

- Improve requirements for screenings and referrals to CDSME and falls prevention interventions, including specific protocols, recommended best processes and practices, and use of CDC's STEADI tool.
  - Develop billing codes for falls risk assessments and patient activation assessments
  - Develop standards for post-visit follow-up to better ensure compliance with the including dual eligible. Evidence-based interventions and incentives to promote healthy aging and behavior change for this population has great potential to reduce Medicare spending and improve lives.
- 2. Add second falls as a Hospital Readmissions Reduction Measure**
- A measure should be added to the Hospital Readmissions Reduction Program - a second fall could incur fractures, brain injuries and other injuries resulting from a fall and is a sign of high risk and need for post-acute community care transitions coaching in the home.
- 3. Provide assistance to states on how to incorporate evidence-based healthy aging programs within their Medicaid programs.**
- The Medicaid Innovation Accelerator Program could provide a platform to deliver technical assistance on these issues to states. Several states have successfully incorporated evidence-based healthy aging programs within their Medicaid programs. Some have included CDSME in HCBS waiver programs; others have sought to include these programs within Medicaid managed care and duals integration demonstrations.

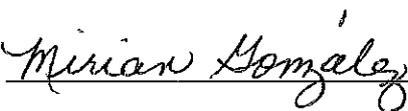
In closing, selected outcomes from our most highly disseminated evidence-based programs show savings in medical costs:

1. Chronic Disease Self-Management Education Program
  - Per capita savings of \$364 in reduced emergency room visits and hospitalization
2. Matter of Balance
  - Per capita savings of \$938 in total medical costs per year
3. EnhanceFitness
  - Per capita savings of \$945 in total medical costs per year per person

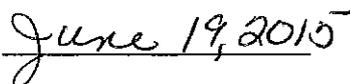
Implementing the above recommendations could further reduce costs and increase reach to those most in need of these proven programs.

Thank you for consideration of these recommendations that will empower Medicare beneficiaries with chronic conditions to live with more dignity and independence, having their health self-management needs met reliably and well, both in the health care setting and in their communities.

Sincerely,



Signature



Date

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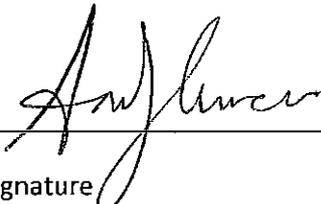
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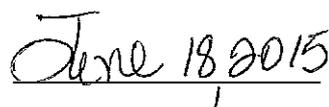
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