

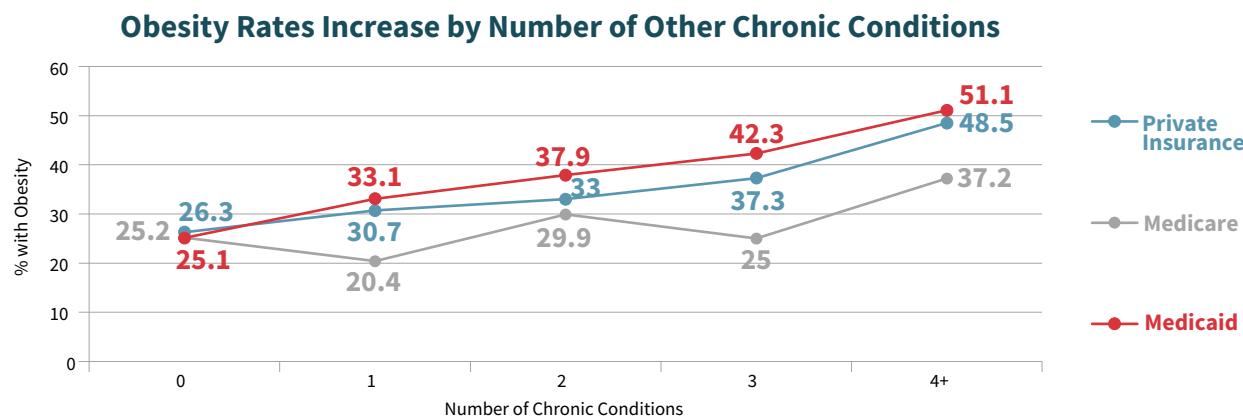
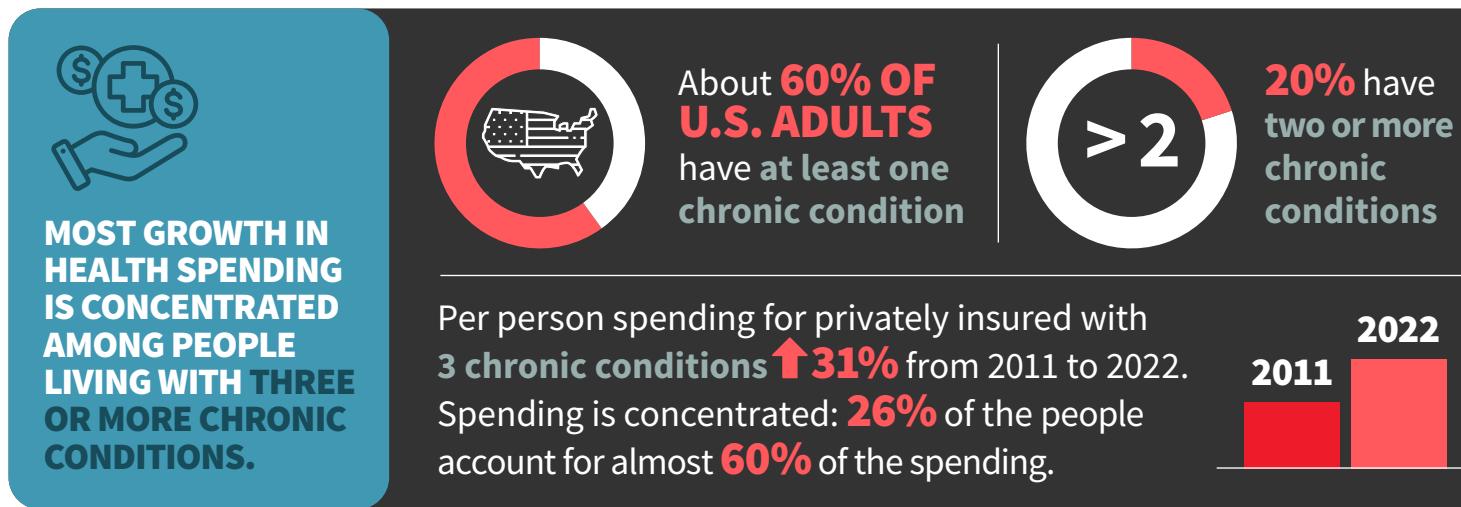
CHRONIC DISEASE: THE MAIN DRIVER OF RISING U.S. HEALTH CARE SPENDING



PARTNERSHIP TO FIGHT
CHRONIC DISEASE

Treating people with multiple chronic diseases, particularly conditions linked to obesity, is the dominant cause of rising health care costs in the U.S.

SPENDING GROWTH CENTERS ON MORE PEOPLE DEVELOPING MULTIPLE CHRONIC CONDITIONS.



POLICY IMPLICATIONS AND RECOMMENDATIONS

LIMITING COVERAGE, INCREASING REIMBURSEMENT CHALLENGES AND IMPOSING PRICE CONTROLS DO NOT PREVENT DISEASE, ACCELERATE WELLNESS, OR LOWER COST GROWTH.

Lowering burden of chronic disease means lowering costs:

- Preventing onset and progression by addressing obesity and stopping accumulation of multiple chronic conditions
- Incentivizing prevention and care coordination
- Better defining treatment guidelines for multiple chronic conditions to facilitate prevention and improved outcomes
- Replicating models of care proven to reduce costs

THE BIG PICTURE

\$5.6 Trillion

National health spending in 2025 (18.5% of GDP)

93%

Portion of Medicare spending
on chronic disease (2022)

82%

Portion of Medicaid spending
on chronic disease (2022)

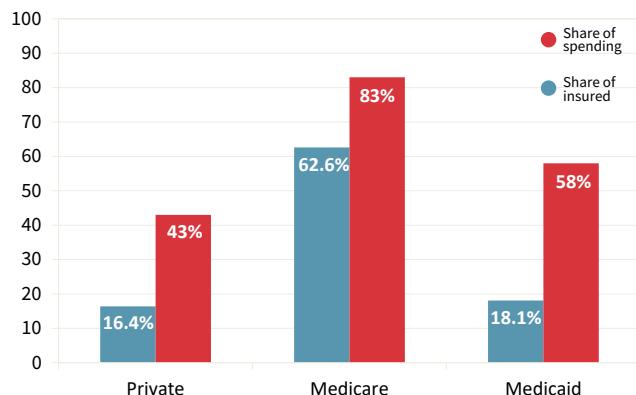
31%

Per capita spending rise (privately
insured with 3 conditions, 2011–2022)

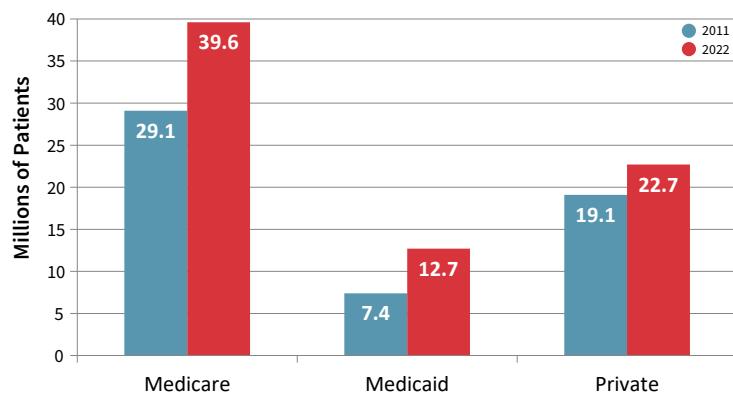
PATIENTS WITH 0, 1, 2, 3, 4+ CHRONIC CONDITIONS VS. TOTAL SPENDING OVER TIME

2022, All Adults (Private, Medicare, Medicaid):

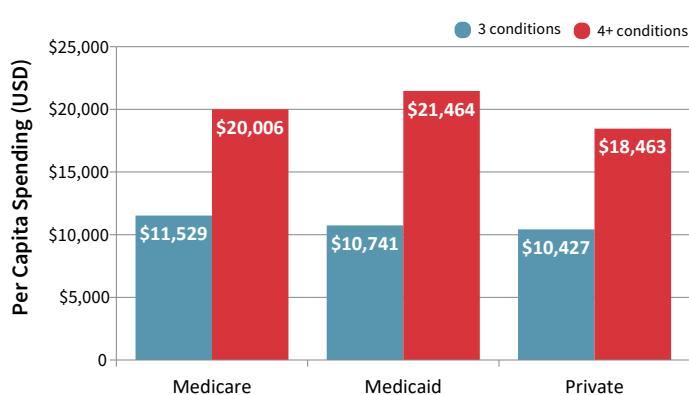
The group with 4+ chronic conditions accounts
for the majority of spending:



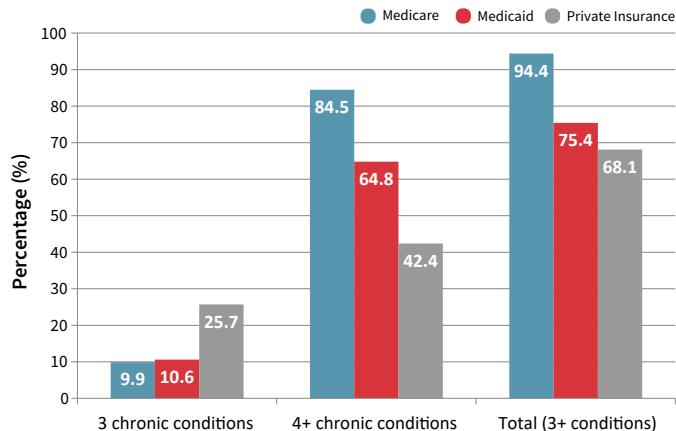
The rate of patients treated for 4+
chronic conditions rose across all payers:



Per capita spending rises rapidly with the
number of conditions:



Distribution of spending increases attributable to
3+ conditions in Medicare, Medicaid, and Private:



**POLICY FOCUS MUST SHIFT TO PREVENTING AND BETTER MANAGING CHRONIC DISEASE -
INCLUDING OBESITY - TO CURB UNSUSTAINABLE HEALTH SPENDING.**