

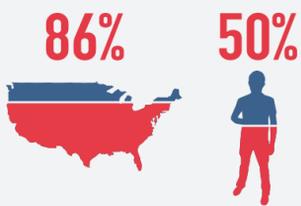
As Americans, we spend an enormous amount of health care dollars treating largely preventable chronic conditions. Prevention can reduce demand on the health care system. To access the value of prevention, we must shift our focus to keeping people healthy. We also need a payment system that incentivizes the types of upfront investments that reduce downstream treatment costs.

FACING FACTS



Americans Spend Twice as Much on Health Care as Citizens of Other Developed Countries

Yet we have shorter life expectancies, and higher rates of infant mortality and diabetes.



Chronic Disease Dominates Health Care Costs

Chronic diseases account for 86 percent of U.S. health care costs and affect 50 percent of the adult population.



Social, Environmental, and Economic Factors

Where people live, work, learn, and play has a greater influence on their health than what goes on in the doctor's office, yet the health care system bears the brunt of these problems when they ultimately lead to poor health outcomes.



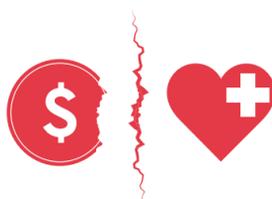
Structural Barriers

The health care system has few structural or financial mechanisms for connecting effectively with the broader community beyond the clinic walls or leveraging resources to maximize health outcomes.

THE CHALLENGES



The emerging evidence base around prevention is fragmented and lacks cost metrics, which are very important to policy makers.



Current fee-for-service payment models **do not reward health care systems for working upstream** to prevent illness.



There are **opportunities through current Affordable Care Act** provisions to better align incentives.

✓ Recommendations

1

Continue building the evidence base on the value of prevention.

Federal agencies, philanthropies, public health research journals, and Congress all have roles to play in supporting the development of robust economic analysis of prevention interventions and the promotion of strategies that are proven to improve health and cut costs.

2

Make prevention a key part of health care delivery system reform.

The Centers for Medicare and Medicaid Services has several ways to advance this, including population-based quality measures and promising models such as the Accountable Health Community model that could be tested on a broad scale through its Center for Medicare and Medicaid Innovation. On the ground, stakeholders can better capitalize on new opportunities such as the Community Health Needs Assessment to collaborate on common goals in their communities.