



## SUMMARY OF KEY FINDINGS

The 6th Annual Johns Hopkins/Healthways Disease Management Outcomes Summit brought together more than 200 practicing physicians, physician executives, thought leaders and subject matter experts from across the country with the goal of defining tools and systems to promote health and prevent disease. The result—outlined in the following report—is a guide to the barriers and the solutions to realizing the potential and the promise of prevention as a means of improving health and reducing costs. Achieving both the potential and the promise requires large-scale, long-term changes to the health system. Summit participants have put forth the elements of a national preventive health system, providing a solid steppingstone for future work toward such a goal.

In the pursuit of such a system, it is also clear that wellness must be the focus. The challenge of prevention today has shifted from such public health initiatives as handwashing, refrigeration and clean water to helping people eliminate the risk factors that lead to chronic disease, which is now the leading cause of death among industrialized nations. The goal of healthcare should be not only to control and manage risk factors, but to prevent the onset of risk factors in the first place. Wellness is not the absence of disease or even of risk factors. Rather, wellness is a relative state of being where a positive outlook results in good physical, mental and spiritual health.

### **A degree of wellness is attainable by every individual at any stage of life.**

The wellness model developed at the Summit addresses elements such as access to care, social support, a person's readiness for change, the availability of healthy food and an individual's physical environment. In addition, the model assumes that achieving wellness is a team effort whereby everyone—individuals working with their physicians, other healthcare professionals, families, friends, health support organizations, community organizations and policymakers—plays a role.

**Realizing the promise of prevention requires a combination of systemic change and personal responsibility.**

Participants identified and discussed the fundamental components of a revised health system that places a greater emphasis on health and prevention. Specifically, Summit participants offered ideas for change at the individual, provider, payer and policymaker levels.

**Individuals need:**

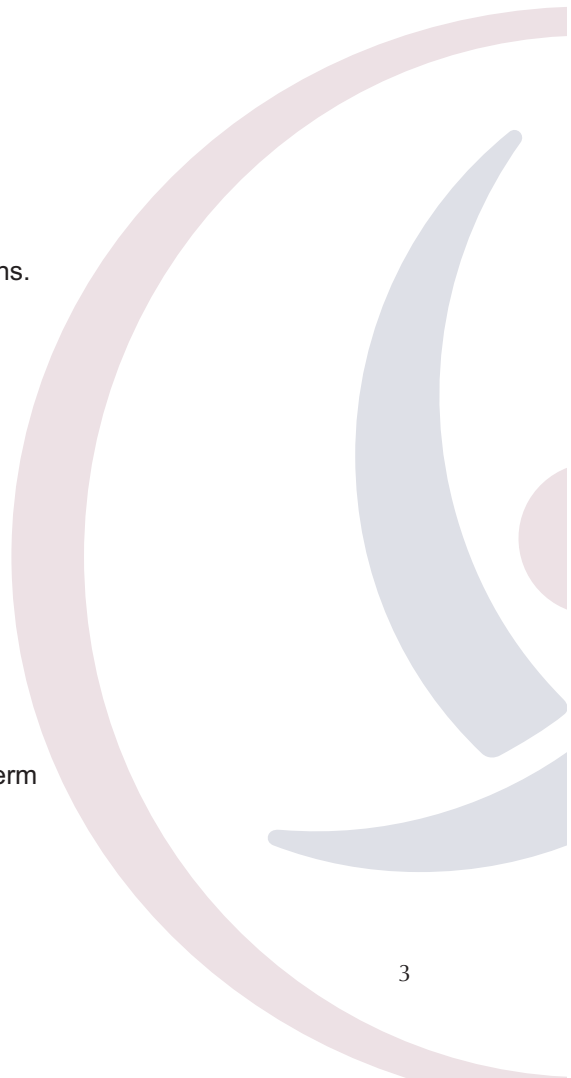
- Motivation (intent to live well).
- Knowledge (how to live well).
- Skills (ability to live well).
- Resources (opportunity to live well).

**Providers need:**

- Office-based systems to
  - Maximize the clinician's time.
  - Assist with health risk appraisals.
  - Remind providers and patients of indicated preventive interventions.
  - Delegate certain preventive services.
  - Monitor success in implementing preventive actions.
- The ability to hold group visits around prevention.
- Compensation for preventive services.
- Decision-support systems to
  - Define patient-specific risk.
  - Identify the most beneficial interventions.
  - Provide vetted information about best practices in prevention.
  - Tailor messages based on a patient's readiness to change.

**Payers can:**

- Expand prevention coverage policies for self-insured employers.
- Conduct prevention-oriented research to measure the short- and long-term economic impact of preventive interventions.
- Establish financial and nonfinancial incentives for employees to use



preventive services and adopt healthful lifestyles.

- Cover services with evidence of greatest benefit and cost-effectiveness, starting with the top 25 preventive services identified by Partnerships for Prevention.

**Policymakers can:**

- Implement tax incentives and disincentives that promote preventive care and healthy behaviors.
- Further develop Health Savings Accounts to more broadly define preventive interventions and practices.
- Establish standards and policies that promote prevention, including legislative and financial support for post-screening follow-up and treatment.
- Establish policies that influence the “built environment” to be conducive to healthy behaviors.
- Provide incentives for state and local governments to develop programs that promote prevention and healthy behaviors.
- Promote the development of a preventive health system.
- Take a more active role in measuring the quality of healthcare delivery.
- Address the need for qualified clinicians to deliver preventive health services.
- Provide special initiatives and funding for the elimination of disparities in preventive practices.
- Establish standards for collecting and sharing health information and the promotion and development of personal health records.
- Lead by example with coverage of preventive services for federal employees.
- Fund preventive interventions for Medicare and Medicaid enrollees.
- Influence societal behavior norms through public health education and social marketing campaigns.

**Maximizing health and creating a state of wellness for each individual are the goals.**

To accomplish these goals, a new approach to care must evolve that has more support systems in place to help make individual health and well-being a reality. The following report is meant to encourage all stakeholders (individuals, providers, payers, and policymakers) to rethink their definitions and their approaches to health and wellness. Our ability to attain the benefits of prevention has never been as promising as it is today.