At the risk of seeming to be the bearer of old news, I want to call your attention to a report entitled "Healthy People" which was issued last year by Surgeon General Julius Richmond. It calls for a second public health revolution in the history of the United States "through a renewed national commitment to... prevent disease and promote health." Health education must be a major component of any such effort.

Metropolitan's long history of activity in health education may have prompted me to raise this subject, but the growing interest of the insurance industry as a whole is equally compelling. Two years ago ACLI created an Advisory Council on Education for Health to explore ways in which insurers might contribute to this social movement. HIAA has a similar Committee on Health Education. In March, 1980, ACLI and HIAA jointly sponsored a Conference on Health Education and Promotion for the Eighties which arrived at a consensus on these points:

- Society needs to concern itself more urgently with health education and disease prevention.
- Improvements in health are likely to occur through educational programs in the workplace, in schools and in community settings.
- Through health education insurance companies have a real opportunity to contribute to public health while also helping to contain health care costs.

Speakers at the conference suggested possible approaches that insurers are uniquely positioned to take. Among these are:

- Premium discounts for people who exercise effectively and who maintain desirable weight and favorable blood pressure.
- Broader insurance activity in the self-care movement.
- Intensified claims analysis to identify areas of greater utilization and expense which might help focus health promotion efforts and evaluation.
- Competitive marketing of health promotion programs, as well as encouragement of group clients to launch their own health promotion efforts.

While the conferees agreed that there can be no swift financial return on an investment in health promotion, the prospect for long-term gains is good.

Another insurance industry effort that promises to contribute to public health and cost containment is the Lifecycle Preventive Health Services Study being sponsored by ACLI-HIAA at the suggestion of the Advisory Council on Education for Health. This study is designed to demonstrate the feasibility of providing preventive care services—including health education—as an integral part of primary health care. Services will be keyed to specific health goals for the various age groups throughout the life cycle. Costs and benefits to individuals, providers and insurers will be assessed for providing the services in different settings and with different types of personnel. The study gets underway later this year and will be headquartered at Metropolitan.

These are exciting times for those of us in insurance medicine who believe in health education. I would be interested in hearing your views.