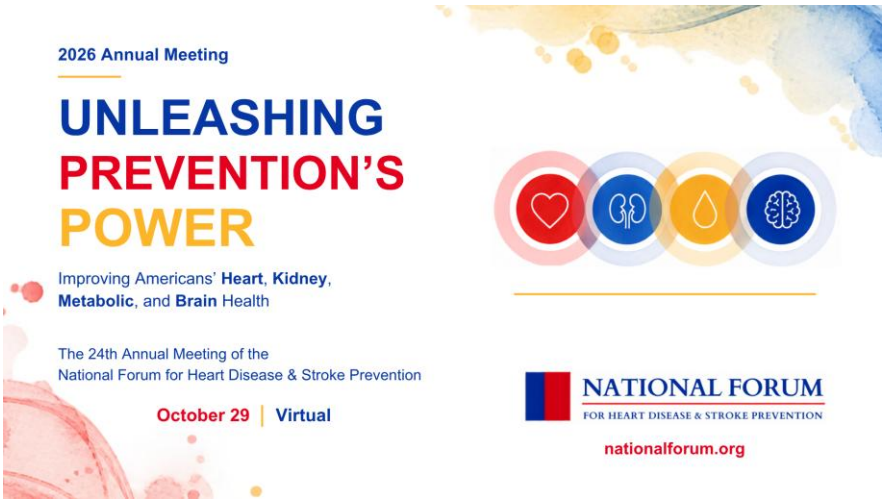


Closing Keynote: Unleashing Prevention's Power: The Next Chapter

As the healthcare system embraces new models such as ACCESS and other prevention-focused innovations, what comes next? Dr. Oz will explore how technology, policy, clinical care, and consumer engagement can work together to prevent chronic disease, improve outcomes, and create a healthier future for all Americans. This closing keynote will challenge attendees to think beyond individual programs and consider how each sector can contribute to a prevention-centered healthcare system.



The Honorable Mehmet C. Oz, MD, MBA
Administrator
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Transcript

When I was practicing full time as a heart surgeon, I had the privilege of saving people's lives at the moment of maximum crisis. But the longer I did it, the more I realized that, for many patients, the road that led to my operating table had plenty of off-ramps.

They needed heart surgery because our health care system had fundamentally failed them. Instead of helping them flourish as a whole person, it treated them like an exploded diagram,

where each part is viewed and treated and billed separately. Instead of promoting healthy lifestyles, it reacted to problems as they arose, without addressing the underlying issues that made those drastic interventions necessary. And at every step of the way, the incentives aligned to reward this backwards approach to medicine.

That realization led all the way to my current position as CMS Administrator—and this moment, joining you on the big screen today.

While some of you might not consider yourselves card-carrying members of the MAHA movement, to me, you're some of its biggest heroes. Why? Because if the work you do every day, refocusing our sick-care system on prevention, isn't MAHA, well, then I don't know what is. One way you've been at the forefront of this effort is through implementing the ACCESS Model, which is advancing chronic care with effective, scalable solutions. My colleague Jacob Shiff—he's there with you today—likely mentioned that it's a 10-year voluntary initiative within Original Medicare that replaces the old fee-for-service model with outcome-aligned payments, giving physicians more flexibility to use technology-supported care to treat their patients with chronic conditions.

But care shouldn't stop the moment a patient leaves the doctor's office. And now, it won't have to. You don't need me to tell you how transformative this can be. In fact, you guys were pushing the ACCESS approach/concept long before—long before that acronym existed. The National Forum has been advocating since 2022 for Medicare to cover home blood pressure devices. It's a good idea. Now, with the ACCESS Model, you're going above and beyond what you requested, covering a whole range of devices to help manage conditions like high blood pressure and diabetes. ACCESS also covers behavioral issues like depression.

And once again, you guys were ahead of the curve. Your partnerships with mayors, both across the political spectrum and the urban-rural divide, to combat loneliness, physical inactivity, and other drivers of poor mental health are a shining example of the paradigm shift we need in medicine: from reaction to prevention, and from isolated treatments to the holistic promotion of healthy living.

Your Move with the Mayor program has already delivered real results, and I believe that the monitoring devices and outcome-based payments available through ACCESS could help supercharge that success.

I'd also encourage you to look beyond the ACCESS Model and explore how your state is using the federal dollars it received through the Rural Health Transformation Program. Forty-two states that applied for funding last year took specific steps to transition to outcome-based payments, something we encouraged from the start. We're about to enter year two of the five-year RHTP program, which gives you a real opportunity to partner with those states as they make that crucial shift toward prevention-first medicine.

And, of course, it's hard to talk about anything these days without talking about AI—superintelligence. Whether it's equipping patients with AI-powered monitoring devices or giving them access to chatbots that can help field these low-stakes questions between visits, AI has the potential to revolutionize health care and move us toward a system that keeps patients healthy instead of just treating them when they're sick.

It's important that we think clearly about how we want to use this powerful new tool. I know you're doing that already. Rest assured that CMS is as well.

I want to leave you with one final image. I'm sure all of you in this room have a family member on Medicare. It's likely that she struggles with high blood pressure, high cholesterol, diabetes, or arthritis—or maybe all of the above.

The last thing you want for her is a series of disconnected appointments that don't add up to anything, punctuated by harrowing surgeries that rob her of her joie de vivre. Right? She wants to have the joy of living. Instead, you want her to get the holistic, preventive care she needs to stay active: running her own errands, enjoying a game of, well, pickleball with her friends, and playing with her grandchildren.

Here at CMS, we're working every day to achieve that vision for her, and we thank you for your continued partnership in pursuing it. I hope you've had a productive and enjoyable conference, and I wish you all safe travels home. God bless