



Preventable chronic diseases now affect half the U.S. adult population and account for the bulk of U.S. health care costs. Prevention strategies focused on risk factors for these diseases are critical to improving citizens' health and reducing health care costs. ^{i, iii} In 2014-2015, the Bipartisan Policy Center (BPC) convened the Prevention Task Force to focus on prevention and to frame a strategy for fully integrating prevention into the nation's approach to health and health care.

The Key Facts

- Chronic disease dominates health care costs.

86% of U.S. health care costs can be attributed to chronic disease. ^{i, iii}

- Despite huge expenditures on health care, Americans do not experience better health.

Americans spend 2x as much on health care as citizens of other developed nations, and yet 50% of American adults have a chronic disease. ^{i, ii, iii, iv}

- Several obstacles prevent the United States from implementing an integrated, prevention-focused approach to health care.

Fee-for-service payment models do not reward physicians for counseling patients on preventive changes to improve health. Health care providers have historically operated with little or no connection to non-medical, community-based organizations.

Addressing the Crisis

In its 2015 white paper, *A Prevention Prescription for Improving Health and Health Care in America* (bipartisanpolicy.org/prevention-prescription), the task force identified a two-part framework to accelerate investment in prevention-oriented strategies that will improve health outcomes and lower health care costs.

1. Build the evidence base on the value of prevention.

Capture and translate the best available information about what interventions are effective in reducing identified risk factors, improving population-based health outcomes, and reducing costs.

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

Shift the existing health care delivery system from volume to value-based care delivery and payment by including prevention strategies and forging new partnerships among community organizations and traditional providers. The BPC Prevention Task Force is motivated by a core premise: that prevention, along with an integrated approach to health and health care can improve patient outcomes and experience, while reducing health care costs. Given Americans' high rates of chronic disease, the complex health care challenges the nation faces, and the fact that the most important influences on people's health happen outside the clinic, prevention is essential to achieving better health outcomes and lower costs for all Americans. To read the full report and view the full list of task force recommendations, visit bipartisanpolicy.org/prevention-prescription.

ⁱ Centers for Disease Control and Prevention. "Chronic Disease Prevention and Health Promotion." Centers for Disease Control and Prevention, 2015. Available at: <http://www.cdc.gov/chronicdisease/>.

ⁱⁱ Ward, Brian, Jeannine Schiller, and Richard Goodman. "Multiple Chronic Conditions Among US Adults: A 2012 Update." *Prevention of Chronic Disease* 11.4 (2014).

ⁱⁱⁱ Organization for Economic Co-operation and Development. *OECD Health Statistics 2014: How does the United States compare?* Paris: OECD.org, 2014. Available at: <http://www.oecd.org/unitedstates/Briefing-Note-UNITED-STATES-2014.pdf>.

^{iv} Central Intelligence Agency. *The World Factbook 2013-14*. Washington, DC: Central Intelligence Agency, 2013. Available at: <https://www.cia.gov/library/publications/the-world-factbook/index.html>.

Founded in 2007 by former Senate Majority Leaders Howard Baker, Tom Daschle, Bob Dole, and George Mitchell, the Bipartisan Policy Center (BPC) is a nonprofit organization that drives principled solutions through rigorous analysis, reasoned negotiation, and respectful dialogue. With projects in multiple issue areas, BPC combines politically balanced policymaking with strong, proactive advocacy and outreach.

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