

Navigating the Multi-Chronic Population Crisis

AN EMPLOYER'S GUIDE





Employees, young and old, are facing more and more chronic conditions, impacting their livelihoods, productivity, and ultimately, employers' costs. While single-condition programs are part of a strong benefit package to support employees, a growing multi-chronic population introduces the need to reevaluate condition management strategies. This guide will help employers navigate and proactively address the complexities of this changing landscape using innovative, forward-looking, cross-condition solutions.

TABLE OF CONTENTS

CHAPTER 1

3 The Multi-Chronic Population by the Numbers

CHAPTER 2

5 Limitations of Single-Condition Management Programs in an MCC Landscape

CHAPTER 3

8 The Case for Cross-Condition Care to Support a Multi-Chronic Population

CHAPTER 4

10 Why Cross-Condition Programs Work

CHAPTER 5

11 Looking Toward Whole-Person Solutions

CHAPTER 6

12 The Path Forward for Employers



CHAPTER 1 The Multi-Chronic Population by the Numbers

America's workforce is facing a critical health shift. More than half of adults aged 35–64 in the U.S. (representing 130 million) now report having two or more chronic conditions, a statistic that has steadily increased over the past two decades.¹

Among young adults, the prevalence of multiple chronic conditions (MCC) increased from 21.8% in 2013 to 27.1% in 2023, highlighting growing cross-generational health challenges. With an aging population, multimorbidity—having two or more conditions—is also on the rise with older Americans. The number of older adults aged 50 and older with MCC is projected to increase 91.2% from 7.8 million in 2020 to nearly 15 million in 2050². Over 31% of employed workers aged 65-plus currently retain employer-provided insurance, a figure expected to grow as well³. These statistics may underreport actual numbers due to self-reporting limitations, condition scope, recall issues, and social desirability biases.



For employers, this escalating trend has sweeping implications that are impossible to ignore. Individuals of all ages with MCC are more likely to experience frequent health crises, requiring more and longer hospital visits, longer recovery periods and unnecessary medications, and higher use of emergency services.

The result? **Multi-chronic employees incur health care costs up to five times higher than those without chronic conditions.**⁴ Compound these costs with diminished productivity, absenteeism and presenteeism, and the burden grows disproportionately greater.

Employers are smart to anticipate population health trends to control rising health care costs and protect workforce performance. Understanding that health is more than individual conditions, addressing MCC as interconnected physical, emotional, social, and environmental factors can lead to meaningful, lasting improvements.







CHAPTER 2 Limitations of Single-Condition Management Programs in an MCC Landscape

Many condition management programs are designed to optimize outcomes with a focus on a single condition at a time. Programs tailored for diabetes, musculoskeletal conditions, hypertension, and others often produce meaningful results specific to each health issue. However, when offered to the growing population of multi-chronic individuals, they can miss the mark, with limited to no consideration for other conditions and health issues, producing negative, unintended, and costly outcomes.

Here's why it's difficult to see improvements in a multi-chronic population with a siloed approach:

Fragmented Care Leading to Poor Outcomes

When dealing with multiple health concerns, employees are forced to navigate a disjointed system of providers and solutions, each focusing narrowly on one condition, as they are designed. This can result in misaligned goals, conflicting advice, inappropriate prescribing, redundant treatments, and worsened health outcomes.

Example: An individual managing diabetes, perimenopause, migraines, and GI issues might face conflicting dietary advice and medications that worsen other conditions. Without integrated care or adequate primary support, this can put their health at risk and drive up costs with extra doctor visits, prolonged time to condition control, and complications.

Increased Risks from Polypharmacy

2

Multi-chronic individuals are often prescribed numerous medications from different providers and specialists, and may supplement their treatments with herbals and other over-the-counter drugs. With increased access to more single-condition programs with prescribing providers not focused on a complete picture of the patient's health history, risks multiply. Risks such as inappropriate medication selection due to other conditions and medical history, drugdrug interactions, unmonitored side effects resulting in additional treatments, and therapy duplications lead to poor health outcomes and financial waste for everyone.

3 Decision Overload and Employee Burnout

One in three adults has difficulty completing basic health-related tasks,⁵ and for people with multiple chronic conditions the burden of health information is multi-fold. Multiple vendors on top of multiple traditional providers, addressing multiple conditions, means employees receive recommendations and education from multiple sources, often with duplicative, confusing, or potentially conflicting recommendations. Traditional single-condition solution protocols, with digital-forward approaches, are designed for the average patient, resulting in program "failures" for people with complex health profiles. Instead of feeling supported, individuals feel discouraged, overwhelmed, and disengaged.

By addressing the needs of an increasingly complex multi-chronic workforce, employers can avoid risky inefficiencies and start to reduce costs and improve employee satisfaction and morale about their health.⁶



Single-Condition Focus:

System fragmentation within and across services affects and impacts treatment of care for conditions on everyday life.



Multiple-Condition Focus:

Coordination across health care services and understanding how a person's individual health conditions, treatments, and priorities interact improve quality of life.





CHAPTER 3 The Case for Cross-Condition Care to Support a Multi-Chronic Population

Addressing the needs of a multi-chronic population requires an integrated, whole-person approach that moves beyond isolated care. A cross-condition management strategy acknowledges the interrelatedness of health and the additive complexity of MCC, and creates tailored solutions that focus on the individual—not just their diagnoses—to achieve outcomes.

A Comprehensive, Whole-Person Approach

Effective care for MCC integrates clinical and non-clinical interventions to address the interconnected nature of all physical and mental health conditions, while considering the impact of social and environmental factors. By aligning medical treatment with lifestyle and self-management behavioral changes, successful programs produce measurable, sustainable improvements in health outcomes while reducing unnecessary health care expenses.

Pillars of a Cross-Condition Care Program

Medication management is more than prescribing: Effective medication management goes beyond prescription costs and adherence. Mismanagement leads to over \$500 billion in annual medical costs.⁷ The rise in over-the-counter and herbal drug use heightens risks for adults with chronic conditions. Reviewing a person's full health and medication history helps reduce unnecessary drugs, side effects, and health care use, while improving condition management and health outcomes.

Physical and emotional health are connected:

- Mindfulness, Stress Management and Sleep Support—Chronic conditions are exacerbated by high stress and inadequate rest. Programs that teach mindfulness and behavioral strategies can deliver immediate health benefits.
- Encouraging Physical Activity—Personalized movement plans improve cardiometabolic, musculoskeletal, and emotional health while contributing to the prevention, management or reversal of disease, increase in quality of life, and reduction of the financial burden associated with inactivity.

Nutrition guidance is paramount: Providing personalized, sustainable dietary support helps reduce reliance on medications and improves the wide array of conditions influenced by weight.

Aiming for functional improvement: Effective management of chronic conditions and overall health shouldn't focus on achieving clinical targets and good numbers alone. Most people measure their health based on the perceived impact it has on their daily life. In fact, there is significant evidence that low self-perception of health and quality of life (QoL) is directly related to health care overutilization. A focus on QoL can directly enhance outcomes and foster sustainable health improvements.

Embracing flexibility: Life is unpredictable, and strict, condition-based protocols often fail to account for social and environmental challenges. Being unable to adapt, start over, or acknowledge the normal struggles of losing weight or sticking to exercise can be discouraging, hindering the lifestyle changes crucial for improving the health of people with MCCs.

A cross-condition model empowers employees to take control of their health and improves the most often overlooked and critical element of health literacy—using health information—as a whole, combining evidence-based medical care with social and behavioral support for sustainable lifestyle change.^{8,9}



CHAPTER 4 Why Cross-Condition Programs Work

Whole-person care isn't just theory; evidence demonstrates its efficacy. According to the National Center for Complementary and Integrative Health¹⁰ (NCCIH), approaches that address physical, mental, and environmental factors together show meaningful improvements in chronic disease management. Additionally, RAND Corporation research¹¹ highlights how coordinated, integrated care for MCC reduces hospital readmissions, eliminates duplication, and lowers overall costs.

What's more, meeting employees where they are—with personalized guidance and behavioral tools—not only reduces short-term medical claims but also keeps the workforce healthier and more productive in the long term.



CHAPTER 5 Looking Toward Whole-Person Solutions

Employers who adopt cross-condition care programs can expect significant outcomes, both in terms of finances and employee health. Consider these benefits:

- Addressing a well-understood risk and high-need source of unnecessary medical costs will ultimately drive down health care expenses.
- A single comprehensive health program, combined with as-needed single-condition solutions, boosts program engagement by streamlining care, empowering employees, and fostering sustainable health improvements without overwhelm.
- Better care integration and prevention of complications lead to immediate reductions in medical claims, driving financial benefits for employers.
- Improved quality of life and productivity help reduce absenteeism and presenteeism, creating a more efficient and healthier workforce.



CHAPTER 6 The Path Forward for Employers

The health landscape is shifting, and the impact of multi-chronic conditions is widespread and growing—burdening individuals, employers, and the broader health care system. Yet, this change also opens the door to new opportunities.

To address these challenges head-on, employers must evaluate their populations and consider programs designed for cross-condition, personalized care. By leveraging advanced data analytics, partnering with forward-thinking vendors serving a multi-chronic population, and focusing on whole-person solutions, organizations can reduce health care costs, improve workforce productivity, and play an integral role in reshaping health care models for collective benefit.

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Learn About MOBE

We are the whole-person, cross-condition solution that goes further to deliver better health outcomes and lower overall health care costs through personalized lifestyle guidance and medication optimization.

Working with employers, we find an overlooked, rising risk population who are continually seeking solutions in the health care system and driving up costs. MOBE's innovative approach to condition management addresses fragmentation of care, simplifies health improvement for individuals and reduces the financial burden of rising health care costs with guaranteed year one speed to savings.

MOBĒ

Achieve year-one savings with a personalized, whole-person, cross-condition solution.