

# Evidence-Based Interventions: Expand Prevention, Improve Population Health

## The 6/18 Initiative

CDC is partnering with purchasers, payers and providers to accelerate the adoption of evidence-based prevention that will improve health and control costs. This initiative will extend the reach of proven interventions to those at risk of chronic and infectious disease and premature death, by increasing access to, and utilization and quality of preventive care. The overall goal is to align evidence-based preventive practices with value-based payment and delivery models to improve population health.

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



### High-Burden Health Conditions and Evidence-based Interventions

- **Control and Prevent Diabetes**
  - Expand access to the National Diabetes Prevention Program, a lifestyle change program for preventing type 2 diabetes.
  - Refer adults who are overweight or obese and have additional cardiovascular disease (CVD) risk factors to intensive behavioral counseling interventions to promote a healthful diet and physical activity for cardiovascular disease prevention.
- **Reduce Tobacco Use**
  - Expand access to evidence-based tobacco cessation counseling and treatments, including individual, group, and telephone counseling and FDA-approved cessation medications—in accordance with the 2008 Public Health Service Clinical Practice Guidelines—and increase cessation counseling and medication utilization among tobacco users and health care providers.
- **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 (SMBP) for home-use and create individual, provider, and health-system incentives for compliance and meeting of goals.
- **Prevent Healthcare-Associated Infections (HAI)**
  - 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, including improved access to asthma medications and devices.
  - Expand access to intensive self-management education for individuals whose asthma is not well-controlled with evidence-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 medical management and intensive self-management education.
- **Prevent Unintended Pregnancy**
  - Provide payment for the full range of contraceptive services for women of child-bearing age, (i.e., screening for pregnancy intention; tiered contraception counseling; insertion removal, replacement or reinsertion of Long-Acting Reversible Contraceptives [LARC] or other devices, and follow-up).
  - Reimburse for immediate postpartum insertion of LARC, unbundled from other postpartum service.
  - Improve access to LARC provision by removing pre-approval requirement or step therapy restrictions.



To learn more, contact the CDC Office of the Associate Director for Policy at [healthpolicynews@cdc.gov](mailto:healthpolicynews@cdc.gov).

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