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## **Health Reform Bill Should Include Clinical Preventive Services, Businesses and Health Advocates Urge Congressional Leaders**

### *Cost-effective services often under-utilized*

**WASHINGTON, DC, May 4, 2009** - More than a dozen health advocacy organizations and businesses from across the country Monday urged congressional leaders to provide coverage and incentives for clinical preventive services such as immunizations, disease screenings, and behavioral counseling as part of health reform legislation.

“Widespread delivery of effective clinical preventive services would help millions of Americans live longer and healthier lives,” the group said in a letter to Senate Majority Leader Harry Reid and House Speaker Nancy Pelosi.

“Because recommended clinical preventive services improve health at a very reasonable cost, we urge you both to cover these services in existing federal health care programs, and to make coverage for effective preventive services an important part of health reform.”

Many preventive services are currently under-utilized, even though they are known to be effective, the group said. They cited a study by the National Commission on Prevention Priorities that found that 100,000 lives would be saved each year if the use of just five important preventive services were increased from current levels to 90% of the target population. Those services were adult influenza immunization, aspirin counseling for cardiovascular health, tobacco counseling, breast cancer screening, and colorectal cancer screening.

Specifically, the group made the following recommendations:

- Provide benefits under the Federal Employees Health Benefits Program, the Department of Defense, the Department of Veterans Affairs, and the Indian Health Service to cover clinical preventive services recommended by the US Preventive Services Task Force (USPSTF) and the Advisory Committee on Immunization Practices (ACIP).
- Create incentives for, or require, states to cover cost-effective clinical preventive services under Medicaid and the State Children’s Health Insurance Program (SCHIP). Cost-effective services are those services that cost less than \$50,000 per quality-adjusted life year saved.
- Authorize the Secretary of Health and Human Services to expand Medicare coverage under Part B for immunizations recommended by the ACIP. The Medicare Improvements for Patients and Providers Act of 2008 allows the Secretary to cover

services recommended by the USPSTF but makes no mention of services recommended by ACIP.

- Offer first-dollar coverage, without deductibles or copayments, for cost-effective clinical preventive services in all federally sponsored health benefit programs.
- Ensure that reimbursement levels in federal programs are sufficient to encourage providers to deliver cost-effective clinical preventive services.
- Reward health plans and insurers that achieve high delivery rates of recommended clinical preventive services in federally sponsored health benefit programs. Metrics, such as those developed by the National Committee for Quality Assurance, should be utilized, and such ratings should be shared with patients.

The [letter](#) was signed by representatives of Partnership for Prevention, American College of Preventive Medicine, American Public Health Association, America's Health Insurance Plans, Bayer HealthCare, Edelman, GlaxoSmithKline, Humana, Inc., Infectedetect LLC, Johnson & Johnson, National Association of County and City Officials, Prevent Blindness America, Society for Prevention Research, Society of Behavioral Medicine, Trust for America's Health, University of Pittsburgh School of Public Health, and WellPoint, Inc.

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*Partnership for Prevention is a nonpartisan, nonprofit organization of business, non-profit and government leaders dedicated to making evidence-based disease prevention and health promotion a national priority.*