



Would senior citizens take better care of themselves if we paid them? Senators say it's worth trying

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WASHINGTON, D.C. — With a Cleveland Clinic wellness program as their model, a pair of U.S. senators Wednesday unveiled a bill that would give senior citizens cash bonuses for meeting health-improvement goals.

Seniors would be awarded points for smoking cessation, weight loss or getting conditions like high cholesterol, blood pressure and diabetes under control. They would voluntarily set goals with their doctors, and get their points -- followed by rewards of up to \$400 -- after checkups in the program's second and third years. The money would come from Medicare, the federal health insurance program for seniors. U.S. Sen. Rob Portman of Ohio, one of the sponsors, said the thinking is that Medicare already spends billions on chronic care for patients who smoke, gain too much weight, eat too much sugar, or fail to exercise or control their cholesterol. Medicare spends \$3.8 billion a year just on annual "wellness exams" for nearly 2.3 million seniors, yet seniors often leave those exams "without a game plan," said Democratic Sen. Ron Wyden of Oregon.

By providing a wellness plan and rewarding seniors for reaching goals, Medicare could save money and improve seniors' lives, said Portman and Wyden. The overall savings from their "Better Health Rewards" program would be shared by seniors and the Medicare system.

There would be no penalties for failure. Seniors with physical limitations might qualify for incentives if their doctors determined they did the best they could, the

senators said. The standards would be set by the Department of Health and Human Services, or HHS, in consultation with health professionals.

Some private companies including the **Cleveland Clinic use similar incentive programs**, rebating or reducing a share of health insurance premiums to employees who improve their health through exercise or diet. The Cleveland Clinic saved \$15 million in 2011, Portman said, and reduced the number of hospital admissions for its own employees with chronic illnesses.

"With a \$15 trillion debt and these trillion-dollar deficits and Medicare on a totally unsustainable path, we do need to find innovative ways" for the federal government to save money, too, Portman said. "This is certainly one of them."

Cleveland Clinic CEO Delos "Toby" Cosgrove, who joined the senators and several other health experts at a Capitol Hill panel discussion, said that he has discussed the concept with HHS Secretary Kathleen Sebelius and that she spoke favorably of it. HHS did not respond to a request for comment Wednesday. A spokesman for the Centers for Medicare and Medicaid Services, the HHS agency that runs Medicare, said his agency does not comment on pending legislation.

Portman and Wyden formally submitted their proposal Wednesday in the form of legislation and said they thought it had a chance of passing with bipartisan support. But Portman allowed that it could wind up as a three-year pilot program covered by some other bill, instead. The Congressional Budget Office has not yet examined the proposal's costs or savings.

Passing a fresh bill like this could be challenging in a highly charged election year. But Portman and others said that a broad discussion on the future of Medicare is inevitable next year because of projected revenue shortfalls in the next decade, and he sees this proposal as a way to start.

As for its political prospects, Michael F. Cannon, a former Senate Republican adviser who is now director of health policy studies at the libertarian Cato Institute, said he

could envision heavy lobbying against the bill by the health care industry. If Medicare spends less money on care, he said, that will mean health providers get less, too. "Anything that reduces that, they will probably lobby against and try to defeat," Cannon said. Senior groups might like the Wyden-Portman proposal, he said, "but seniors as a group are not as organized or centralized as providers are."

Cosgrove rejected that prospect. He said in an interview that health care providers still will have ways to earn revenue, even if seniors become healthier.

"That's what everybody said to me when I said we were going to stop smoking at the Cleveland Clinic," he said. "They all said, 'You're a thoracic surgeon; who are you going to be cutting on?'" But "sooner or later, everybody gets sick," he said. "Maybe now, maybe later. We're not going to be able to put ourselves out of business, no matter how hard we try.

"Look at orthopedic surgeons," he added. Until the mid-1950s, their specialty was treating polio patients. "They didn't go out of business when the Salk vaccine came along. Those kids lived, and then they needed hip replacements when they were 50 years old."