PURPOSE: Assess the association of taking incidental sickness absence with health risks and health status. DESIGN: Observational. SETTING: One Midwest health care system. SUBJECTS: Individuals who were employed for 2 years (2006-2007) and had completed at least one health risk appraisal (HRA) in 2007 (N = 3790). MEASURES: Outcomes were any incidental sickness absence and absence duration in 2007 measured by an absence tracking system. Health risks and health status were estimated by HRAs. Program participation was captured using 7-year HRA data and 5-year wellness data. ANALYSIS: Multivariate, binary logistic regression for the probability of taking any absence day among the overall population as well as four demographic subgroups; proportional odds model for the probability of taking more absence days. RESULTS: Different patterns were observed in association with taking incidental sickness absence among age and gender subgroups. Among the overall population, three health risks (smoking, overweight, and use of medication for relaxation) were positively associated with taking absence (at least p < .05 for all three health risks). Participation in a wellness program for more years was also associated with a less likelihood of taking absence (odds ratio, .72; p = .002). Results from the proportional odds model were consistent with results from the binary logistic regression. CONCLUSION: Sickness absence is an important productivity concern of employers. Employers may implement early interventions to focus on preventable causes. Special interventions may target absence-causing risks such as smoking behavior and excess body weight. Study limitation includes a lack of measures for psychosocial work environment.