



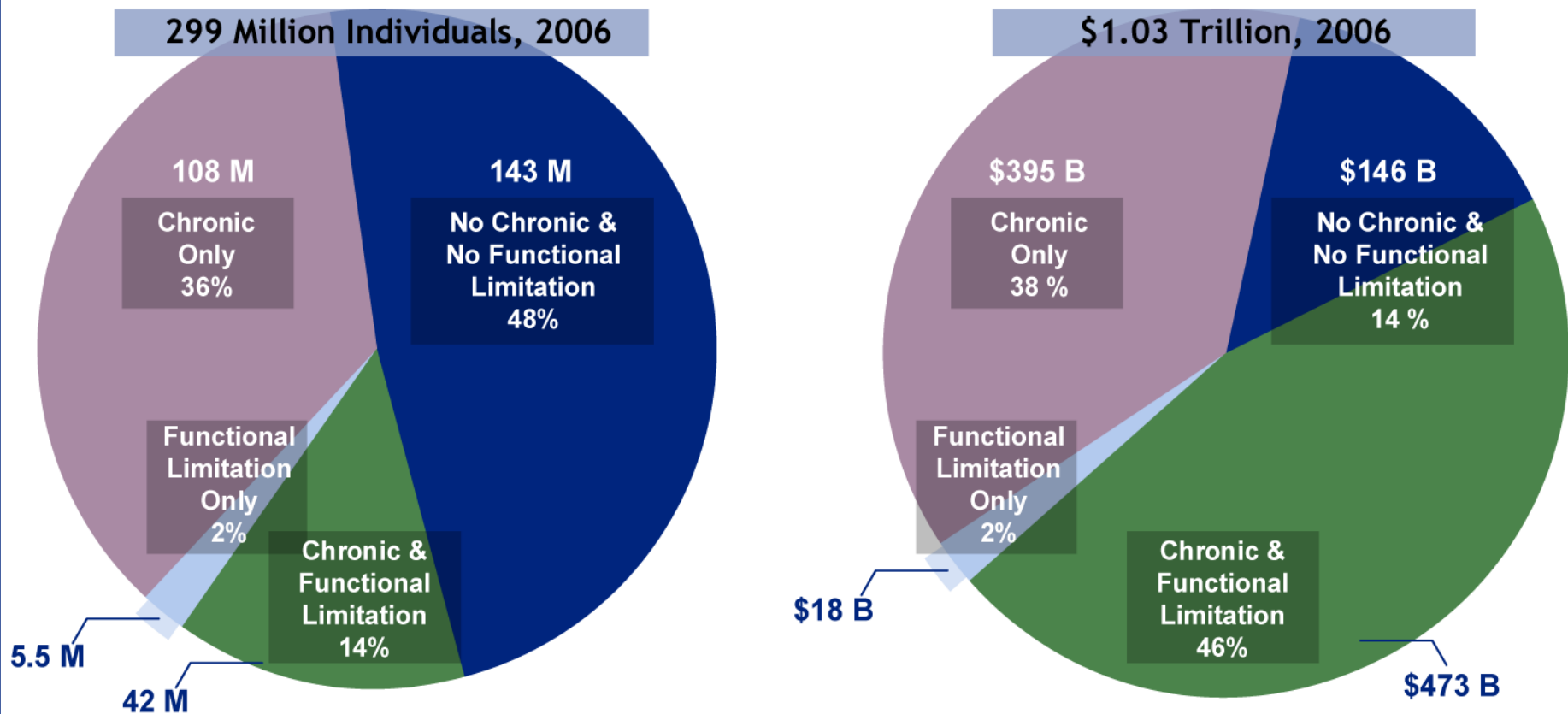
HEALTH CARE AND HUMAN SERVICES POLICY, RESEARCH, AND CONSULTING—WITH REAL-WORLD PERSPECTIVE.

Economic Value of Self-Care Programs

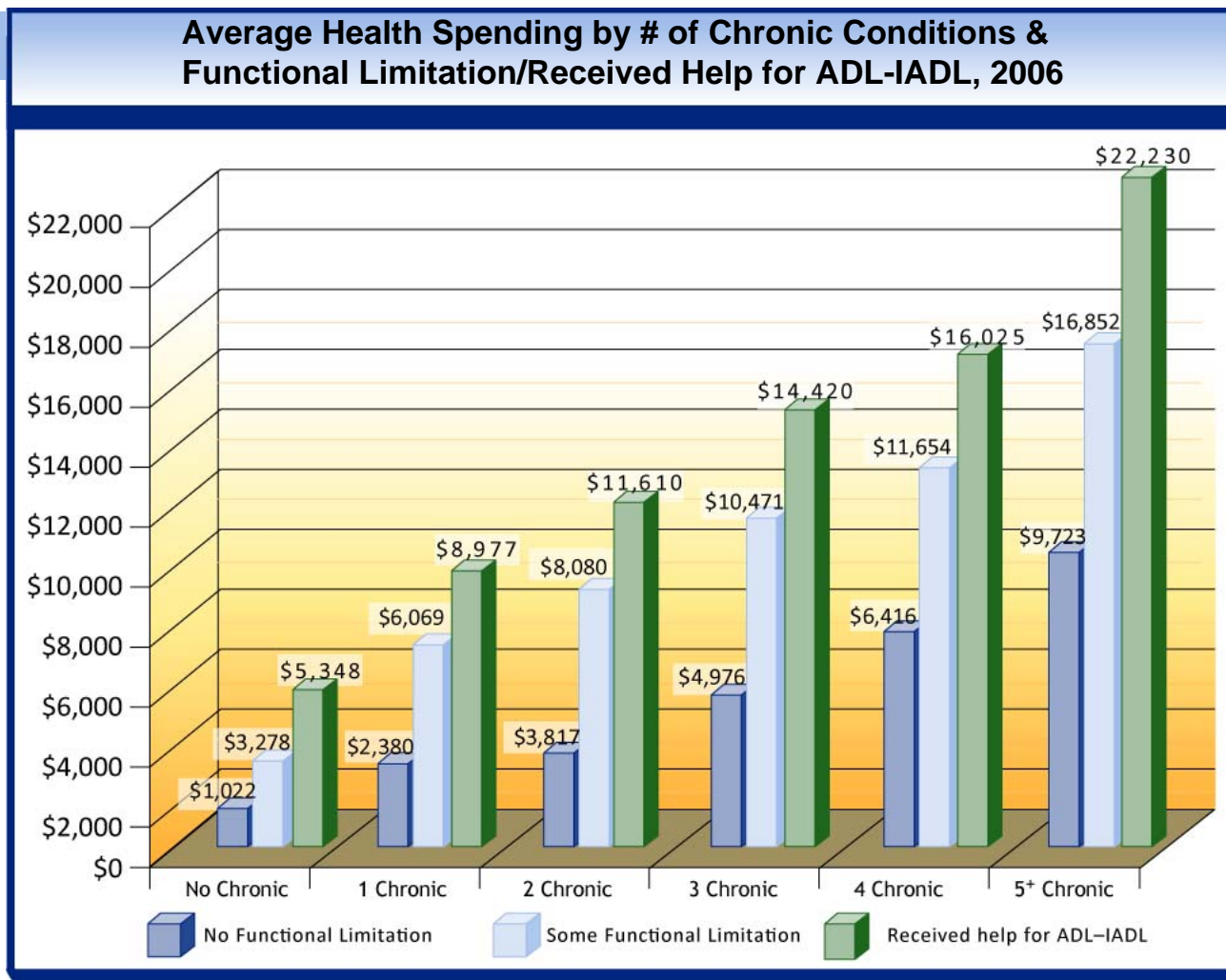
June 19, 2009

Chronic Conditions & Functional Limitations = Disproportionate Health Spending

Distribution of Individuals and Health Care Spending by Select Groups, 2006



Average Health Spending Increases with the Number of Conditions



Cost Evidence on Chronic Disease Self Management

- Literature based on classic random assignment evaluation
 - ▶ Fewer hospital days and stays, as well as emergency room visits
 - Kaiser Permanente found two year savings between \$390 and \$520 in 2001
 - ▶ Reductions in healthcare expenditures pay for the program within the first year
 - Most recent United Kingdom evaluation found £27 savings per patient (\$50)

- Real world implementation
 - ▶ U.S. peer leader approach through community-based organizations
 - Low cost intervention - \$200-\$300 per completer

http://www.healthyagingprograms.com/resources/Review_Findings_CDSMP_Outcomes1.8.08.pdf
<http://jech.bmj.com/cgi/content/full/62/4/361>

Applying Evidence to Estimate Impact & Implement

■ Legislative Proposal - Project 2020

- ▶ Invest \$304M over 5 years (\$966M over 10 years) in evidence-based interventions to reduce chronic disease and disability
- ▶ Reach 1.2 million people over 5 years (4.1 million over 10 years)
- ▶ Save Medicare \$300M over and above investment (\$1.2B over 10 years)

■ Calculator for individual programs

- ▶ Allows the program to calculate their cost per participant/completer

http://www.nasua.org/issues/federal_policy/project_2020.html



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