvard T.H. Chan  
School of Public Health*



**TIM O'NEIL, MBA**

*Executive Director,  
Employee Experience  
Meredith Corporation*



# **The research-based evidence around the effect of diet on health outcomes**

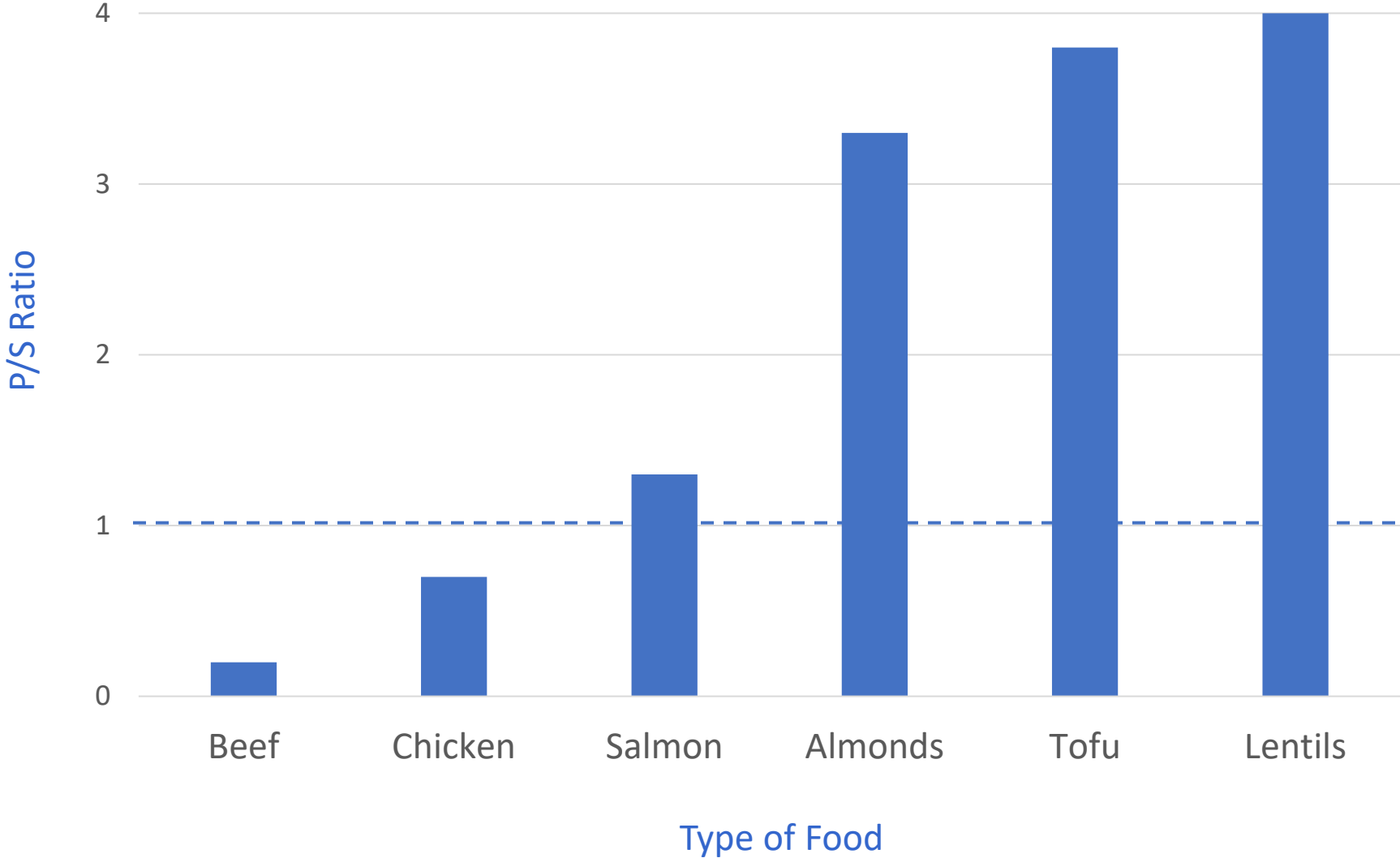
*Walter C. Willett, MD, DrPH*

*Department of Nutrition*

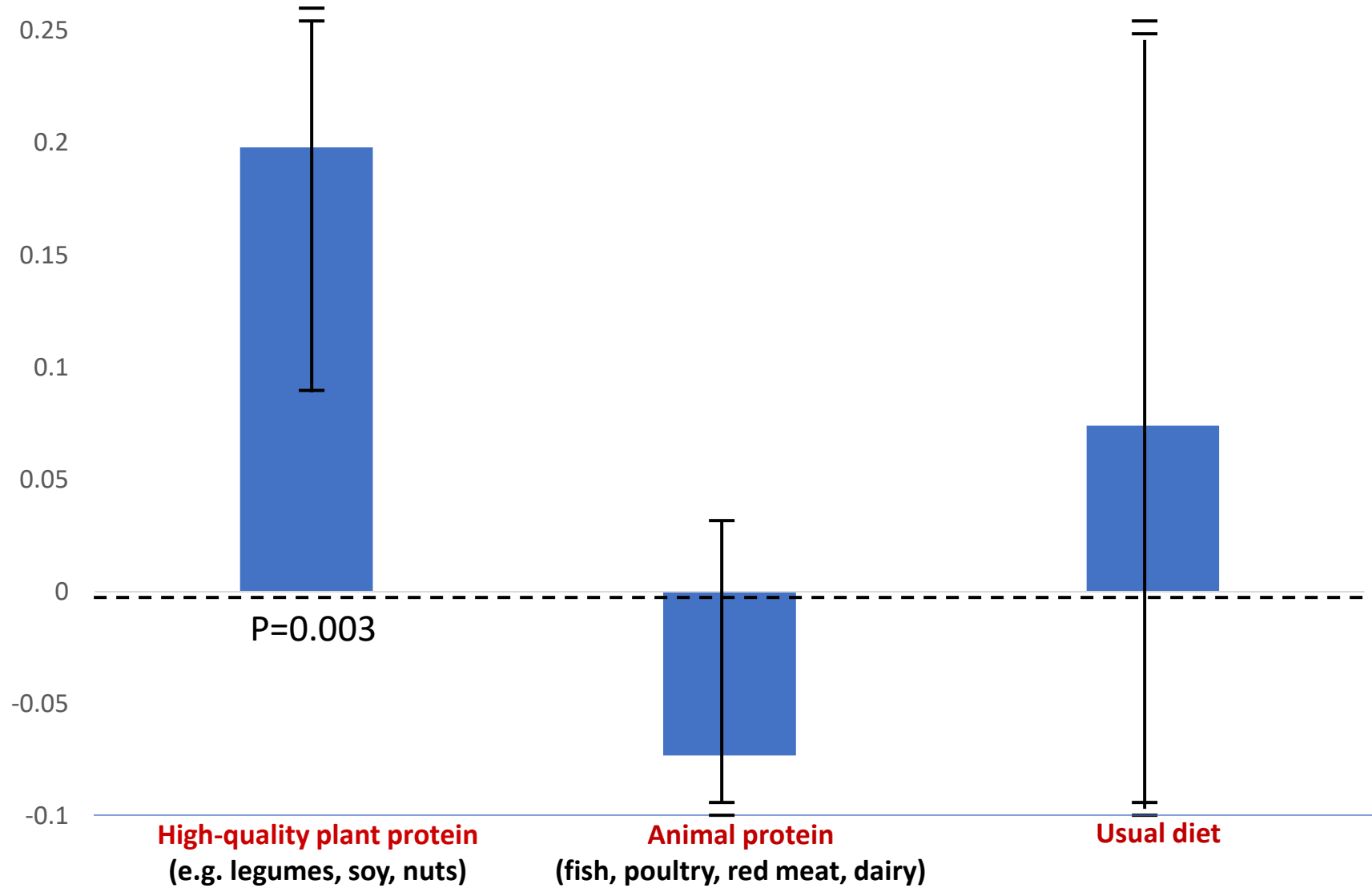
*Harvard T. H. Chan School of Public Health*

July 7, 2021

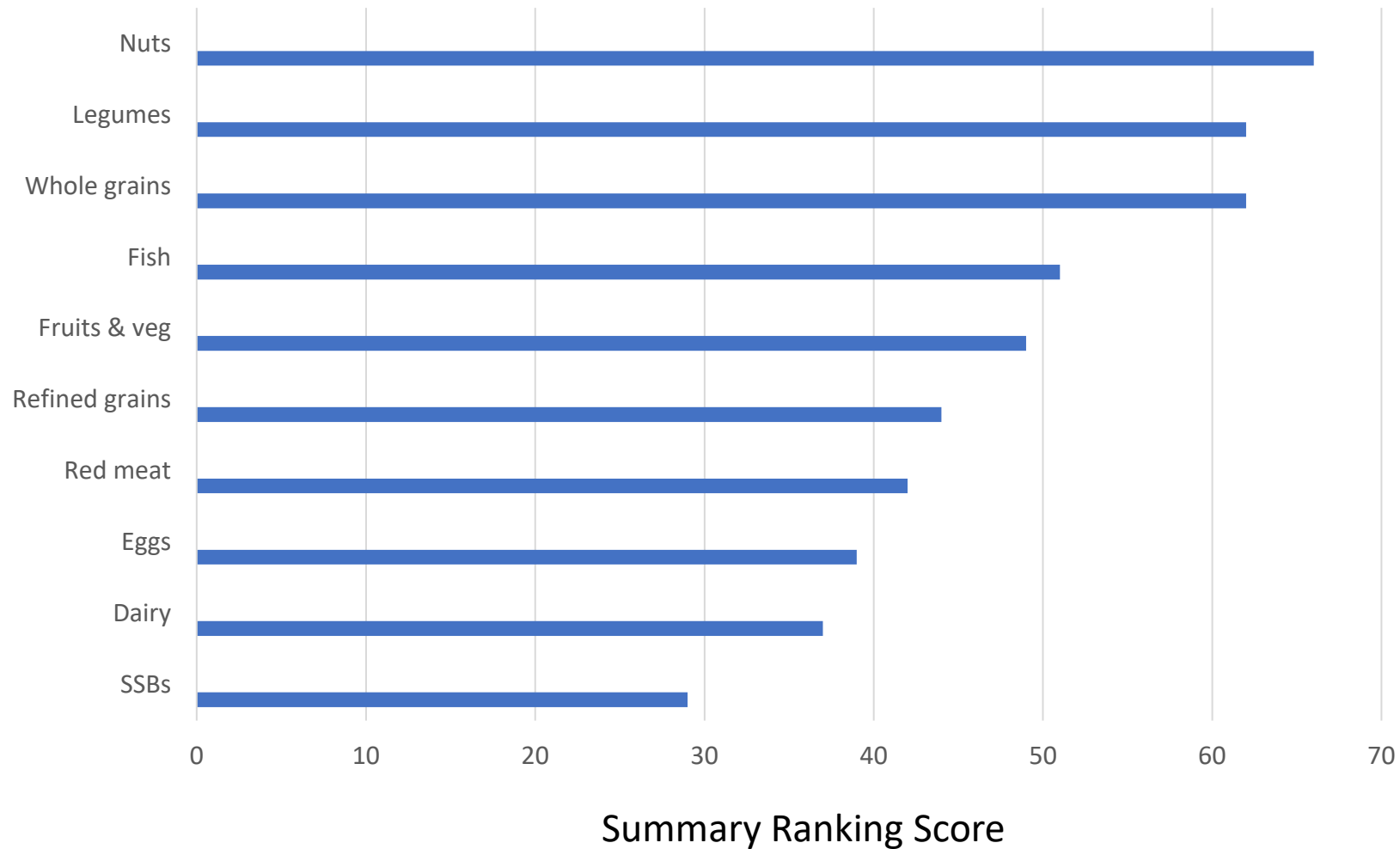
# Ratio of Polyunsaturated Fat to Saturated Fat (P/S Ratio) for Major Protein Sources



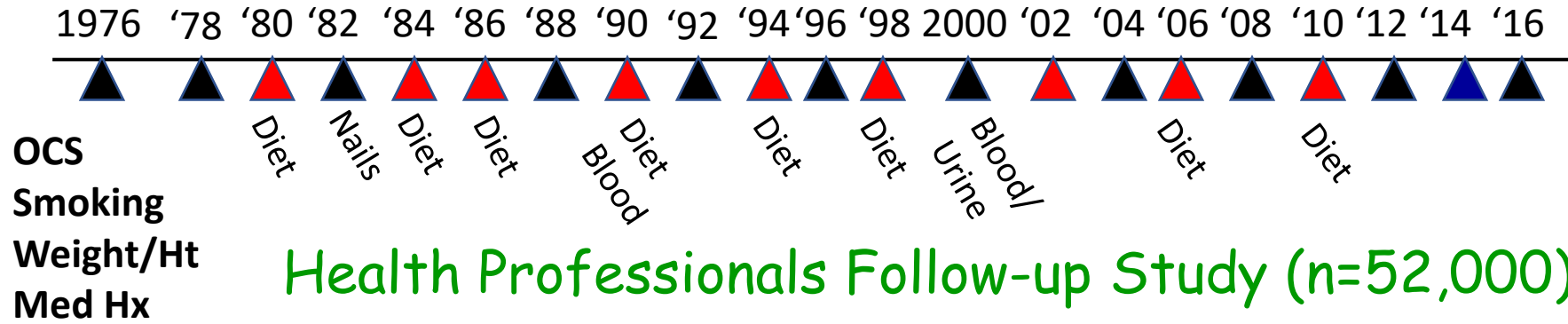
**Meta-analysis assessing the effects of red meat on LDL cholesterol (mmol/L)  
from RCTs by type of comparison diet**  
*(Guasch-Ferre M et al. Circulation 2019)*



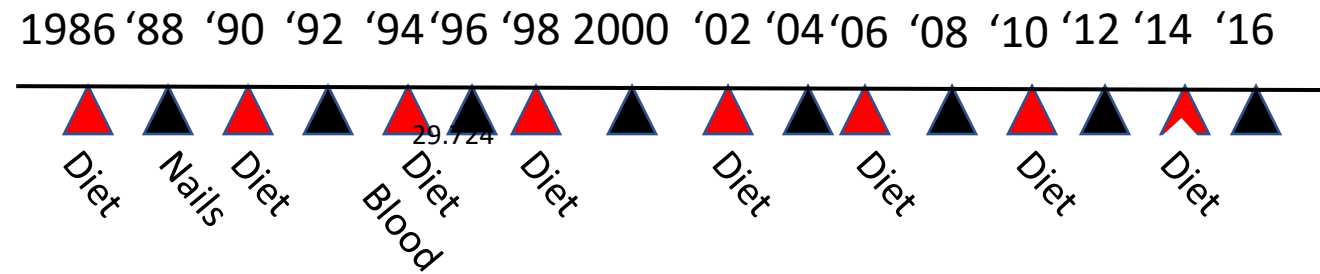
# Network meta-analysis of 66 randomized trials of food group effects on risk factors for cardiometabolic disease (LDL-C, TG, TC, HDL-C, FG, HbA1c, HOMA-IR, SBP, DBP, CRP)



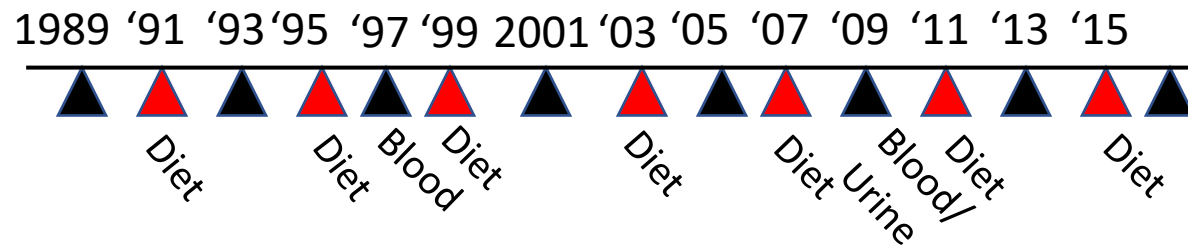
## Nurses' Health Study (n=121,700)



## Health Professionals Follow-up Study (n=52,000)



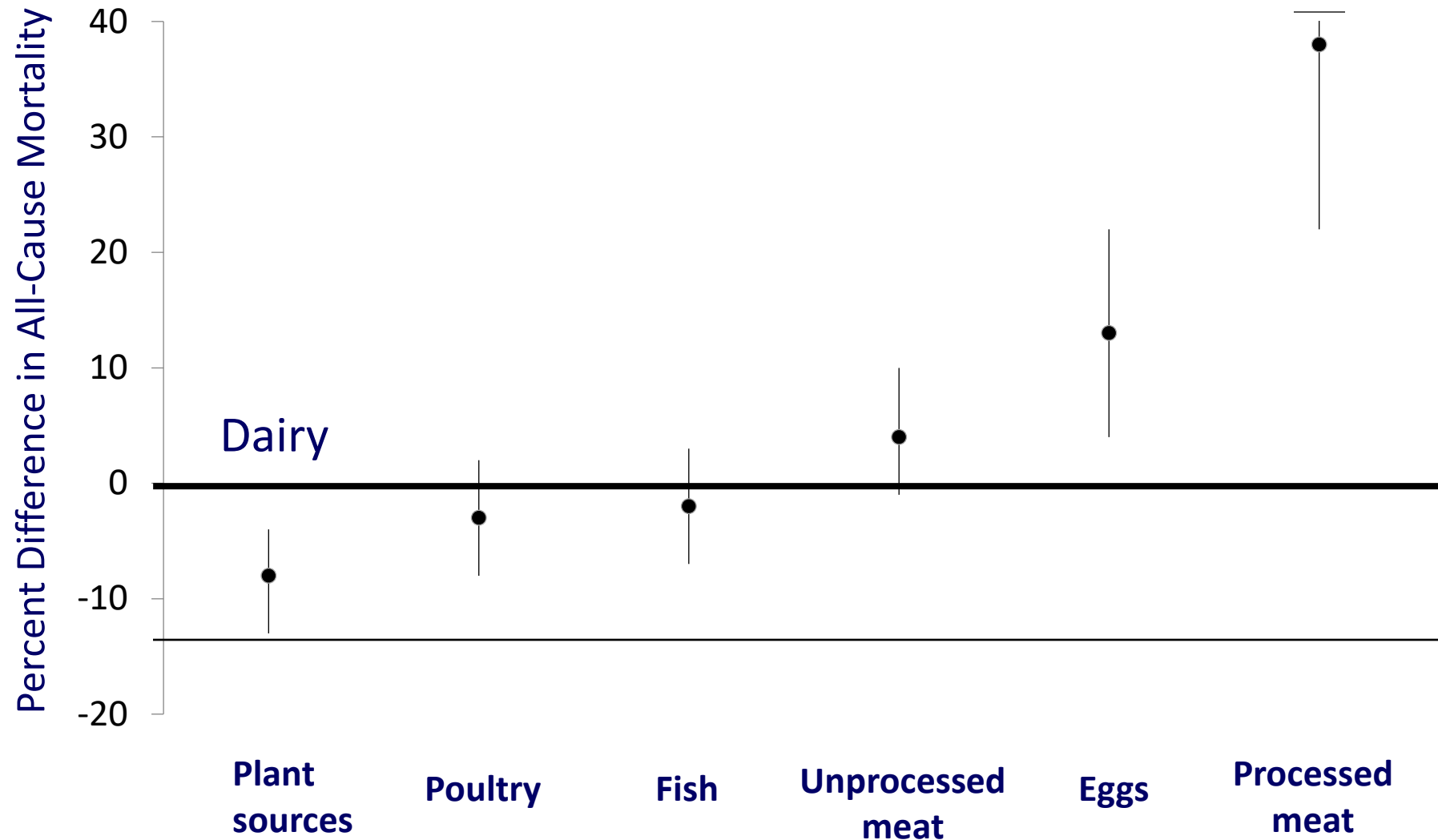
## Nurses' Health Study II (n=116,000)



**Investigators:** Frank Speizer, Bernie Rosner, Meir Stampfer, David Hunter, JoAnn Manson, Eric Rimm, Edward Giovannucci, Alberto Ascherio, Gary Curhan, Michelle Holmes, Frank Hu, Heather Eliassen, Lorelei Mucci, Jae Hee Kang, Jorge Chavarro, Molin Wang, Kana Wu, Andrew Chan, Daniel Wang, Qi Sun

# Differences in all-cause mortality for major protein sources vs dairy (for 3% of energy from protein)

(recalculated from Song M et al. JAMA Intern Med 2016)



# Dose-Response Relationship of Animal, Healthy Plant, and Less Healthy Plant Foods with Coronary Heart Disease Incidence (N = 209,298)

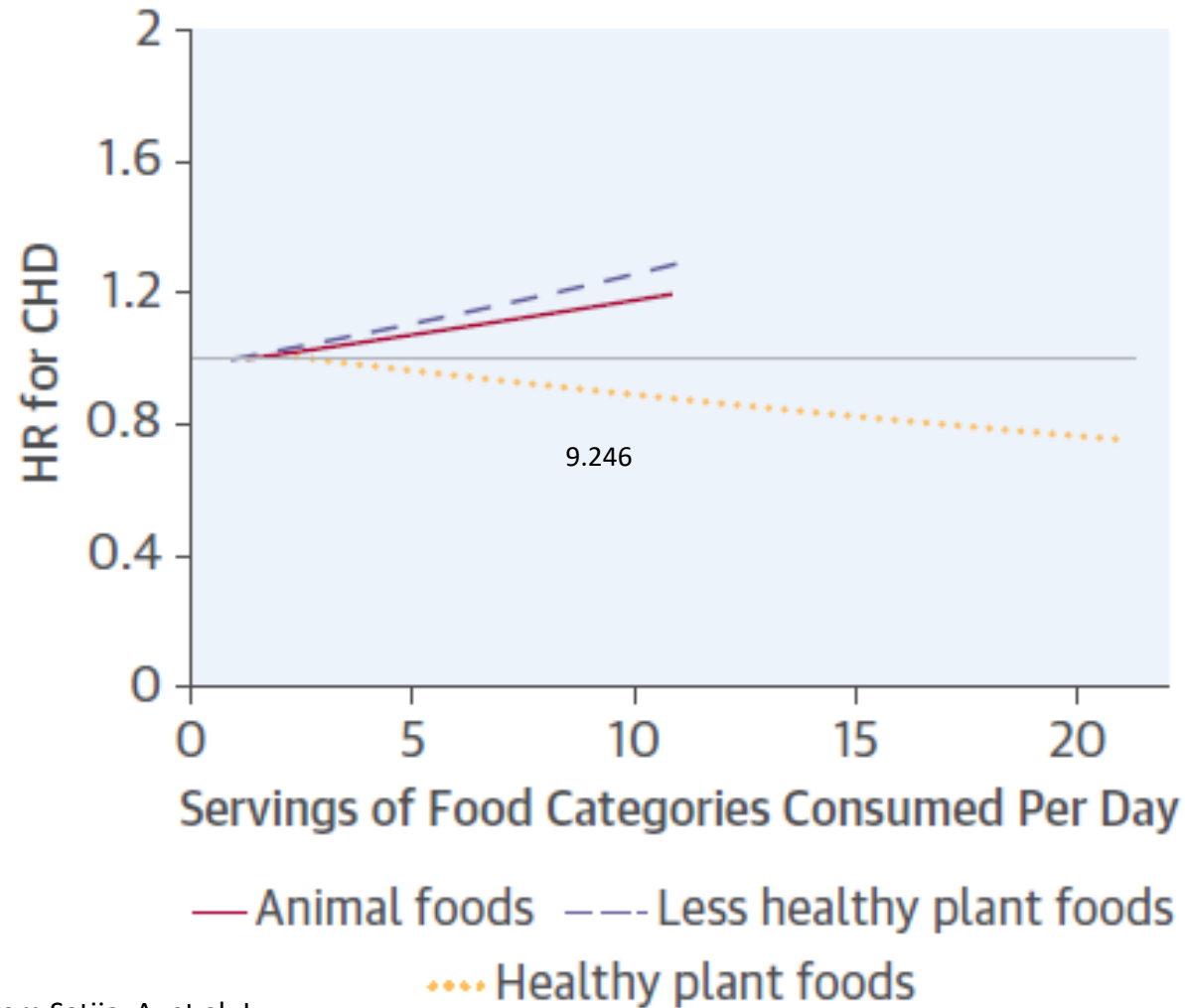
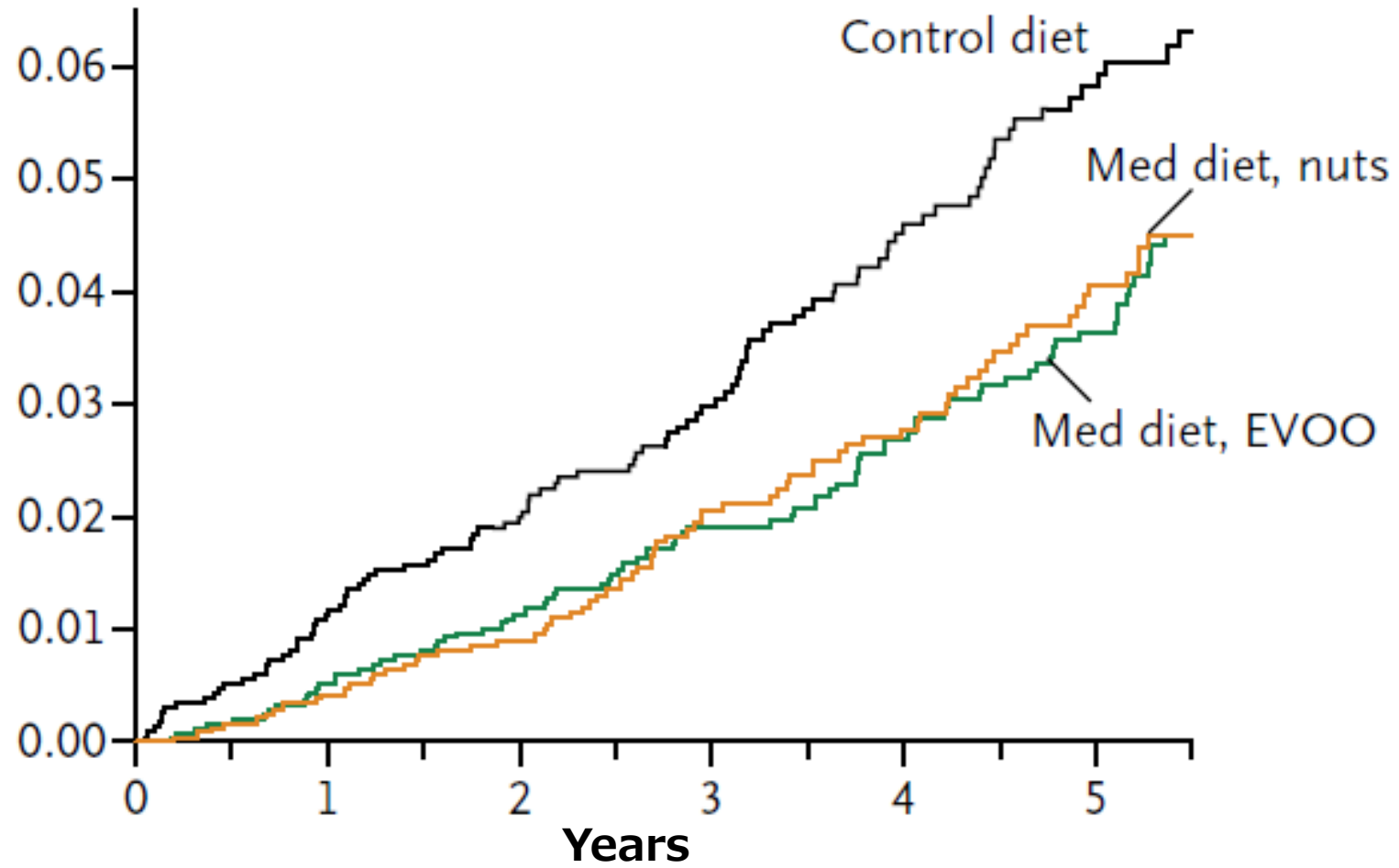


Figure Modified From Satija, A. et al. J Am Coll Cardiol. 2017;70(4):411-22.

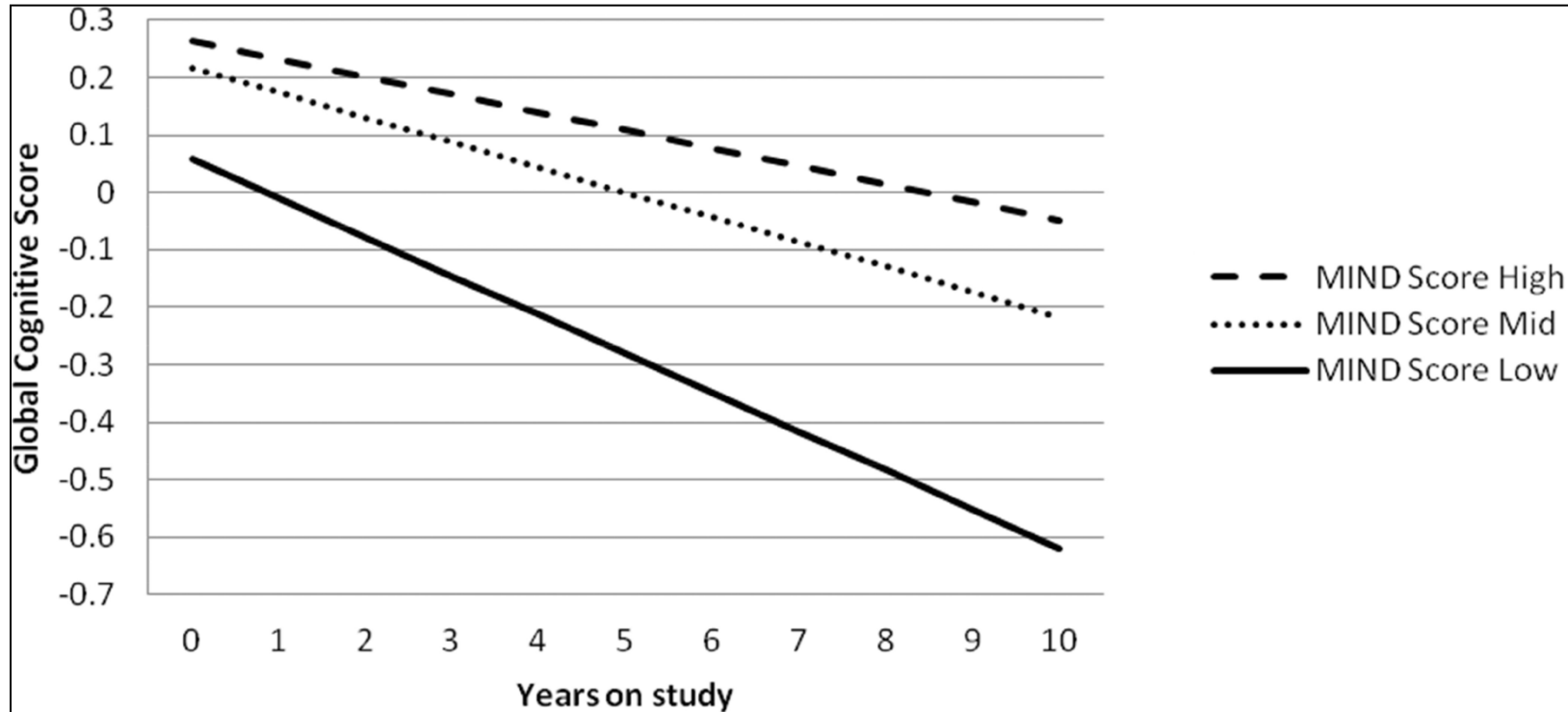


***Kaplan-Meier Estimates of the Incidence of Outcome Events in the Total Predimed Study Population***



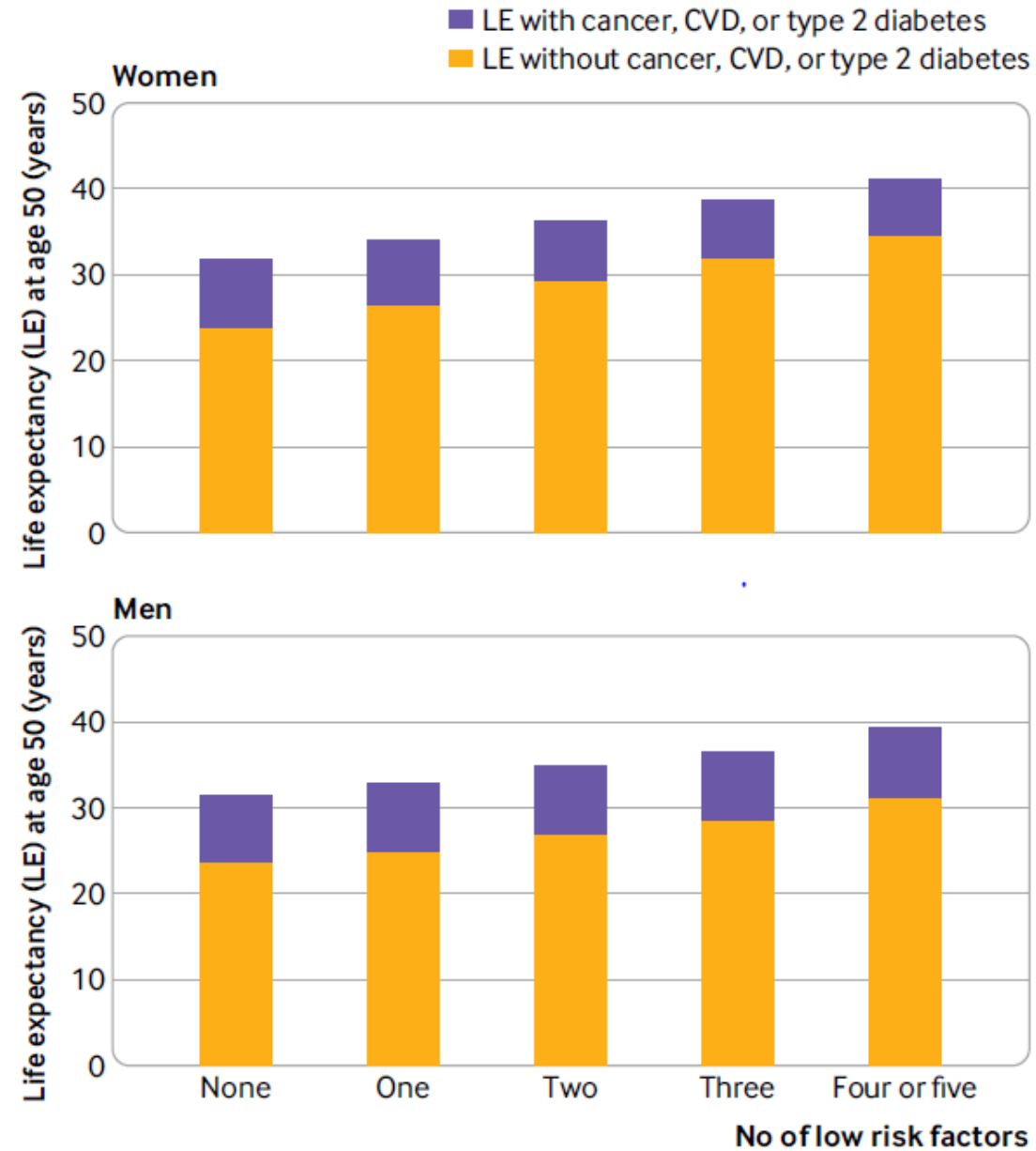
***(Estruch R et al. NEJM 2013)***

## Rates of change in global cognitive score for MIND Diet participants



*(Morris MC, Alzheimers Dement 2015)*

# Increase in Healthy Life Expectancy Without Five Risk Factors







# Meredith Wellness Strategy

- Program Overview and Incentives
- Success Metrics
- Results-Oriented Initiatives
- Importance of Healthy Eating
- Better Data = Better Outcomes



# Diet ID's ROI Calculator

Business Case for Using Diet ID							
<i>Modifiable variables</i>			<i>Outcomes</i>				
<b>Total Employer Population</b>	400		<b>Diet ID Only</b>			<b>Diet ID + Food Provider</b>	
Diet ID Cost Per PARTICIPANT Per Year - Prevalence	\$40		<b>Annual savings</b>	\$217,794		<b>Annual savings</b>	\$326,692
Diet ID Cost Per PARTICIPANT Per Year - Incidence	\$40		<b>Annual cost</b>	\$8,222		<b>Annual cost</b>	\$69,890
Cost of Food Provider Per Activated Person Per Year	\$300		<b>Cost per eligible person per year</b>	\$21		<b>Cost per eligible person per year</b>	\$175
			<b>Years to achieve ROI</b>	0.04		<b>Years to achieve ROI</b>	0.21
DISEASE Population Activation Rate	50%	< typically between 10%-60%					
NON-DISEASE Population Activation Rate	50%	< typically between 10%-60%					
<b>Improvement in Diet Quality</b>							
DISEASE population improvement in diet quality - Diet ID alone	2	between 0-5. Indicates how many tiers average population WITH chronic disease will improve when using Diet ID					
NON-DISEASE population improvement in diet quality Diet Quality Alone	2	between 0-5. Indicates how many tiers average population WITHOUT chronic disease will improve when using Diet ID					

# Q & A

**Please use the QA  
feature in Zoom**