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**Achieving Potential, Returning Value**  
**Why Prevention Policy Is Key**

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## National challenges

- **Expensive health care:** 30% higher than the world's second biggest spender
- **Poor returns:** at least 2 dozen countries with better health statistics
- **Backward priorities:** first dollar to treatment, last to prevention
- **Human consequences:** illness, injury, pain, suffering, and death that ought not to occur

## National opportunities

- **Leading causes of death are preventable:** heart disease, cancer, stroke, diabetes, injuries—each driven by preventable factors, e.g. physical inactivity, poor nutrition, tobacco use, alcohol misuse
- **Preventive services work:** preventive services are evidence-based and have even been prioritized by impact—e.g. aspirin use, tobacco cessation, colorectal cancer screening, flu vaccinations, breast cancer screening
- **The impact can be large:** Partnership estimates that 100,000 lives could be saved yearly with just these 5 services
- **They are a relative bargain:** Partnership has studied cost-effectiveness relative to each other and relative to treatment .

## What does investing in prevention mean?

- **Clinical preventive services:** provided in medical care settings—e.g. immunizations, screening tests, preventive medicines, and counseling for behavior change
- **Community preventive services:** provided outside the medical care setting—e.g. through schools, workplaces, community-wide initiatives—and enlisting a wide variety of public health, cultural, environmental, and social service interventions and incentives.
- **Synergy:** clinical and community preventive services reinforce one another and together are necessary for real improvements in health.

## Partnership's Medicare policy emphases

- **Embed prevention in Medicare:** Using 1964 assumptions for 2007 levels of science makes no sense. Prevention clearly works for older people, from immunizations to physical activity, and should be a centerpiece of the program, not a peripheral component.
- **CMS prevention authority:** Give CMS authority to add and remove coverage for preventive services in Medicare, applying evidence-based recommendations from the U.S. Preventive Services Task Force, including authority for community approaches.
- **Welcome to Medicare visit:** Extend the eligibility period, remove the deductible from the Welcome to Medicare Visit, and give CMS the authority to determine the appropriate elements based on the evidence.

## Other Partnership policy priorities

- **Physical inactivity and poor nutrition:** With current trends, children today could end up being sicker and dying earlier than their parents. We need:
  - consistent dietary messages (Guidelines, pyramid, food labels, food standards)
  - standards and incentives for accurate point-of-choice information
  - nutritious federal purchases (school meals, WIC, food stamps, crops)
  - set-asides in housing, roads and education for activity-friendly places
  - enforced authority for accurate advertising practices
  - authorization and funding for social marketing on diet and activity
  - authorization and funding for development of models for economic incentives
- **Tobacco:** Still leading the list of preventable deaths. We need:
  - strong standards and incentives for tobacco cessation services (counseling, medication)
  - regulatory and economic incentives for tobacco cessation services under Medicaid
    - Medicare reimbursement authorized for proven OTC smoking cessation aids
    - full coverage of tobacco cessation for federal and federally funded beneficiaries
      - authorization of tobacco regulation by FDA
      - increased federal excise taxes on tobacco
- **Alcohol abuse and addiction:** A leading killer that is also a pervasive social and economic drain. We need:
  - higher federal excise taxes on alcohol
  - incentives for states to enforce zero tolerance laws for young drivers

## In summary, you can transform health policy

- By modernizing Medicare
- By offering the support, incentives and standards communities need to make physical activity and good nutrition easier choices for all
- By discouraging tobacco use and excessive alcohol use
- By supporting smokers who want to quit
- By ensuring that health reform is grounded in prevention, and reflects a strategy that marshals both clinical and community action and resources.
- By using your bully pulpits to constantly remind colleagues, constituents and the American people of the opportunities we have through prevention.

## You can put the bottom line at the top

- **Prevention** is the key to achieving the universal health policy priority: improving the health of the American people.
- **Evidence** is strongest for preventive services, both in health and economic terms.
- **Value** in our national health investments will only be achieved when prevention is the centerpiece—in care and in communities.
- **Justice** demands that health services and health insurance be available to all.
- **Equity** will only truly be achieved when both the opportunity for prevention and the opportunity for treatment are equally and universally available to all.
- **Our health** depends on it.