



AMERICAN ACADEMY OF
FAMILY PHYSICIANS
STRONG MEDICINE FOR AMERICA

September 7, 2011

The Honorable Kathleen Sebelius
Secretary
U.S. Department of Health and Human Services
Hubert H. Humphrey Building
200 Independence Avenue, SW
Washington, DC 20201

Dear Secretary Sebelius:

On behalf of the 100,300 members of the American Academy of Family Physicians, I am pleased to offer support of the goals of The Million Hearts Initiative. As community based physicians who care for individuals, as well as the whole family, we are profoundly aware of the health and societal impact of preventable heart attacks and strokes. We have been working for many years to address the complex issues of prevention and treatment of conditions that lead to heart attack and stroke. As such, we are pleased to join with HHS and others in enhancing many of the actions that are outlined in the Initiative.

As the Initiative envisions, action must be taken by a wide range of organizations and individuals ranging from physicians and their practice teams to health care systems, payers and government. Improvements or changes must occur not only in the health care setting but also in the community. We are pleased to share in this letter some of what the AAFP and its many partners have been working on that relate to the Initiative.

An important step forward is the move to the Patient-Centered Medical Home (PCMH) which reflects many of the changes called for in the Initiative. A team approach to care, quality improvement, use of health information technology (IT), and the empowerment and education of the patient and family are foundations of the PCMH. These changes make it possible to improve the delivery of the ABCS (aspirin, blood pressure control, cholesterol management and smoking cessation), to measure outcomes, to connect to community resources and in other ways respond to the Initiative. The AAFP has many programs that directly support the Initiative:

- Evidence-based clinical policies that provide guidance to family physicians and their teams in support of the ABCS including offering aspirin to patients at high risk, screening for high blood pressure, screening for lipid disorders, and screening for tobacco use and provide smoking cessation interventions. These are based on the evidence reviews and recommendations of the US Preventive Services Task Force.

www.aafp.org

President

Roland A. Goertz, MD
Waco, TX

President-elect

Glen Stream, MD
Spokane, WA

Board Chair

Lori J. Heim, MD
Vass, NC

Directors

Jeffrey J. Cain, MD, *Denver, CO*
Thomas Allen Felger, MD, *Granger, IN*
George Wm. Shannon, MD, *Columbus, GA*
Reid Blackwelder, MD, *Kingsport, TN*
Conrad L. Flick, MD, *Raleigh, NC*
Laura Knobel, MD, *Walpole, MA*

Barbara Doty, MD, *Wasilla, AK*
Richard Madden, Jr., MD, *Belen, NM*
Robert Wergin, MD, *Millford, NE*
Russell Kohl, MD, (New Physician Member), *Vinita, OK*
Heidi Meyer, MD, (Resident Member), *Tucson, AZ*
Kevin Bernstein (Student Member), *Quakertown, PA*

Speaker

Leah Raye Mabry, MD
San Antonio, TX

Vice Speaker

John S. Meigs, Jr., MD
Brent, AL

Executive Vice President

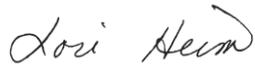
Douglas E. Henley, MD
Leawood, KS

- The Americans In Motion-Healthy Interventions (AIM-HI) program which helps practices improve the health of their patients through improved healthy eating and physical activity. A 3-year research study showed utility at family medicine practice and patient levels, with improved healthy eating and physical activity behaviors and significant weight loss results; AIM-HI program goals include reduction of chronic conditions, including cardiovascular disease.
<http://www.aafp.org/online/en/home/clinical/publichealth/aim.html>
- AIM-HI is conducting community-based research with the AAFP National Research Network as a part of an Agency for Healthcare Research and Quality Task Order to the University of Colorado in which YMCA staff as well as Family Medicine practices in Providence, RI are trained in the AIM-HI approach.
- "Ask and Act," the AAFP's tobacco cessation program for Family Medicine practices, encourages family physicians to ASK all patients about tobacco use, then to ACT to help them quit. The evidence-based tobacco cessation resources for physicians and patients are available (in English and Spanish) at www.askandact.org.
- The AAFP has just successfully completed the AAFP Tobacco Cessation Office Champions Project, a pilot program in diverse Family Medicine practices which included training and system changes to integrate tobacco cessation into daily routines. Based on the success of the pilot additional funding is being sought to expand the program.
- The Healthy Community Collaborative TM, a new quality improvement program, has a focus on improving blood pressure, lipids, appropriate medical treatments and the patient's healthy habits, including physical activity and smoking for preventing further disease for patients with CAD.
- With funding from the National Heart, Lung and Blood Institute (NHLBI) of the National Institutes of Health, through the University of Colorado, the AAFP National Research Network has collaborated with DARTNet, an electronic practice-based research network, in the development of a Cardiac Risk Reduction Learning Community designed to help participating primary care clinicians improve their patients' blood pressure and cholesterol measurements. It uses IT driven panel-level feedback, patient-level feedback at the point of care and regular meetings of participating clinicians in which they have the opportunity to learn from each other to improve quality of care.
- Our work in health communication science, spearheaded by the AAFP's Center for Health IT and embracing "meaningful use" on a path to PCMH, has focused on bringing family physicians, patients, and their care teams into alignment on health outcomes that matter through advocating tools, processes, and relationships that have been underutilized by or inaccessible to those who need them most.
- The AAFP produces ongoing Continuing Medical Education relating to cardiovascular risk reduction. These include special programs as well as courses at the Academy's Annual Scientific Assembly. It also publishes educational articles in its clinical journal *American Family Physician* which has a circulation of over 175,000 Family Physicians, General Practitioners, and office based General Internists.
- FamilyDoctor.org is the American Academy of Family Physician's patient education website which educates and empowers patients and consumers through the dissemination of health information about prevention, treatment and management of chronic diseases, including cardiovascular disease.
- The AAFP works closely with many organizations involved in cardio-vascular disease (CVD) including the NHLBI's prior High Blood Pressure and Cholesterol Education Coordinating Committees and now the new Coordinating Committee of the National Program to Reduce Cardiovascular Risk. The AAFP is also represented on the Heart Truth program.
- At the community level, family physicians volunteer in their local community schools to present the AAFP Tar Wars program, a tobacco-free education program for kids (www.tarwars.org). They also volunteer to present Ready, Set, FIT! in schools.
<http://www.aafp.org/online/en/home/clinical/publichealth/aim/aimschoolprgm.html>)

- Staff represent the AAFP in a liaison role to the Task Force on Community Preventive Services and provide feedback on how Task Force recommendations and findings are disseminated, implemented, and used, and how well the recommendations and findings meet the needs of their constituents.

The AAFP looks forward to working with HHS and others on the Million Hearts Initiative. If you need additional information on AAFP programs, please contact Herbert F. Young, MD, MA, FAAFP, Director of the Division of Health of the Public and Science at hyoung@aafp.org.

Sincerely,

A handwritten signature in cursive script that reads "Lori Heim".

Lori Heim, MD, FAAFP
Board Chair