

Creating BETTER HEALTH TOGETHER by linking clinics & community organizations



BREASTFEEDING

Breastfeeding is optimal for child health, protecting babies from disease and reducing the risk of childhood obesity.¹

- SHIP is working with 27 health care centers to support new parents to breastfeed. Eighteen SHIP clinics and hospitals are working to become recognized as Breastfeeding Friendly Maternity Centers.
- SHIP promotes breastfeeding and breastfeeding-friendly environments by working with 11 regional coalitions and the Minnesota Breastfeeding Coalition.



OBESITY

More than a quarter of adults in Minnesota are obese, increasing their risk of developing chronic diseases like type 2 diabetes and heart disease.²

- SHIP communities are collaborating with 52 clinics and community organizations to screen adults for obesity and link residents to healthy lifestyle programs, which are proven to reduce risk of obesity-related chronic diseases.



TOBACCO USE

In Minnesota, smoking is responsible for \$3.19 billion in excess medical costs each year.³

- 17 SHIP partners are working with health care providers to build systems to screen adults for tobacco use, provide counseling about quitting, and refer individuals to cessation programs and supports.



FALLS, INJURY & DEMENTIA

Falls are the leading cause of injury for older adults.⁴ SHIP works with health systems and community partners to keep seniors safe and independent.

- 24 SHIP partners offered programs like A Matter of Balance and Tai Ji Quan: Moving for Better Balance, which are proven to improve balance and reduce injury in seniors.
- SHIP worked with 8 local and regional coalitions, as well as Act on Alzheimer's, to create communities that are healthy and safe for seniors and individuals with dementia.

¹ Gartner, LM, Morton, J, Lawrence, RA, et al. (2005). Breastfeeding and the use of human milk. *Pediatrics*, 115(2), 496-506.

² Centers for Disease Control and Prevention. Behavioral Risk Factor Surveillance System, 2015. Retrieved from <https://www.cdc.gov/brfss/>.

³ Blue Cross and Blue Shield of Minnesota (2017). Health Care Costs and Smoking in Minnesota: The Bottom Line. Retrieved from <http://www.centerforpreventionmn.com/newsroom/press-releases/2017-cost-of-smoking-report>.

⁴ Bergen G, Stevens MR, Burns ER (2016). Falls and Fall Injuries Among Adults Aged ≥65 Years — United States, 2014. *Morbidity and Mortality Weekly Report*; 65:993–998.

How SHIP makes a difference

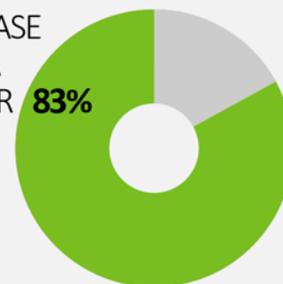
SHIP creates and strengthens connections between clinics and community organizations so Minnesotans can be healthier. SHIP works with primary care providers, hospitals, dentists and assisted living facilities to connect patients with programs – like the Diabetes Prevention Program, A Matter of Balance and others – that are proven to help people live healthier, lose weight, quit smoking or reduce their risk of falling.

SHIP programs offer tangible results

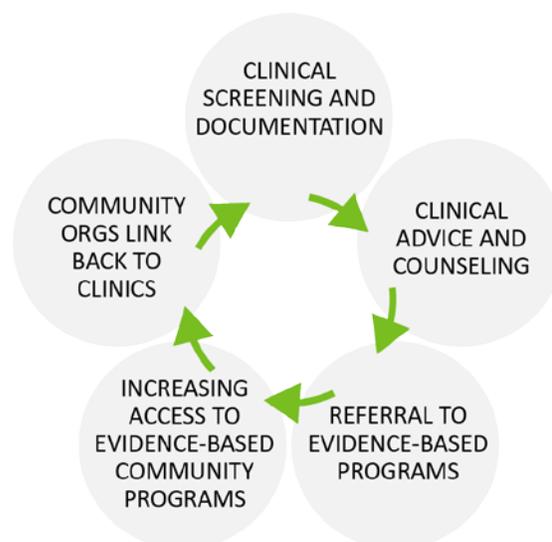
SHIP provides training for instructors and provides other support so communities can offer programs that help residents manage chronic diseases. These programs offer tangible results:

- Diabetes Prevention Program participants can cut their risk of type 2 diabetes by 58 percent by helping participants eat healthier, exercise more and lose weight.⁵
- Participation in a Matter of Balance, a program to prevent falls in older adults, is associated with a \$938 decrease in total medical costs per participant per year.⁶
- The Chronic Disease Self-Management Program is associated with potential annual health care savings of \$714 per participant.⁷
- If 90 percent of U.S. families breastfed for the first 6 months of baby's life, the nation would save \$13 billion in health care costs annually.⁸

CHRONIC DISEASE
IN MINNESOTA
ACCOUNTS FOR **83%**
OF STATEWIDE
MEDICAL
SPENDING⁹



Clinics and community organizations are creating new pathways to health



Model for clinic-community linkages.

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⁵ Diabetes Prevention Program Research Group. (2002). Reduction in the Incidence of Type 2 Diabetes with Lifestyle Intervention or Metformin. *The New England Journal of Medicine*, 346(6), 393–403.

⁶ Centers for Medicare & Medicaid Services. (2013). Report to Congress: The Centers for Medicare & Medicaid Services evaluation of community-based wellness and prevention programs under section 4202 (b) of the Affordable Care Act. Retrieved from <https://innovation.cms.gov/Files/reports/CommunityWellnessRTC.pdf>.

⁷ Ahn, S, Basu, R, Smith, ML, et al (2013). The impact of chronic disease self-management programs: healthcare savings through a community-based intervention. *BMC Public Health*, 13(1), 1141.

⁸ Bartick, M, & Reinhold, A. (2010). The burden of suboptimal breastfeeding in the United States: a pediatric cost analysis. *Pediatrics*, 125(5), e1048-e1056.

⁹ Minnesota Department of Health (2016). Chronic Conditions in Minnesota: New Estimates of Prevalence, Cost and Geographic Variation for Insured Minnesotans, 2012.