



The Urgent Need for Better Care

Successfully reforming health care requires putting patients first and improving how their care is delivered. This is particularly important for people with multiple chronic conditions who make heaviest use of the health care system, at the highest cost, but with the poorest outcomes. While these complex patients exist in every age group, they are heavily concentrated among older adults.

Lawmakers took the monumental first step to address the challenges in our complex health care system by passing reform. Now, the Campaign for Better Care is taking the essential next step. It will work to ensure that the needs of patients and their family caregivers are front and center in the delivery of health care and, specifically, that vulnerable older adults with multiple health conditions get the *comprehensive, coordinated, and patient- and family-centered health care* they want and deserve.

Older adults with multiple chronic conditions face enormous hurdles in getting the care they need:

- They make 37 visits to 14 different doctors who prescribe 50 separate prescriptions in the course of a year.⁴ *But that does not mean they get the care they want or need.*
- The majority of these patients receive duplicative tests and procedures, different diagnoses from different physicians, and contradictory information on how to manage their conditions – because their doctors do not talk to each other or coordinate all of the care.⁵ *And they do not get better.*
- They experience complications from inappropriately prescribed medications, suffer from preventable medical errors, and are frequently hospitalized for conditions that could be treated in ambulatory settings – because no one is responsible for managing their care.⁶ *Their lives are put at risk.*
- When they are discharged from the hospital, they go home without the information, support, and follow-up they need to take care of themselves. As a result, one in 10 is readmitted to a hospital within 15 days and one in five is back in the hospital within 30 days.⁷ *They are getting sicker.*
- They and their families are left on their own to find and arrange the non-medical services they need to live at home and stay out of the hospital or nursing home. *They feel abandoned and overwhelmed.*

The key elements of health care reform, designed to change the way we pay for and deliver care, provide a unique opportunity to reorient our health care system to address the enormous challenges associated with those sobering facts. The Campaign for Better Care is working to ensure that reform is implemented with the patient and family in mind. If we can make the health care delivery system work for these most vulnerable older adults, we can make it work for everyone.

The Campaign for Better Care

The Campaign for Better Care will go beyond the statistics about chronic illness to put a human face on the issue, to mobilize and engage patients and families to fight for the care they want and need, and to bring the voice of the consumer to policy debates over health care reform and how to implement any new legislation. The goals of the Campaign are to:

1. Make improvements in the health care system so that it delivers high quality, comprehensive, and coordinated care, especially for vulnerable older adults and people with chronic conditions.
2. Build a strong and lasting consumer voice for better health care by mobilizing consumer advocates, older adults, and their families.

The Burden of Chronic Illness:

- Nine in ten older Americans (age 65+) have at least one chronic health condition and 77% have multiple chronic conditions.¹
- Large numbers of older people with multiple health conditions report duplicate tests and procedures, conflicting diagnoses, and contradictory medical information.²
- 20 percent of older people with complex chronic health conditions, like diabetes, heart disease, or severe arthritis, are readmitted to the hospital within 30 days because they go home without the information and support they need to take care of themselves, and because they get no follow-up care.³

Campaign Overview

The multi-year, multi-faceted Campaign for Better Care includes the following components:

- *Policy Agenda* – The Campaign’s policy agenda focuses on improving the delivery of health care so that it better serves the most vulnerable among us who are at the highest risk of poor care and high costs, especially older adults. The policy components reflect what older patients and families want and need – a system that is truly patient- and family-centered, comprehensive and well coordinated, anchored in primary care, and linked to community supports. Over the past year, we have led successful coordinated efforts with other consumer groups and stakeholders to embed essential elements of this policy agenda into the health care reform law, including provisions that define patient-centered care, assure a consumer voice in implementation, and promote patient and caregiver engagement. This work on health care reform will be the foundation for the Campaign’s continuing advocacy to implement delivery system reforms that will ultimately improve care for vulnerable older adults.
- *National Consumer Coalition* – A broad-based coalition of national and state consumer organizations has been formed, representing diverse constituencies with a stake in improving the health, economic security, and quality of life of vulnerable older adults and their family caregivers. The breadth and diversity of the coalition will make it a powerful force for achieving the Campaign’s goals, building broad public support, and ensuring that consumers shape the ongoing implementation of new health care policies, and the continuous improvement of health care delivery.
- *Grassroots Mobilization* – Working through and in complement to the National Consumer Coalition, the Campaign will engage (online and on-the-ground) a broad array of consumer advocates and grassroots supporters – older adults and their caregivers – as activists for better care. Campaign partner Community Catalyst is building diverse state-based coalitions of advocacy organizations and activists in 6 states (MA, ME, OH, PA, NC, WI) in support of the Campaign’s policy agenda. These target states will form the initial core of a nation-wide network of advocates and activists who both support the Campaign’s national policy agenda and shape policy and delivery in their own states and communities.
- *Partnerships and Alliances* – The Campaign and its partners, Community Catalyst and the National Health Law Program (NHeLP), are aligned with and complementary to a range of post-health care reform “implementation” activities of other stakeholders and progressive advocacy groups. The Campaign also draws on the expertise of a range of advisors from the clinical, policy research, and other stakeholder communities.
- *Messaging and Communications* – The Campaign’s message research and communications strategy will support all aspects of the Campaign’s advocacy and mobilization efforts. The Campaign will use individual and real-life stories to be the compelling “Face” of the Campaign and to convey the urgent need to improve our health care delivery system so that it meets the needs of older adults and their family caregivers.

Join Us

Get involved in the Campaign for Better Care. Contact Lynn Feinberg, Campaign Director, at the National Partnership for Women & Families at (202) 986-2600 or lfeinberg@nationalpartnership.org.

About Us

Founded in 1971, the National Partnership for Women & Families is a nonprofit, nonpartisan consumer advocacy organization that promotes access to quality health care, fairness in the workplace, and policies that help women and men meet the dual demands of work and family. The Campaign for Better Care is supported by The Atlantic Philanthropies. More at: www.CampaignforBetterCare.org.

¹ Machlin, S., Cohen, J. & Beauregard, K. (May 2008). *Health Care Expenses for Adults with Chronic Conditions, 2005*. Statistical Brief #203. Agency for Healthcare Research and Quality.

² Partnership for Solutions, Johns Hopkins University (2007). Chart Book, *Chronic Conditions: Making the Case for Ongoing Care*.

³ Jencks, Stephen F., Williams, Mark, & Coleman, Eric. (April 2009). *Rehospitalizations Among Patients in the Medicare Fee-for-Service Program*. *New England Journal of Medicine*, 360 (14): 1418-28.

⁴ Partnership for Solutions (2002). “Multiple Chronic Conditions: Complications in Care and Treatment,” and Berenson, R., & Horvath, J. (2002). “The Clinical Characteristics of Medicare Beneficiaries and Implications for Medicare Reform,” at www.partnershipforsolutions.org. Applies to older adults with five or more chronic conditions.

⁵ Partnership for Solutions, op cit.

⁶ *ibid*

⁷ Jencks, S., Williams, M., & Coleman, E., op cit.