

Readers' Forum

To the Editor:

There is no shortage of statistics about the obesity epidemic our nation faces. North Carolina is no stranger to this issue—just look around us as we shop at grocery stores or sit in doctors' offices to be treated for chronic conditions. Last year the Trust for America's Health ranked North Carolina as having the 17th highest rate of adult obesity and the 5th highest rate of overweight youths (ages 10-17) in the nation. We are taking personal risks by gaining excess weight, eating unhealthy foods, and not getting enough exercise. The costs to a person's life span are staggering, and that includes the high cost of health care needed to offset these lifestyle choices.

In response to this trend, Blue Cross and Blue Shield of North Carolina (BCBSNC) launched the Healthy Lifestyle Choices program [see also *North Carolina Medical Journal*, July/August 2006, pages 313-315]. This preventive health program began as a pilot program to help engage participants in regular exercise and nutritious eating. As part of our effort, participants received a personalized report on opportunities for lifestyle improvement, a diary to record food intake and physical activity, a step counter, a tape measure (to track waist circumference), a newsletter, and other educational materials. BCBSNC also provided physician toolkits for the treatment of obesity to 200 high-volume primary care practices. We acknowledged the critical role of the patient's physician by providing reimbursement for up to 4 office visits for the evaluation of obesity as a sole diagnosis.

Recently released results of a 2-year follow up study (2005-2006) compared the impact our Healthy Lifestyle Choices program had on the medical costs and behaviors of almost 1200 participants. Simple lifestyle changes added up to big savings—almost \$200 annually per participating member in the Healthy Lifestyle Choices program. Savings over the 2-year period totaled close to \$450 000. That translated into medical expenses that were one-third less than the average medical trend. The implication is that living a healthier lifestyle can save money.

Our findings are even more startling when you consider the significant impact our choices and habits have on the cost of health care. In fact, in 2004 BCBSNC found that members who are overweight cost the company 18% more than normal weight members in medical claims and expenses, and obese



members cost 32% more. Preventive health programs offered by BCBSNC aim to curb that trend.

Results of the Healthy Lifestyle Choices program hit not only the bottom line, but also waistlines. Of those participants with a weight loss goal, 49% lost an average of 11.6 pounds. In addition, waist circumference decreased one-half inch for participants on average. Participating members also had real success in increasing the number of days exercised per week and in increasing consumption of fruits and vegetables to two or more times per day.

The success of the program led BCBSNC to expand its healthy living offerings into our comprehensive Member Health Partnerships program, which gives members access to a wide variety of health and disease management resources. Recently added benefits include one-on-one health coaching, where members can talk to a registered nurse about losing weight, chronic conditions, or other health issues. Most members who enroll also have access to 6 free nutritional visits. We believe these approaches are, along with physician advocacy, helping to drive changes in behavior.

The results have exceeded our expectations with the emphasis on long-term lifestyle changes to help people improve their health and manage their costs. It is encouraging to see that participants are making healthier lifestyle changes in both diet and exercise. Nutrition visits are growing quickly. We are on the right track, working with a full range of health care team members to help patients/members manage their weight and weight-related health issues.

While these results are encouraging, we have only scratched the surface of the problem. In order to inculcate true lifestyle changes we need to engage members/patients not only at home but at work and school. This is a family project in the broadest sense. In the meantime, BCBSNC will continue to offer members tools and resources to help them, working with their doctors, make the best choices for their own health. It's a marathon, not a sprint.

Don Bradley, MD
Chief Medical Officer and Senior Vice President
Blue Cross and Blue Shield of North Carolina

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To the Editor:

In your Readers' Forum section of the September/October 2007 *Journal* one of your readers commented on the shortage of family physicians in the United States. He was quite correct in this evaluation and suggested solutions. One very important point he did not mention is the role that physician assistants and nurse practitioners will play in the care of sick Americans. I strongly believe these professionals will play an extraordinary role in the new health reform in this country. It is very well-known that many



minor illnesses can be taken care of by these practitioners; they listen to the patient, perform a physical examination, and diagnose and treat the illness. The successful results of the retail or minute clinics is the best proof of what the aforementioned practitioners can do to cut the cost of the increasing expenses of our health care. Of course this is only one factor in our broken system; the whole problem is more complex.

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Publishers of the *North Carolina Medical Journal*

The North Carolina Institute of Medicine

In 1983 the North Carolina General Assembly chartered the North Carolina Institute of Medicine as an independent, nonprofit organization to serve as a nonpolitical source of analysis and advice on issues of relevance to the health of North Carolina's population. The Institute is a convenor of persons and organizations with health-relevant expertise, a provider of carefully conducted studies of complex and often controversial health and health care issues, and a source of advice regarding available options for problem solution. The principal mode of addressing such issues is through the convening of task forces consisting of some of the state's leading professionals, policy makers, and interest group representatives to undertake detailed analyses of the various dimensions of such issues and to identify a range of possible options for addressing them.

health policy
North Carolina Institute of Medicine

The Duke Endowment

The Duke Endowment, headquartered in Charlotte, NC, is one of the nation's largest private foundations. Established in 1924 by industrialist James B. Duke, its mission is to serve the people of North Carolina and South Carolina by supporting programs of higher education, health care, children's welfare and spiritual life. The Endowment's health care grants provide assistance to not-for-profit hospitals and other related health care organizations in the Carolinas. Major focus areas include improving access to health care for all individuals, improving the quality and safety of the delivery of health care, and expanding preventative and early intervention programs. Since its inception, the Endowment has awarded \$2.2 billion to organizations in North Carolina and South Carolina, including more than \$750 million in the area of health care.

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