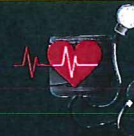# THE 6|18 INITIATIVE

Accelerating Evidence into Action

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

This initiative began with a focus on 6 high-burden health areas and 18 evidence-based preventive interventions. Over time, the number of health areas and interventions will change, but the name 6|18 will remain the same.

» To learn more, contact the CDC Office of the Associate Director for Policy at healthpolicynews@cdc.gov.

The Centers for Disease Control and Prevention (CDC) is partnering with health care purchasers, payers, and providers to accelerate the adoption of evidence-based prevention interventions to improve health and control health care costs. This effort extends the reach of proven interventions that prevent chronic and infectious diseases by increasing their coverage, access, utilization and quality. This initiative will align evidence-based preventive practices with value-based payment and delivery models.

Six high-burden health conditions are targeted: tobacco use, high blood pressure, healthcare-associated infections, asthma, unintended pregnancy, and diabetes. Within these six areas, specific interventions are highlighted below.

HIGH-BURDEN HEALTH CONDITIONS AND EVIDENCE-BASED INTERVENTIONS

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 actual cost of providing 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.