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July 28, 2009

The Honorable Nancy Pelosi  
Speaker of the House  
H-232 Capitol Building  
Washington, DC 20515

The Honorable Harry Reid  
Senate Majority Leader  
S-221 Capitol Building  
Washington, DC 20510

Dear Madam Speaker and Majority Leader Reid,

On behalf of our members, DMAA: The Care Continuum Alliance writes to urge Congressional leaders to include greater incentives for prevention, wellness and care coordination in health care system reform legislation. True transformation of our health care system requires direct attention to the primary driver of health care costs: chronic disease. The proposals to date have lacked the care delivery and financing reforms needed to effectively combat chronic conditions, promote healthful lifestyles, reward the delivery of quality care and facilitate better care coordination.

DMAA: The Care Continuum Alliance represents more than 200 corporate and individual stakeholders, including wellness, disease and care management organizations, health plans, pharmaceutical manufacturers and benefits managers, health information technology innovators, biotechnology innovators, employers, physicians, nurses and other health care professionals, as well as researchers and academicians.

Our members provide wellness and health promotion, disease management and complex care management programs to more than 100 million Americans – nearly one-third of the U.S. population. Population health management strategies have been shown to improve health outcomes for those with chronic disease, better identify those at risk for disease, prevent the onset of chronic conditions and help patients make informed choices through education, including self-management and health coaching. Population health seeks to improve the health status of individuals and decrease the disparities in care that exist for certain populations.

Various models, including accountable care organizations, medical homes and health care cooperatives, have been promoted as possible solutions for health care delivery system reform. These models share similar strategies and components, many of which have been developed and are provided by DMAA member organizations. Our members support these care delivery models and the ultimate goals of improved care coordination, reduced health care costs and better patient outcomes.

Population health management comprises three essential components: primary care-based delivery of health care services; patient engagement and personal responsibility; and care coordination provided through wellness, disease and chronic care management programs.

Primary care physician-based models supported by teams of health care professionals provide increased patient engagement, education and coordination of care. These multi-professional, interdisciplinary health teams create efficiencies not only by reducing the demands on physicians when non-physician providers can provide health support services, but also by creating access to health care services in more appropriate and less-costly settings, rather than hospital emergency departments or avoidable readmissions.

For example, the Iowa Medicaid program established a health coaching program to engage participants with heart failure. By utilizing a variety of methods, including telephonic, Web-based and face-to-face interventions, to track the health status of participants on a regular basis, the program successfully reduced hospital admissions for its heart failure patients by 29 percent and reduced overall hospital admissions by 40 percent.

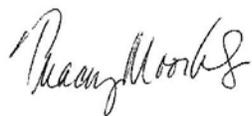
A second critical component of population health management is patient awareness, engagement and personal responsibility. Patient-centric health management that includes prevention, lifestyle changes and support can lead to earlier detection and treatment of disease and avoidance of disease altogether.

Many employers have instituted prevention and wellness programs with the goal of sustained behavior/lifestyle change. These programs have repeatedly demonstrated measurable positive results in improved health status and productivity. A Georgia-based company instituted a health and wellness program for its workforce of more than 10,000 employees. More than half its employees were identified as being high-risk or as having more than one chronic condition. The prevention and wellness program helped identify employees at risk for developing chronic conditions, as well as provided the necessary education, support and tools to minimize or eliminate the progression of certain conditions. Through the weight management component of the program, 95 percent of employees enrolled and lost at least 1 percent of their body weight. In addition, a majority of participants indicated that the program achieved the overall goal of a lifestyle change.

Care coordination is a third key component of population health management. Our fragmented health care delivery system lacks coordination, often resulting in costly redundancies. Care coordination and integration can address workforce shortages, access to care and affordability. DMAA recognizes that a large portion of health care expenditures comes from inpatient hospital days, estimated by the American Hospital Association to cost about \$650 billion annually – a significant portion of those dollars are attributable to readmissions within 30 days of initial hospitalization. Further, readmissions for Medicare beneficiaries account for about 18 percent of all admissions and 35 percent of the dollars spent on inpatient care. Access to care coordination, especially for those afflicted with chronic conditions, better targets valuable health care resources and has been documented to improve the quality of care and quality of life. Care models that support improved coordination among providers and settings through bundled payments or specific reimbursement for care coordination functions is a top priority and a unique core competency for DMAA’s members.

As deliberations continue on transforming our health care system, we hope these comments prove useful. We stand ready to provide assistance and resources.

Sincerely,



Tracey Moorhead  
President and CEO

CC: The Honorable Max Baucus  
The Honorable Ted Kennedy  
The Honorable Mike Enzi  
The Honorable Chuck Grassley  
The Honorable George Miller  
The Honorable John Kline  
The Honorable Henry Waxman  
The Honorable Joe Barton  
The Honorable Charlie Rangel  
The Honorable Dave Camp