

THE 6|18 INITIATIVE

# Accelerating Evidence into Action



The Centers for Disease Control and Prevention (CDC) is partnering with health care purchasers, payers, and providers to improve health and control health care costs. CDC provides these partners with rigorous evidence about high-burden health conditions and associated interventions to inform their decisions to have the greatest health and cost impact. This

initiative offers proven interventions that prevent chronic and infectious diseases by increasing their coverage, access, utilization and quality. Additionally, it aligns evidence-based preventive practices with emerging value-based payment and delivery models.

By 6|18, we mean that we are targeting **six** common and costly

health conditions—tobacco use, high blood pressure, healthcare-associated infections, asthma, unintended pregnancies, and diabetes—and **18** proven specific interventions that formed the starting point of discussions with purchasers, payers, and providers.

**SIX WAYS TO SPEND SMARTER FOR HEALTHIER PEOPLE**

- REDUCE TOBACCO USE
- CONTROL BLOOD PRESSURE
- PREVENT HEALTHCARE-ASSOCIATED INFECTIONS (HAI)
- CONTROL ASTHMA
- PREVENT UNINTENDED PREGNANCY
- CONTROL AND PREVENT DIABETES

**CDC IS COLLABORATING WITH PURCHASERS, PAYERS, AND PROVIDERS. TOGETHER WE CAN:**

- Identify shared goals and interests that improve health and reduce costs
- Monitor shared progress to better understand impact
- Develop a common language across the public health and health care landscape that leads to healthier communities.



## CHANGES IN THE U.S. HEALTH CARE SYSTEM



17.6 million more adults now have health insurance coverage<sup>2</sup>



30 states and DC expanded eligibility to Medicaid



Movement from fee-for-service to value-based health care financing and delivery

## The U.S. Health Care System is Changing

The U.S. health care system is undergoing unprecedented change, driving toward a system that is “better, smarter, healthier.”<sup>1</sup> Major trends in health care, including more people with health insurance, widespread payment reform, and the testing and scaling of new health care delivery models, are providing opportunities to prevent illness, improve population health and forge closer ties between public health and the health care sector.



## CDC's Role in Health System Change

In this critical time of active health system transformation, CDC is helping to accelerate evidence into action to improve the health of all Americans. We are linking the health care and public health sectors by providing evidence on improving health and controlling costs across a spectrum of prevention interventions, from clinical to community prevention. CDC's strength in identifying and analyzing scientific evidence complements the purchaser, payer, and provider role of financing and delivering care. Realizing the potential of this initiative will require new skills and understanding for CDC and public health workers and a new approach to partnering with the health care sector to lay the foundation for a stronger, more collaborative relationship.

## 6|18 Initiative: Key Actions

Key actions of this initiative include bringing together health care purchasers, payers, and providers with select CDC researchers, economists, and policy analysts to offer opportunities to improve health and control costs with the 6|18 interventions. In these new partnerships, CDC will:

- Provide technical assistance to state Medicaid programs to implement prioritized 6|18 interventions based on state needs and readiness.
- Provide technical assistance to employee-based insurers to identify 6|18 interventions that will benefit their employees and patients.
- Collaborate with health care provider networks and organizations to increase their ability to deliver the 6|18 interventions that improve preventive services and patient care.
- Share lessons learned and broaden the initiative with new interventions as evidence becomes available.

<sup>1</sup> (Secretary Burwell, Medicare Reimbursement Announcement, <http://www.hhs.gov/news/press/2015pres/01/20150126a.html>).

<sup>2</sup> ASPE. Health Insurance Coverage and the Affordable Care Act. September 22, 2015. <http://aspe.hhs.gov/sites/default/files/pdf/111826/ACA%20health%20insurance%20coverage%20brief%2009212015.pdf>

## HIGH-BURDEN HEALTH CONDITIONS AND EVIDENCE-BASED INTERVENTIONS

The following is a list of six high-burden health conditions with 18 effective interventions that CDC is prioritizing to improve health and control health care costs.



### REDUCE TOBACCO USE

- Expand access to evidence-based tobacco cessation treatments, including individual, group, and telephone counseling and FDA-approved cessation medications—in accordance with the 2008 Public Health Service Clinical Practice Guidelines.
- Remove barriers that impede access to covered cessation treatments, such as cost sharing and prior authorization.
- Promote increased utilization of covered treatment benefits by tobacco users.



### CONTROL HIGH BLOOD PRESSURE

- Promote strategies that improve access and adherence to anti-hypertensive and lipid-lowering medications.
- Promote a team-based approach to hypertension control (e.g. physician, pharmacist, lay health worker, and patient teams).
- Provide access to devices for self-measured blood pressure monitoring for home-use and create individual, provider, and health-system incentives for compliance and meeting of goals.



### PREVENT HEALTHCARE-ASSOCIATED INFECTIONS

- Require antibiotic stewardship programs in all hospitals and skilled nursing facilities.
- Prevent hemodialysis-related infections through immediate coverage for insertion of permanent dialysis ports.



### CONTROL ASTHMA

- Promote evidence-based asthma medical management in accordance with the 2007 National Asthma Education and Prevention Program guidelines.
- Promote strategies that improve access and adherence to asthma medications and devices.
- Expand access to intensive self-management education for individuals whose asthma is not well-controlled with guidelines-based medical management alone.
- Expand access to home visits by licensed professionals or qualified lay health workers to improve self-management education and reduce home asthma triggers for individuals whose asthma is not well-controlled with guidelines-based medical management and intensive self-management education.



### PREVENT UNINTENDED PREGNANCY

- Reimburse providers for the full range of contraceptive services (e.g., screening for pregnancy intention; tiered contraception counseling; insertion, removal, replacement, or reinsertion of long-acting reversible contraceptives (LARC) or other contraceptive devices; and follow-up) for women of child-bearing age.
- Reimburse providers or health systems for the actual cost of LARC or other contraceptive devices in order to provide the full range of contraceptive methods.
- Reimburse for immediate postpartum insertion of LARC by unbundling payment for LARC from other postpartum services.
- Remove administrative and logistical barriers to LARC (e.g., remove pre-approval requirement or step therapy restriction and manage high acquisition and stocking costs).



### CONTROL AND PREVENT DIABETES

- Expand access to the National Diabetes Prevention Program, a lifestyle change program for preventing type 2 diabetes.
- Promote screening for abnormal blood glucose in those who are overweight or obese as part of a cardiovascular risk assessment.

**For the latest information on the 6|18 Initiative visit:  
[www.cdc.gov/sixeighteen](http://www.cdc.gov/sixeighteen) or email [healthpolicynews@cdc.gov](mailto:healthpolicynews@cdc.gov)**