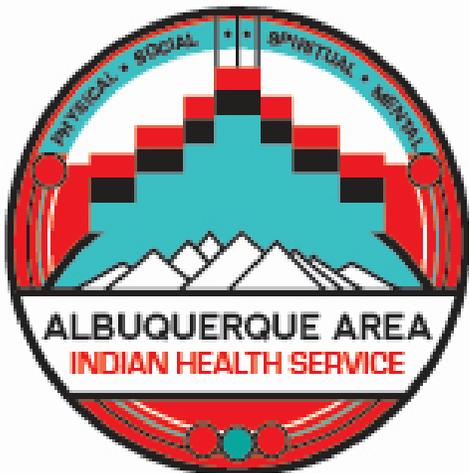


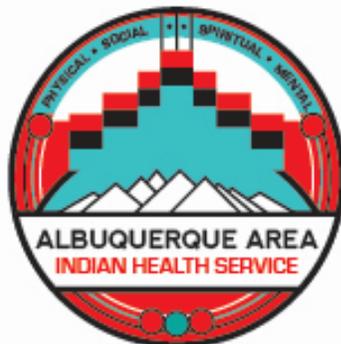


Leveraging the Million Hearts® Initiative Making the Community Connection



Financial Disclosure

The authors of this presentation declare that no conflict of interest exists in financial or other relationships.



Overview of Presentation

- Introduction
 - Theresa Clay, MS. I.H.S. ABQ Area Health Promotion Disease Prevention
- Overview of the Million Hearts® Initiative
 - Bambi Bevill, MPH, CHES. Heart Disease & Stroke Prevention Coordinator, New Mexico Dept. of Health
- Implementing MHI in communities
 - Bambi Bevill, MPH, CHES. Heart Disease & Stroke Prevention Coordinator, New Mexico Dept. of Health
- Importance of the Million Hearts® efforts
 - Elissa Caston, M.Ed.
- Wrap-up, Q&A



Objectives

Participants will:

- Obtain an overview/update of the Million Hearts® Initiative
- Receive instruction on how to implement MHI in communities
- Identify how they might engage community members in the MHI



Public Partners

- Centers for Disease Control and Prevention (co-lead)
- Centers for Medicare & Medicaid Services (co-lead)
- Administration for Children and Families
- Administration for Community Living
- Agency for Healthcare Research and Quality
- Environmental Protection Agency
- Food and Drug Administration
- Health Resources and Services Administration
- Indian Health Service
- National Heart, Lung, Blood Institute
- National Institute for Neurological Diseases
- Offices of Minority Health
- Office of the National Coordinator for Health Information Technology
- Office of Personnel Management
- Substance Abuse and Mental Health Services Administration
- U.S. Department of Veteran's Affairs
- State and Local governments

Private Support

- Health care systems
- Clinicians
- Professional organizations
- Faith-based organizations
- Tribal organizations
- Commercial payers
- Pharmacies
- Employers
- Health advocacy groups
- The New Mexico Million Hearts® workgroup – meets November 13 & December 16 - Albuquerque



Million Hearts®

**Goal: Prevent 1 million heart attacks
and strokes by 2017**

- US Department of Health and Human Services initiative, co-led by:
 - Centers for Disease Control and Prevention (CDC)
 - Centers for Medicare & Medicaid Services (CMS)
- Partners across federal and state agencies and private organizations



Heart Disease and Stroke

Leading Killers in the United States

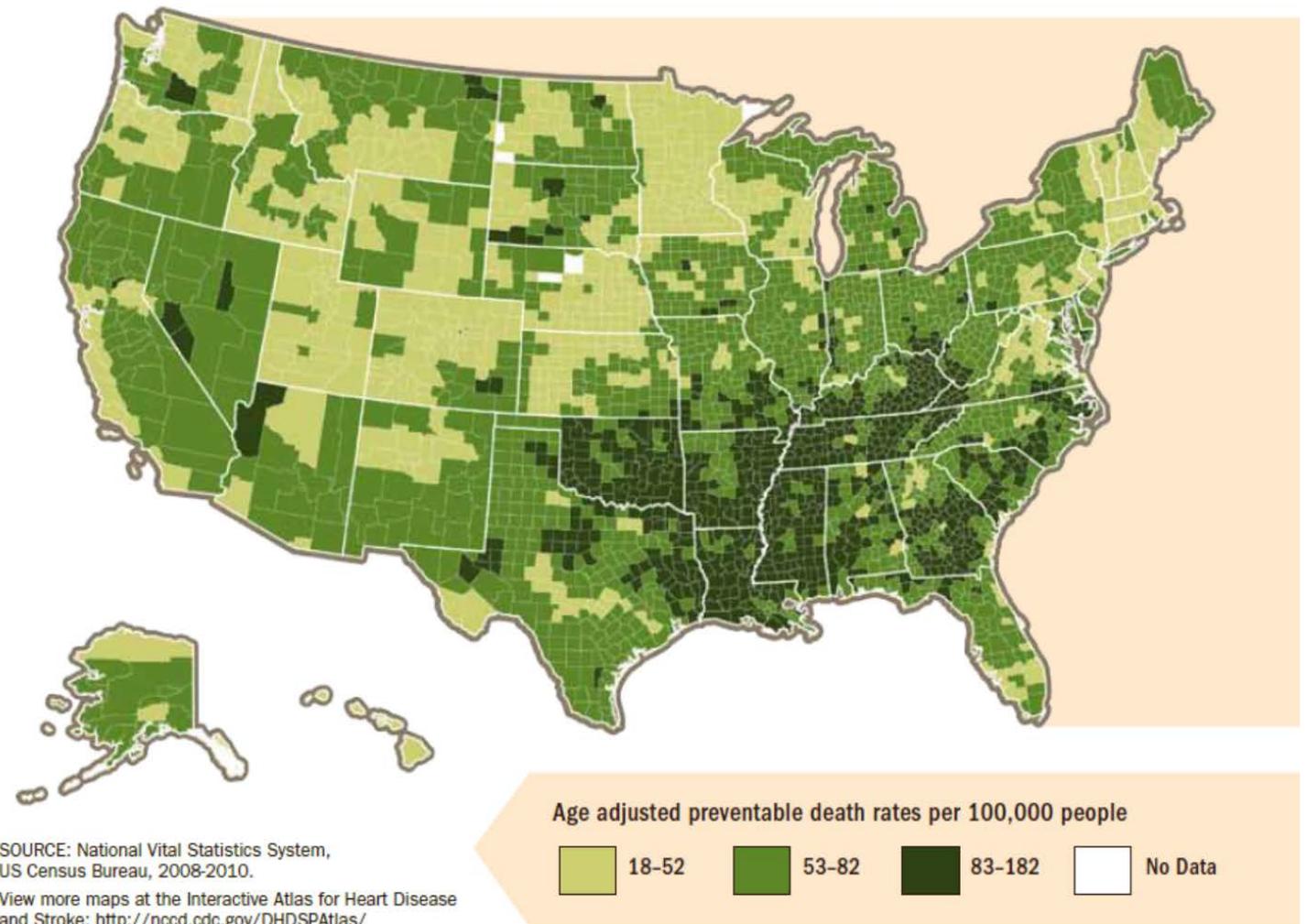
- More than 1.5 million heart attacks and strokes each year
- Cause 1 of every 3 deaths
 - 800,000 cardiovascular disease deaths each year
 - Leading cause of preventable death
 - \$315.4B in health care costs and lost productivity
- Leading contributor to racial disparities in life expectancy



200,000 Preventable Deaths from Heart Disease and Stroke

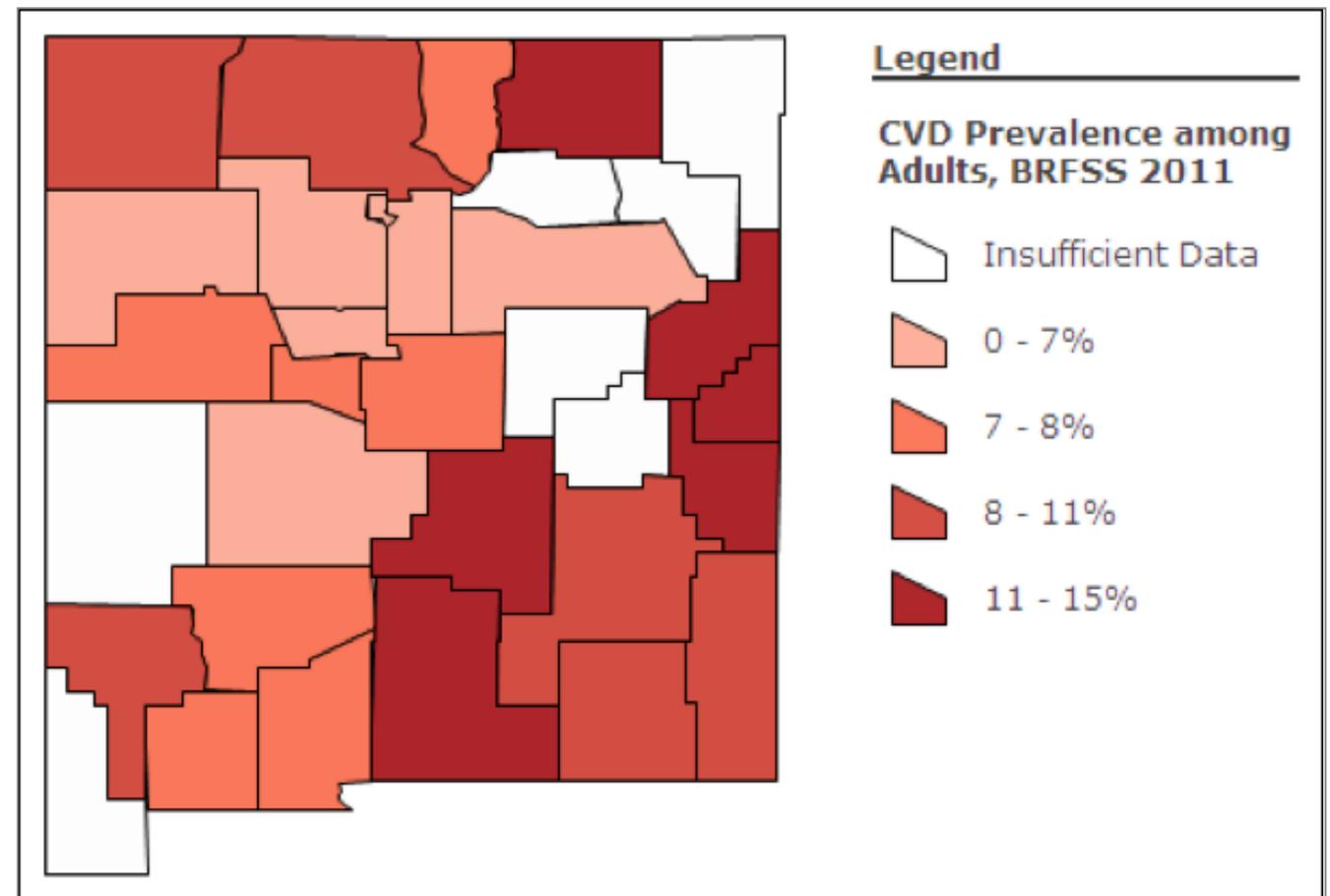
- Many of the deaths caused by heart disease and stroke are preventable
- Preventable deaths are those attributed to lack of preventive health care or timely and effective medical care

Counties in southern states have the greatest risk overall



CVD: The burden in New Mexico

- CVD – Cardiovascular Disease
- Approximately 4000 deaths per year due to heart disease and stroke
- Heart Disease = the leading cause of death
- Stroke = the 5th leading cause of death
- Some risk factors
 - ✓ Overweight & Obesity
 - ✓ Sedentary life style
 - ✓ High blood pressure & high cholesterol
 - ✓ Tobacco use



CVD among New Mexican adults, by county, 2011

Source: New Mexico Behavioral Risk Factor and Surveillance Survey, CDC 2011, self reported history of coronary heart disease, heart attack and/or stroke. NMDOH IBIS for Public Health website: ibis.health.state.nm.us

PREVENTION

Prevention

- **Prevention** includes a wide range of activities, known as “interventions,” aimed at reducing risks or threats to health. These are usually grouped into 3 categories:
- **Primary** - designed to prevent a disease or condition (such as a heart attack), from occurring in the first place.
 - e.g. education about good nutrition, the importance of regular exercise, and the dangers of tobacco, alcohol and other drugs.
 - e.g. regular exams and screening tests (such as a blood pressure screening), to monitor risk factors for illness.
- **Secondary** - these interventions happen after an illness or serious risk factors have already been diagnosed. The goal is to halt or slow the progress of disease (if possible) in its earliest stages.
 - e.g. telling people to take daily, low-dose aspirin to prevent a first or second heart attack or stroke
 - e.g. recommending regular exams and screening tests (such as scheduled blood pressure monitoring for someone diagnosed with hypertension), in people with known risk factors for illness.
- **Tertiary** - this focuses on helping people manage complicated, long-term health problems such as diabetes, heart disease, and cancer. The goals include preventing further physical deterioration and maximizing quality of life.
 - e.g. cardiac or stroke rehabilitation programs, patient support groups.



Health Disparities

- African-Americans develop high blood pressure more often, and at an earlier age, than whites and Hispanics do.
- African-Americans are nearly twice as likely as whites to die early from heart disease and stroke.
- American Indians and Alaska Natives die from heart diseases at younger ages than other racial and ethnic groups in the United States. 36% of those who die of heart disease die before age 65.

Source:

Go AS, Mozaffarian D, Roger VL, et al. [Heart disease and stroke statistics—2013 update: a report from the American Heart Association](#). *Circulation*. 2013;127:e6–245.

Morbidity and Mortality Weekly Report (MMWR): Vital Signs: Avoidable Deaths from Heart Disease, Stroke, and Hypertensive Disease — United States, 2001–2010

SS Oh, JB Croft, KJ Greenlund, C Ayala, ZJ Zheng, GA Mensah, WH Giles. Disparities in Premature Deaths from Heart Disease—50 States and the District of Columbia. *MMWR* 2004;53:121–25. <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5306a2.htm>



Key Components of Million Hearts®

Keeping Us Healthy
Changing the environment

Health
Disparities

Excelling in the ABCS
Optimizing care



Focus on
the ABCS



Health tools
and technology



Innovations in
care delivery



The ABCS to Prevent Heart Attacks and Strokes

Aspirin

People who have had a heart attack and stroke who are taking aspirin

Blood pressure

People with hypertension who have adequately controlled blood pressure

Cholesterol

People with high cholesterol who are effectively managed

Smoking

People trying to quit smoking who get help



Action Steps: Healthcare Systems

Improved Clinical Quality Care

- Achieve excellence in the ABCS
- Adopt and report on the Million Hearts® Clinical Quality Measures
- Provide timely feedback on performance to the clinical teams
- Recognize and reward high performing teams
- Implement systems to alert clinicians of patterns of high blood pressure, high cholesterol, and smoking status of patients.
- Support titration of hypertension and cholesterol medications by clinical team members via a physician-approved protocol



Health Care systems

Optimizing care: Care Innovations

- Team-based care
 - Utilizing full scope of practice (**including CHW, CHR, Promotoras, EMS personnel**)
 - Collaborative Drug Therapy Management
- Self-measured BP monitoring with clinical support
- Payment for improved health outcomes from innovative models of care

Achieving Excellence In The ABCS Can be attained by the following groups

- State & local governments – ie: NMDOH
- Healthcare systems
- payers
- Clinicians, nurses, medical office staff, dentists, community health workers, **Pharmacists/ pharmacies**
- Employers
- Faith based organizations
- Other community groups



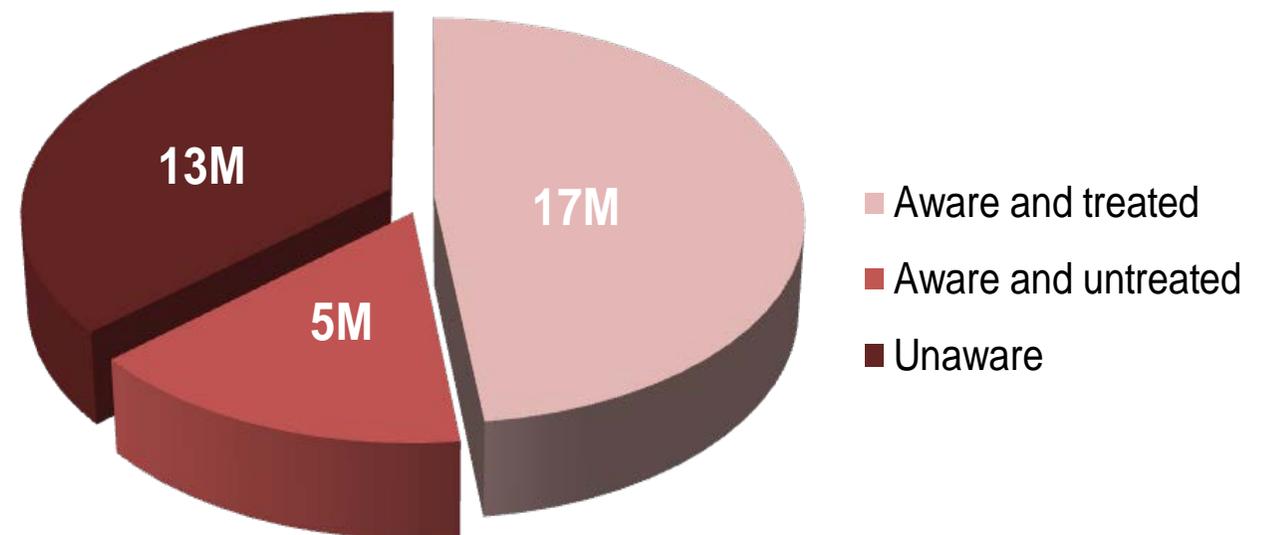
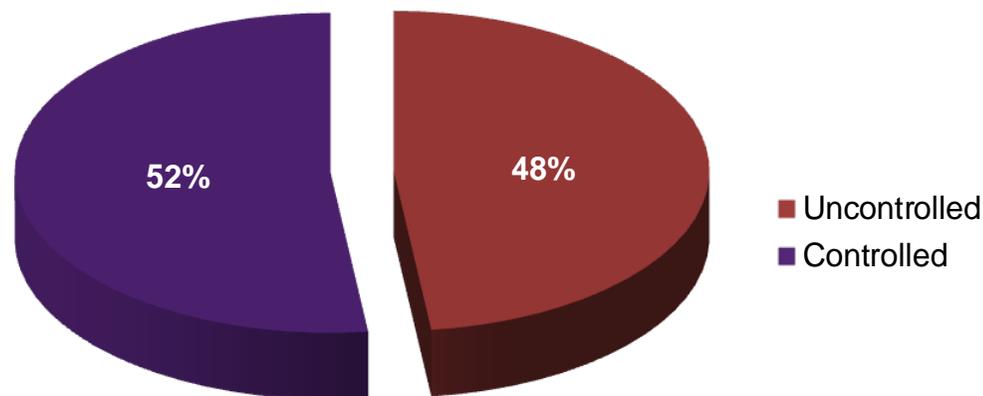
NM Million Hearts – the B&S

B – Blood Pressure control

- Almost 30% of New Mexicans report having high Blood Pressure (HTN) – a risk factor for heart attack and stroke.
- Many people are not aware they have HTN, and often, those who are aware do not have HTN under control

35 MILLION US ADULTS WITH UNCONTROLLED HYPERTENSION

Fewer than half of Americans with HTN have it under control



NM Million Hearts – the B&S

S – Smoking cessation

- Smoking is the leading preventable cause of death in the United States.
- One in five adults and one in five youth smoke in New Mexico.
- About half of all lifetime smokers will die early because of their tobacco use. In New Mexico, about 2,100 people die from tobacco use annually and another 42,000 are living with tobacco-related diseases.
- Annual smoking-related costs in New Mexico are \$954 million (\$461 million in direct medical costs and \$493 million in lost productivity).
- NMDOH Tobacco Use Prevention & Control Program offers a free, online training, “Treating Nicotine Dependence in New Mexico” – ***nmtupac.com***, ***“health care professional” sideline.***

1800 QUITNOW

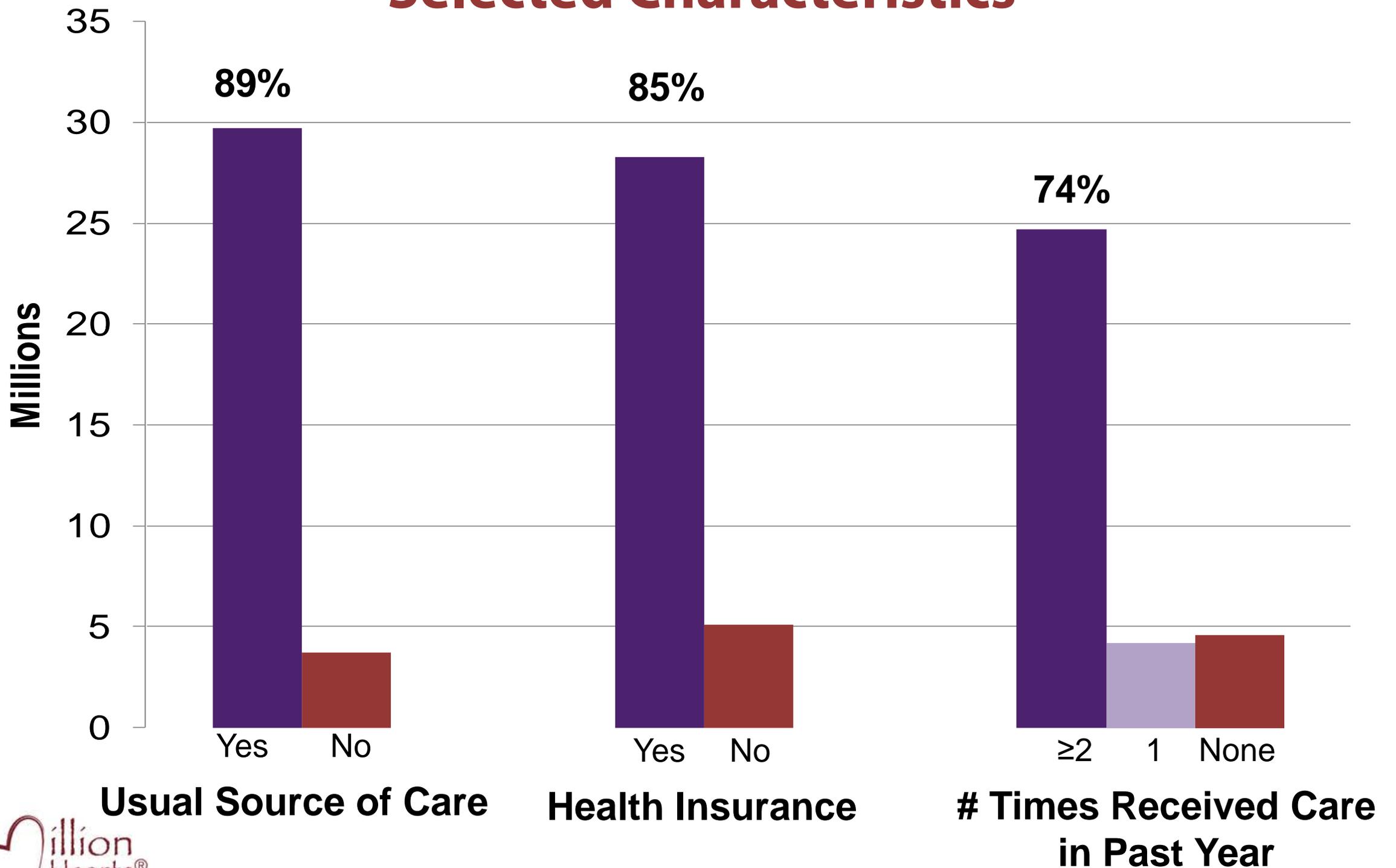
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Prevalence of Uncontrolled Hypertension by Selected Characteristics



Source: National Health and Nutrition Examination Survey 2009-2012.



Implementing Million Hearts® In Communities

Action Steps: State and Local Governments Achieving Excellence In The ABCS

- Convene and collaborate with stakeholders across public health and healthcare in order to enhance effectiveness and efficiency of efforts to prevent heart attack and stroke
- Increase awareness of preventability of heart disease and stroke and their risk factors
- Adopt and report on the Million Hearts® Clinical Quality Measures
- Increase efforts to reduce sodium and eliminate trans fats in the food supply
- Promote smoke-free air policies, effective tobacco package labeling, restricted tobacco advertising, and higher tobacco prices to help smokers quit and keep nonsmokers tobacco-free.



Action Steps: Employers

Achieving Excellence In The ABCS

- Provide health insurance coverage with no or low out-of-pocket costs for
 - hypertension or cholesterol medications
 - home blood pressure monitoring devices with clinical support
 - prescription tobacco cessation medications and FDA- approved over-the-counter nicotine replacement products
- Provide one-on-one or group lifestyle counseling and follow-up monitoring for employees with high blood pressure or prehypertension, or high cholesterol
- Have a written policy banning tobacco use at worksites
- Make most of food and beverage choices available in vending machines, cafeterias, snack bars, or other purchase points be healthier food items.



Action Steps: Communities & Other Organizations

Achieving Excellence In The ABCS

- Designate a Million Hearts® Advocate in the community to serve as a resource for heart health information.
- Focus on two or more of these action steps for the next year and share progress:
 - Deliver messages & materials
 - Distribute wallet cards and journals for recording blood pressure readings
 - Facilitate connections with local health professionals and community resources
 - Participate in New Mexico Million Hearts® workgroup and the NMDOH Health Systems Summit – June 4 & 5
 - For faith-based organizations, consider 100 Congregations for Million Hearts®





Importance of the Million Hearts® Efforts

If someone has diabetes they...

- are twice as likely to have heart disease or a stroke
- tend to develop heart disease at an earlier age
- can have a more serious heart attack and more likely to result in death
- can experience all of the above



Things you can change

- Having high blood pressure
- Having central obesity-waist line
- Having abnormal blood fat (cholesterol) levels
- Smoking & Diabetes both narrow the vessels
 - Can damage vessels in the legs increasing the risk for amputations



Sharing My Story



Discussion: What about YOU?

- Any other thoughts about Million Hearts®. ?
- What role do you play as a part of the healthcare team?
- How do you see yourselves being involved in preventative education and care?
- Accurately taking an individual's blood pressure is an important part of preventive care. Do you feel you are able to take accurate blood pressure readings in your day-to-day job activities? Would further training on this be useful?
- What resources do you already use to assist in an individual's preventative care? What resources do you feel would be useful, that you do NOT have?





TOOLS & RESOURCES

Million Hearts® Resources

- [Hypertension Treatment Protocols](#)
- [Hypertension Control: Action Steps for Clinicians](#)
- [Hypertension Control Champions](#)
- [Self-Measured Blood Pressure Monitoring Guide](#)
- Grand Rounds:
 - [Million Hearts® Grand Rounds](#)
 - [Hypertension Grand Rounds: Detect, Connect, and Control](#)
- [Cardiovascular Health: Action Steps for Employers](#)
- [Million Hearts® E-update](#)
- Spanish language [website](#)
- [100 Congregations for Million Hearts®](#)
- [Team up. Pressure down. program](#)
- Visit <http://millionhearts.hhs.gov/> to find other useful Million Hearts® resources.
- New Mexico Chronic Disease Prevention Council and the NM Million Hearts Workgroup - <http://chronicdiseasenm.org/>



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Contact Information

- Theresa Clay, MS I.H.S. AAO HPDP
Phone: 505.248.4772 theresa.clay@ihs.gov
- Bambi Bevill, MPH, CHES, NMDOH
Phone: 505.383.0158 Bambi.Bevill@state.nm.us
- Elissa Caston, MEd, NMDOH Diabetes Program
Phone: 505.841.5888 Elissa.caston@state.nm.us
- CAPT Wil Darwin, PharmD, I.H.S. AAO E.H.R./RPMS
Phone 505.248.4328 Wil.Darwin@ihs.gov





Thank You!

