HLC WELLNESS PRINCIPLES

Overview

Over 130 million Americans—more than one in every three of us—live with chronic conditions such as diabetes, heart disease, or asthma. That number is expected to increase to 171 million by 2030 as obesity and aging impact population health status. The Healthcare Leadership Council (HLC) and its members champion health promotion, disease prevention, and chronic care management as essential components of healthcare delivery.

The burden of chronic disease can be prevented, or its impact lessened, through better public and private sector development and implementation of evidence-based wellness practices and changes to existing systems, especially in school, worksite, clinical, and community-based settings, and by investing in interventions that have been proven to reduce costs and improve quality of life. It is increasingly evident that individuals can reduce their risk of chronic disease by changing behavior and modifying lifestyles. A patient-centered approach to wellness and prevention includes treatments and interventions on a continuum—from vaccines for newborns to community-based prevention programs to pain mitigation therapies.

Wellness applies to all segments of the population, both those who are still healthy and those already burdened with disease. Primary prevention reduces or delays new cases of disease or conditions; secondary prevention addresses disease in its early stages by reducing the impact of the disease or additional episodes of care; and tertiary prevention mitigates the progression of disease or additional complications and enhances the ability of individuals to manage their own health and well-being.

Purpose & Use

HLC has constructed these Wellness Principles to guide development of policies and operations in the area of wellness, prevention, and chronic disease management. HLC intends these guidelines to be used by federal and state policymakers to support a broad range of innovations and to determine which therapies, treatments, and systems show the most promise for improving the health of individuals and populations.

The HLC Wellness Principles can help guide the investment of federal dollars through grants, Medicare, Medicaid, and other federal programs, innovative employer and health provider-based initiatives, effective community-based programs, evidence-informed policy systems and environmental change strategies, vaccines, and other interventions that seek to promote wellness as an
outcome. HLC anticipates that federal and private programs relying on these Principles will be supported by rigorous data collection, outcome measurements that demonstrate a positive return on investment (ROI) and a value proposition on how these projects can both reduce costs and improve patient health.

Principles:

1. **Innovation**
   Commitment to medical innovation drives the continued excellence of the U.S. healthcare system. Health systems, nations, and individuals must continually seek, test, and implement care models, services, and therapies that can help reduce preventable chronic disease and sustain well-being. Efforts to prevent or mitigate the multi-faceted effects of chronic disease require innovative, multiple, and parallel approaches that link to and strengthen healthcare delivery. A blend of clinical and programmatic innovation will generate a broad range of solutions to reach populations across economic and demographic lines (such as gender, age, and geography). Private and public sector innovators develop integrated, comprehensive health solutions aimed at maximizing both results and engagement for specific communities and broad populations.

   HLC believes that to address the multi-faceted causes and effects of chronic disease, payment incentives must be re-aligned and burdensome regulations and other barriers to innovation must be removed. Regulatory actions and policies such as the federal Essential Health Benefits package should be constructed in ways that support, not hinder wellness. Government should not create barriers to disease prevention. While recognizing the need for guidelines and standards, the private sector should continue to invest in new, innovative ideas to help decrease the burden of chronic disease and meet the health needs of varied populations. Such ideas may exist outside the traditional healthcare delivery system model. Patient Protection and Affordable Care Act (PPACA) provisions allowing premium adjustments for employees who adopt healthy behaviors and employer wellness incentives are significant positive developments in this area.

2. **Evidence-Based Initiatives**
   Healthcare, among other industries, has taken the lead and shown a willingness to invest in wellness and prevention, demonstrating a return on investment (ROI) from these initiatives. The public sector should draw from many sources such as the expertise and evidence developed by non-government organizations such as the Institute of Medicine (IOM), and private sector resources such as the HLC Wellness Compendium to identify investment strategies that can be replicated and scaled to guide coverage policy.

   HLC believes that wellness initiatives should be focused on evidence-based wellness and disease prevention behaviors and chronic disease management approaches which can achieve broad reach, high impact, and sustainable change. There is a large body of evidence already in place supporting the implementation of many different models of health interventions that will reduce the burden of chronic disease.

3. **Supporting Jobs and Employers (Workplace Wellness)**
Employee health is critical to the performance and economic success of any organization. While sustainable behavior change requires individual motivation (and more research is needed in this area), employers that successfully encourage engagement and participation of their employees in wellness programs, creating an environment for healthy lifestyles, can positively impact the health of their workforce. Companies and governments that have instituted successful wellness initiatives have significantly reduced absenteeism, medical claims payments, and worker compensation payments. Money saved by employers can be reinvested in the company and help create new jobs. A strong wellness program can be used by employers to attract and retain top-tier talent. Further, it only makes sense to reinforce, in the venue where most Americans spend a majority of their time, the message they’re receiving from physicians’ offices.

HLC believes that workplace wellness programs can increase the health of entire communities by improving the health of workers and, by extension, their families. HLC supports efforts that make it easier to develop, implement, and sustain employee wellness initiatives such as tax incentives and reduced premiums for employees who participate in wellness programs. HLC believes there are workable solutions for both small employers and larger organizations. Small organizations, in particular, benefit from community-wide interventions that affect their employees’ environment outside of work.

4. Federal Incentives for Wellness
Since the government is the largest healthcare payer in America, federal support and leadership will be critical in moving the marketplace from a system that rewards volume of healthcare services to one that encourages prevention and care coordination. To promote wellness, the government must change federal health programs such as Medicare and Medicaid to realign payer incentives. Legislation such as PPACA has already moved in this direction by investing significant dollars in the Prevention and Public Health Fund and giving the U.S. Preventive Services Task Force (USPSTF) new authority to examine existing evidence and recommend coverage for preventive services.

HLC believes the federal government, by investing significant resources in promoting wellness and prevention, can make a substantial improvement in the overall health status of the U.S. population. The scale of chronic disease in America requires federal investment in addition to existing private efforts. When invested wisely, federal dollars are a valuable tool to help improve the health of Americans and control healthcare spending. The expertise and experience of HLC member companies and organizations enable HLC to make recommendations on criteria for measuring and reporting outcomes of proposed interventions, guiding members of Congress and the federal government as they appropriate federal dollars. HLC believes that federal funding should be used to build upon successful, evidence-based initiatives developed and employed by the private sector, combining private sector innovation with public sector population reach.

In addition to federal investment, HLC encourages the government to use its reimbursement authority and existing mechanisms to alter the payment landscape to encourage and support wellness and prevention. Providing, financing and incentivizing prevention and care coordination services for Medicare and Medicaid beneficiaries—and relying upon already-
successful private sector programs to shape those services—can help drive consumer engagement. Federal policy makers should emphasize wellness through the various levers at its disposal, such as the Essential Health Benefits package requirements and the Centers for Medicare and Medicaid Innovation (CMMI) established by PPACA, existing wellness offices in each federal agency, the Federal Employee Health Benefits Plan, Medicare and Medicaid coverage decisions, and tax incentives.

5. Supporting the Healthcare Delivery System
Beginning in 2014, PPACA will bring more than 30 million newly insured individuals into the healthcare system. While the health reform law includes some initiatives to increase the healthcare workforce, experts still believe the supply will not be enough to meet the increased demand, and the healthcare delivery system will need to rely increasingly on allied health professionals to treat and care for patients.

HLC believes that prevention efforts and healthy behaviors cannot be broadly achieved through a single, traditional delivery system model. Wellness and prevention measures must be coordinated and linked to primary care, must be accessible in schools, worksites and community settings, may include trained health educators and communications technology, and may be based outside the traditional, licensed healthcare delivery system. HLC member companies and organizations have helped patients manage their care outside the clinical setting using advances in technology that connect patients to the healthcare system and reinforce clinically appropriate messages. To meet the needs of a growing patient population, HLC supports augmenting the shortage of primary care physicians with allied health professionals and other trained members of the community where appropriate. Such innovative workforce deployment will extend the reach of the existing healthcare infrastructure and provide a lower-cost way to deliver certain kinds of care. Furthermore, successful wellness initiatives work best when individuals live in communities that can support their healthy lifestyle decisions. Therefore, government policy will be critical to ensuring that the infrastructure exists to support public and private wellness initiatives within communities.

6. Federal Savings/Cost
Estimating the savings wellness and prevention programs can provide for federal programs has proven difficult. Traditional methods employed by the Congressional Budget Office (CBO) do not allow for estimating cost savings as a result of lifestyle changes and healthy behaviors in budgetary outyears and only estimate the cost of the wellness and prevention programs directly.

HLC believes that the promotion of “dynamic” scoring methods (taking into account the downstream effect of behavior change, which may be beyond the traditional ten year window) for prevention and wellness initiatives will allow for their cost savings to be appropriately estimated in federal budget projections. It is critical that the healthcare and policy communities be willing to accept that expected positive outcomes and ROI may not be fully realized in the early stages of any evidence-based wellness initiative. Programs and methods designed to improve wellness need to be allowed to mature to determine the initiative’s success if initial metrics do not show immediate results. Evaluation needs to incorporate broad savings, including non-healthcare specific savings, from healthy behaviors.