

SHIP: The Statewide Health Improvement Program

The goal of the Statewide Health Improvement Program (SHIP) is to help Minnesotans live longer, healthier, better lives by preventing risk factors that lead to chronic disease.

SHIP is an integral component of an overall health care reform initiative passed during the 2008 Legislative session. Minnesota's health reforms aim to simultaneously improve the health of Minnesotans, enhance the patient experience and contain the spiraling costs of health care in our state.

Why do we need SHIP?

Tobacco use and exposure and obesity are leading causes of chronic disease¹.

- In Minnesota, 38 percent of adults are classified as overweight based on Body Mass Index (BMI), and 25 percent of adults are classified as obese.
- Only 24 percent of adults consume five or more fruits and vegetables per day.
- Only 51 percent of adults get 30 or more minutes of moderate physical activity five days per week.
- 18 percent of adults are current smokers.

The result is that many Minnesotans live with chronic diseases:

- 23,500 new cases of cancer were identified in 2006.
- In 2006 139,000 Minnesotans were diagnosed with coronary heart disease or angina, and 71,000 Minnesotans had a stroke.
- 322,000 Minnesotans had diabetes, and more than one million Minnesotans had prediabetes in 2005. These conditions increase the risk of heart disease,

blindness, renal failure, amputations and death.

- 11 percent of Minnesotans either have asthma or have had it in the past.

How will SHIP help?

SHIP addresses the top three preventable causes of illness and death in the U.S. by:

- Reducing the percentage of Minnesotans who use or are exposed to tobacco.
- Reducing the percentage of Minnesotans who are obese or overweight through better nutrition and increased physical activity.

What makes SHIP different from other prevention programs?

Some prevention programs focus on individual behavior change. Behavior change from programmatic efforts can be difficult to sustain beyond the life of the program or the individual's involvement in the program. But behavior change can be maintained if the environment supports it. SHIP aims to create sustainable, systemic changes that make it easier for Minnesotans to choose healthy behaviors.

SHIP grants are awarded to community health boards and tribal governments across Minnesota. Grantees will work in their communities to employ evidence-based strategies to make policy, systems and environmental change in four settings:

- Schools
- Communities
- Worksites
- Health Care Systems



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What are policy, systems and environmental changes?

SHIP focuses on broad, behind-the-scenes changes that make it easier for people to incorporate healthy behaviors into their daily lives.

- Policy interventions include changes in laws and regulations, such as restricting smoking in public buildings and providing time off during work hours for physical activity.
- Systems interventions create change in organizations and institutions, such as a school district implementing food preparation options or offering more time in physical education in all schools in the district.
- Environmental interventions include decisions about land use, zoning and community design, such as ensuring that neighborhoods have access to healthy foods and there are ample opportunities for activities such as walking and biking.

How do risk factors relate to health care costs?

Studies prove that risk factors such as tobacco use, obesity and physical inactivity increase health care costs.

A HealthPartners study of over 5,000 adult enrollees in 1995-1996 found thatⁱⁱ:

- Each additional unit of BMI increased medical charges by nearly 2 percent.
- A history of tobacco use was associated with 26 percent higher medical charges.
- Each additional day of physical activity per week reduced medical charges by almost 5 percent.

A national study found that 27 percent of health care charges for adults over age 40 are associated with people being physically inactive, overweight and/or obeseⁱⁱⁱ.

Per capita private health insurance spending for obese adults was \$1,272 higher than that for normal weight adults in 2002^{iv}.

How will we know if SHIP is effective?

The changes implemented through SHIP will require considerable time and effort, so large-scale, population-based changes in health behaviors will take time to emerge.

Nonetheless, evaluation and effective outcomes are an essential component of SHIP. Both the Minnesota Department of Health and individual SHIP grantees will measure outcomes of the program. Measurements will provide information about:

- Health care costs
- Risk factors of tobacco use/exposure and obesity and related chronic disease
- Individual health behaviors linked to tobacco use/exposure and obesity
- Policy, systems and environmental changes that are proven to reduce tobacco use/exposure and obesity
- Activities that move local communities toward those changes

References

ⁱ Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, <http://www.cdc.gov/BRFSS/>

ⁱⁱ [Pronk NP, Goodman MJ, O'Connor PJ, Martinson BC.](#) Relationship between modifiable health risks and short-term health care charges. *JAMA*. 1999 Dec 15; 282(23):2235-9.

ⁱⁱⁱ [Anderson DR, Whitmer RW, Goetzel RZ, Ozminkowski RJ, Dunn RL, Wasserman J, Serxner S.](#) The relationship between modifiable health risks and group-level health care expenditures. *Am J Health Promot*. 2000 Sep-Oct; 15(1):45-52.

^{iv} Thorpe, KE. Factors accounting for the rise in health-care spending in the United States: the role of rising disease prevalence and treatment intensity. *Public Health*. 2006 Nov; 120(11):1002-7.