U.S. Strategic Framework on Multiple Chronic Conditions

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Prevalence
- 1 of 4 Americans with MCC
- 2 of 3 persons age >65 years with MCC
- 2 of 3 poor and disabled with MCC

Access
- 9 million Americans with MCC have no health insurance

Outcomes
- As conditions increase, so does the frequency of mortality, poor functional status, hospitalizations, readmissions, and adverse drug events

Costs
- 2/3rd of US health care costs for individuals with MCC
- 96% of Medicare expenditures for individuals with MCC

Planning Process


2. External stakeholder review and feedback

3. Modification by Workgroup incorporating stakeholder feedback

4. HHS final review and approval

5. Release to stakeholders and others in the public
HHS unveils public-private partnership to deal with multiple chronic conditions
By Julian Pecquet - 12/14/10 12:30 PM ET

The Department of Health and Human Services on Tuesday unveiled a new plan calling for increased collaboration between government agencies and the private sector to tackle the growing challenge of people with multiple chronic conditions.

More than a quarter of all Americans suffer from several chronic conditions, according to HHS, such as arthritis, asthma, chronic respiratory conditions, diabetes, heart disease, human immunodeficiency virus infection and hypertension. Treating those patients takes up 66 percent of the nation's healthcare budget, adds HHS.

But the nation's healthcare system is largely set up to deal with one disease or condition at a time, says HHS. That increases the risk of complications such as adverse drug reactions, unnecessary hospitalizations and overall confusion caused by conflicting medical advice.

"Given the number of Medicare and Medicaid beneficiaries with multiple chronic conditions," said Medicare and Medicaid administrator Donald Berwick, "focusing on the integration and coordination of care for this population is critical to achieve better care and health for beneficiaries, and lower costs through greater efficiency and quality."

The new Strategic Framework on Multiple Chronic Conditions seeks to resolve those issues by "fostering change within the system; providing more information and better tools to help health professionals — as well as patients — learn how to better coordinate and manage care; and by facilitating research to improve oversight and care."

Overarching Goals

1. Foster health care and public health system changes to improve the health of individuals with multiple chronic conditions

2. Maximize the use of proven self-care management and other services by individuals with multiple chronic conditions

3. Provide better tools and information to health care, public health, and social services workers who deliver care to individuals with multiple chronic conditions

4. Facilitate research to fill knowledge gaps about, and interventions and systems to benefit, individuals with multiple chronic conditions
Strategic Framework Goal 1:
Foster health care and public health system changes

Objectives:
- A. Identify evidence-supported models to improve care coordination
- B. Define appropriate health care outcomes for individuals with MCC
- C. Develop payment reform and incentives
- D. Implement and effectively use health information technology
- E. Promote efforts to prevent the occurrence of new chronic conditions and to mitigate the consequences of existing conditions
- F. Perform purposeful evaluation of models of care, incentives, and other health system interventions
Current Efforts Goal 1: Foster health care and public health systems changes

Affordable Care Act Programs:

- Centers for Medicare & Medicaid Services Innovation Center
- Care Transitions Program
- Independence at Home Demonstration
- Health Homes (comprehensive primary care)
- Primary & Behavioral Health Care Integration Program
Strategic Framework Goal 2: Maximize the use of proven self-care management

Objectives:

- A. Facilitate self-care management
- B. Facilitate home and community-based services
- C. Provide tools for medication management
Current Efforts Goal 2: Maximize the use of proven self-care management

Sample Programs & Initiatives:

- Chronic Disease Self-Management Programs
- Self-Care Management Alliance (private sector)
- Home and Community Based Services
Strategic Framework Goal 3: Provide better tools and information

Objectives:

- A. Identify best practices and tools
- B. Enhance health professionals training
- C. Address MCC in clinical guidelines
Current Efforts Goal 3:
Provide better tools and information

Sample Initiatives:

Performance Measurement Framework for Individuals with MCC (private sector led)

Public-Private Collaboration: Incorporation of Co-morbidities in Clinical Guidelines (planned)
Strategic Framework Goal 4: Facilitate research to fill knowledge gaps

Objectives:

- A. Increase the external validity of trials
- B. Understand the epidemiology of MCC
- C. Increase clinical, community, and patient-centered health research
- D. Address disparities in MCC populations
Current Efforts Goal 4: Facilitate research to fill knowledge gaps

Sample Initiatives:
- Pilot Study on External Validity of Clinical Trials
- Comparative Effectiveness Research
- MCC Data Initiative
Summary

“Persons living with chronic disease” increasingly will mean “persons living with multiple chronic conditions.”

- **Implications**: OECD and member countries should consider explicit incorporation of approaches that address the increasing prevalence of MCC.

- The U.S. *Strategic Framework on MCC*, reflecting broad stakeholder input, presents numerous guidance options relevant to the development of a population-based public health action plan for persons with chronic disease to live well.
Thank You


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