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Addressing S.C.'s 'chronic curve'

A recent study published in *Diabetes Care* predicts diabetes will double in the next 25 years, which would equate to roughly 21 percent of S.C. residents developing this chronic illness. The report underscores what many within the health care industry have said for years: Rising prevalence of chronic conditions such as diabetes threatens the sustainability of our health system.

To truly bend the curve of health costs, local efforts must provide better support for those with chronic conditions. The rising cost of health care is not a coverage issue as much as it is a chronic issue.

This "chronic curve" of rising costs is perhaps most evident in the country's largest health insurer, Medicare. Seniors with multiple chronic conditions are among Medicare's most costly, accounting for more than 75 percent of program spending. That's 11 percent of the federal budget.

To make matters worse, a half million S.C. seniors in traditional Medicare with chronic conditions simply fall through the cracks, suffering repeat admissions to the hospital and experiencing a frustrating and downward spiral of progressively poorer health and sky-rocketing medical costs.

What can be done? The answer lies in coordinated approaches that provide meaningful support and added services, allowing seniors diagnosed with diabetes, heart failure and other

illnesses to improve their quality of life, receive better care and spend less time in the hospital.

Coordinated health plans in

Medicare can successfully control costs and reduce preventable hospitalizations for those with chronic illnesses. In a recent analysis from Johns Hopkins-affiliated researchers, recipients of these programs were 27 percent less likely to be readmitted after a hospitalization, and 87 percent less likely to suffer a preventable ER visit.

For too long, Medicare and some health insurers have shown little interest in proactively managing care, being content to simply fulfill the insurance role of collecting premiums and paying medical bills. No more. We must apply the tools of preventive care, care coordination and disease management to improve patient outcomes.

Health reforms encouraging innovation in chronic care within Medicare will have a ripple effect throughout the health insurance industry. Revamping Medicare to better encourage support of the chronically ill and improve the quality of care they receive should be the basis of any health reform package looking to have a meaningful impact on costs.

Mr. Serini is executive vice president of Care Improvement Plus, which operates the largest Medicare Advantage special needs plan in South Carolina.



Paul Serini

Guest Columnist



CARE IMPROVEMENT PLUS

Specialized Care for Medicare Beneficiaries