

NATIONAL PRIORITY: POPULATION HEALTH

Improve the health of the population

OUR VISION: We envision communities that foster health and wellness as well as national, state, and local systems of care fully invested in the prevention of disease, injury, and disability—reliable, effective, and proactive in helping all people reduce the risk and burden of disease.

Why is Population Health a National Priority?

With 60 percent of American deaths attributable to behavioral factors, social circumstances, and physical environmental exposures, we must ensure the optimal use of preventive services and superior clinical preventive care, provide support for healthy lifestyle behaviors, and address social and environmental issues that lead to poorer health outcomes.⁴² The Partners strongly uphold that this work must take place at the community level, with national, state, and local involvement enabled through the development of stronger partnerships and coordination of care between the public health and healthcare delivery systems. IOM's 2002 report *The Future of the Public's Health in the 21st Century* emphasizes that government public health

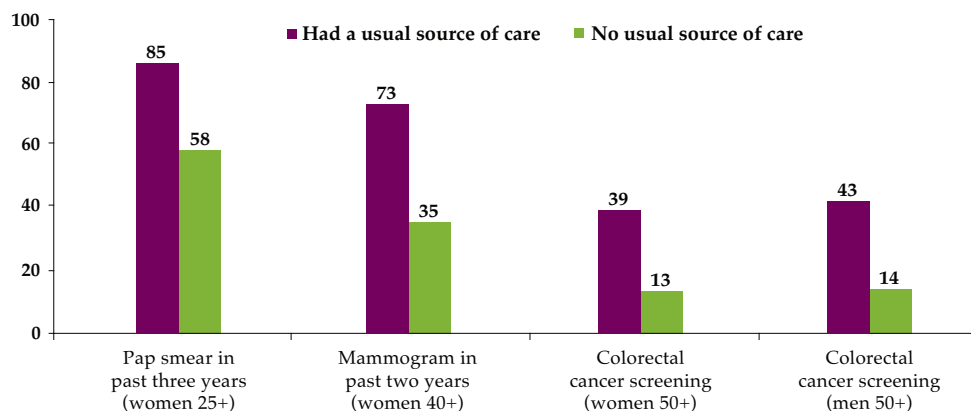
agencies are the backbone of the public health system, but they cannot work in isolation; they must partner with other organizations and sectors of society to consolidate and optimize the resources necessary to achieve better health outcomes.⁴³

Making Population Health a National Priority Will:

REDUCE HARM. More than 1,500 Americans die from cancer each day,⁴⁴ yet less than 50 percent of adults are up to date with colorectal cancer screening, and only 67 percent of women have been screened for breast cancer in the past 2 years.⁴⁵ Evidence suggests that having a regular source of care can increase the likelihood of receiving these recommended preventive services (see Chart 1).⁴⁶

Chart 1

Percentage Who Received Cancer Screening: Community-Dwelling Adults With and Without a Usual Source of Health Care, 2000



Data: National Health Interview Survey (Swan, J. et al. 2003. *Cancer* 98:1528-40). Colorectal cancer screening means a home blood stool test in the past year or a colonoscopy, sigmoidoscopy, or proctoscopy in the past five years.

Source: McCarthy and Leatherman, *Performance Snapshots*, 2006. www.cmf.org/snapshots.

An additional 36,000 people die and 200,000 are hospitalized annually due to complications from influenza, yet only 37 percent of adults over 50 get an annual flu vaccination. By immunizing 90 percent of adults over age 50 against influenza annually, approximately 12,000 additional lives could be saved each year.⁴⁷

REDUCE DISPARITIES. Health status is known to vary widely between communities and regions. In 2007, approximately 68 percent of Hispanic and 56 percent of African American adults over the age of 65 were identified as never having received a pneumococcal vaccination, compared with only 38 percent of white adults in the same age group.⁴⁸ African Americans are more likely to develop and die from cancer than any other group, and death rates are 17 to 37 percent higher than those of whites.⁴⁹

REDUCE DISEASE BURDEN. Tobacco use remains the leading preventable cause of death and contributes to the development of many serious diseases, including coronary heart disease, stroke, and peripheral vascular disease.⁵⁰ Likewise, being overweight or obese leads to many other diseases, such as diabetes, hypertension, and stroke.⁵¹

Research shows, however, that certain services and behaviors may help patients to improve their health status and reduce the risk of disease. Smoking cessation counseling for adult smokers lowers the risk for lung and other types of cancer and reduces respiratory symptoms, such as coughing, wheezing, and shortness of breath.⁵² Good nutrition and regular physical activity may also lower the risks for many chronic diseases, including heart disease, stroke, osteoporosis, diabetes, and some cancers, and may be associated with fewer hospitalizations, physician visits, and medications.⁵³

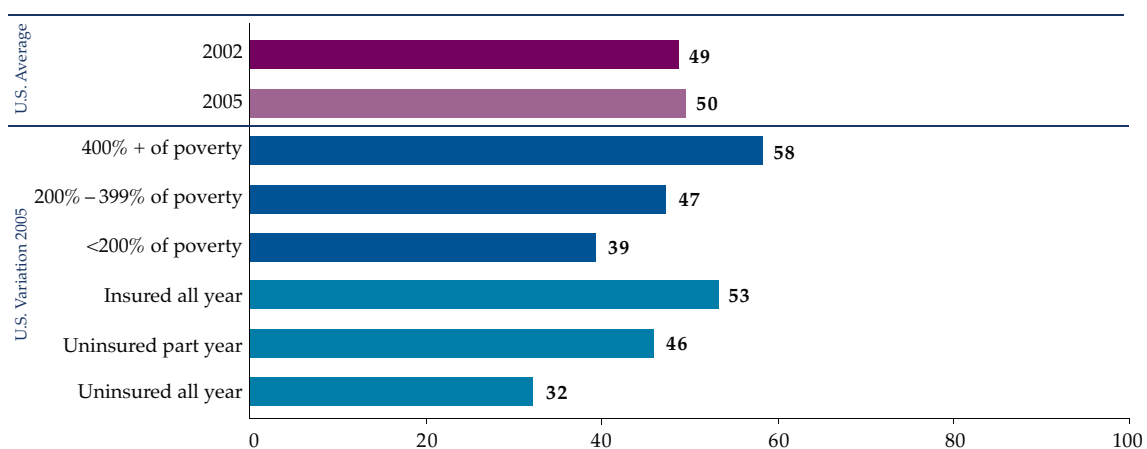
REDUCE WASTE. The ultimate goal is to ensure that all patients consistently receive the most effective recommended preventive services. In achieving this goal, it is hoped that patients will no longer be subjected to tests for which there is poorly documented evidence of benefit. Unwarranted tests, based on U.S. Preventive Services Task Force recommendations, have been estimated to be ordered more than 40 percent of the time during annual health exams.⁵⁴

Chart 2

QUALITY: EFFECTIVE CARE

Receipt of Recommended Screening and Preventive Care for Adults

Percent of adults (ages 18+) who received all recommended screening and preventive care within a specific time frame given their age and sex*



* Recommended care includes seven key screening and preventive services: blood pressure, cholesterol, Pap, mammogram, fecal occult blood test or sigmoidoscopy/colonoscopy, and flu shot. See report Appendix B (from chart source) for complete description.

Data: B. Mahato, Columbia University analysis of Medical Expenditure Panel Survey.

Source: Commonwealth Fund National Scorecard on U.S. Health System Performance, 2008.

Population Health: Examples of Actions

HealthPartners, a consumer-governed nonprofit healthcare organization in Minnesota, has been improving the health of its communities by working to ensure that all of its members receive evidence-based preventive screenings based on age and gender. In 2006, 72 percent of its adult members were up to date on *all* appropriate screenings in their composite measure.⁵⁵ This achievement is significant: On average, Americans only receive 50 percent of recommended preventive care based on a similar composite measure (see Chart 2).⁵⁶

The University of Wisconsin Population Health Institute has been publishing county health rankings for the past five years. The Wisconsin County Health Rankings are designed to summarize the overall health of its counties, as well as the factors that are key in determining health status, such as health behaviors, socioeconomic factors, and healthcare. This information is intended to stimulate all community stakeholders to partner with health departments and healthcare organizations to improve the population's health.⁵⁷

The Eleventh Street Family Health Services of Drexel University is a nurse-managed, transdisciplinary health center founded in 1998 that serves residents of four public housing developments and the surrounding urban community, where 57 percent of patients are covered by the state Medicaid plan and 33 percent are uninsured. The program provides a full range of primary care, dental services, behavioral health services, and health promotion and disease prevention care. It provides one-stop shopping for both health and life concerns, offering not only health services but a fitness center, a teaching kitchen serving persons with diabetes and other clients, and weekly distribution of fresh fruits and vegetables. Eleventh Street Family Health Services has led to significant improvements in basic care and health outcomes for the population it serves by improving access to care for the underserved and uninsured in the community. During 2006, there were 7,837 primary care visits—a 19 percent increase from 2005—which resulted in improved diabetes management, improved control of hypertension, increased adult immunization rates, and increased rates of breast cancer screening.⁵⁸

Healthy lifestyle education has been widely recognized as one key to a healthier society and decreased healthcare costs. Most large employers are adding health and wellness promotion programs to support their employees and their families as they strive to get and stay healthy. Beyond the 83 percent of employers nationally that now offer health risk assessments, best performers are increasingly providing direct financial incentives to their employees to participate in health risk reduction activities.⁵⁹ The San Antonio-based financial services corporation USAA, winner of the 2006 C. Everett Coop National Health Award, offers its 22,000 U.S. employees a "Take Care of Your Health" program, which includes onsite health clinics, fitness centers and personal trainers, healthy options in vending machines, and smoking cessation and weight loss programs. In 2005, nearly 70 percent of USAA's employees participated in at least one of these programs. Together, these programs have reduced workplace absences and are estimated to have saved the organization more than \$105 million over a three-year period.⁶⁰

POPULATION HEALTH:

HOW WILL WE GET THERE?

The Partners will work together to ensure that:

Goal: All Americans will receive the most effective preventive services recommended by the U.S. Preventive Services Task Force.

To get there, we will develop a composite measure of preventive services that can assess the extent to which each individual in the population and the population as a whole receive all of the most effective preventive services based on a prioritized list of recommendations of the U.S. Preventive Services Task Force.⁶¹ We will develop an educational campaign for the general public and for healthcare professionals, and tools to collect data and improve the measure in clinical practices and populations across the country. We will develop support for individuals and clinical practices to improve the use of these important clinical preventive services. We will develop and implement benefit designs, payment methods for healthcare organizations, and incentives for consumers that encourage the use of these effective preventive services.

Goal: All Americans will adopt the most important healthy lifestyle behaviors known to promote health.

To get there, we will develop a composite measure of interventions known to be effective in helping individuals adopt healthy behaviors and a composite measure that can assess the extent to which each individual in the population and the population as a whole adopt all of the most important healthy behaviors. We will develop a method for determining the most important healthy behaviors and the interventions known to be effective in improving them. We will develop an educational campaign for the general public and for healthcare professionals, tools to collect and improve the measures in clinical practices and populations across the country, and support for individuals and clinical practices to improve the use of these important interventions known to improve healthy behaviors. We will develop and implement benefit designs, payment methods for healthcare organizations, and incentives for consumers that encourage the adoption of these healthy behaviors.

Goal: The health of American communities will be improved according to a national index of health.

To get there, we will develop a national health index that addresses not only the contribution of healthcare to good health, but also the health behaviors of individuals and the socioeconomic and physical environment factors that affect health. We will calculate and report the index for all counties in the United States, and will provide training in and knowledge of the interventions that are known to be effective in improving health to all stakeholders. We will support the efforts of stakeholders to demonstrate annual improvement in health in their communities and in particular for disadvantaged populations. We will promote coordination and cooperation between public and private health entities in working toward the achievement of this significant and challenging improvement in the health of the population.