

# THE FINAL PUSH: Taking Action to Support Community Prevention and Equity in Health Reform

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# Key prevention and public health components of health reform

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- Universal coverage, including first \$ coverage of clinical preventive services
- National Prevention Strategy
- Reliable funding stream through creation of a Trust Fund (mandatory appropriation) to support (House):
  - Core public health functions
  - Community prevention
  - Public health workforce
  - Public health and prevention research

# Real money – latest #s

- Senate Prevention and Public Health Investment Fund: \$15 billion over 10 years, reaching \$2 billion/year in year five and beyond
  - Supports new and existing prevention and public health programs, including Community Transformation Grants
- Overall Investment Fund – \$33.9 billion over five years, rising to \$9 billion in FY15 (prevention and wellness trust, community health centers, public health workforce)
  - House Prevention and Wellness Trust – \$15.4 billion/5 years - rises to \$3.6 billion in FY15
    - Community Prevention rises to \$1.7 billion in 2014
    - Core public health rises to \$1.3 billion in 2014
    - Public health research rises to \$300 million in 2014

# National Prevention Strategy

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- Both bills would create a National Strategy to set goals and objectives in prevention and wellness.
- **House bill** - Directs the Secretary to develop the Strategy, in consultation with the heads of health agencies and other Federal Departments.
- **Senate bill** - Creates a Prevention and Public Health Council to provide coordination among Federal departments and agencies and create and implement the National Strategy.

# Coverage of Preventive Services

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## □ **House Bill:**

- Eliminates cost-sharing for preventive services in Medicare and Medicaid.
- Creates an essential benefits package that provides a comprehensive set of services and does not require cost-sharing for preventive services, including well baby and well child care.
- Prohibits State Medicaid programs from excluding tobacco cessation products from coverage.

# Coverage of Preventive Services

## □ **Senate Bill:**

- Eliminates cost-sharing for preventive services in Medicare and Medicaid.
- Provides Medicare coverage, with no co-payment or deductible for an annual wellness visit, as well as a personalized prevention plan that includes a health risk assessment.
- Requires states to provide Medicaid coverage for tobacco cessation for pregnant women, without cost sharing.
- Directs the Secretary to award grants to states for initiatives that provide incentives to Medicaid beneficiaries who successfully participate in a healthy lifestyles program.

# Coverage of Preventive Services

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## □ **Senate Bill:**

- Creates an essential health benefits package whose benefits shall be defined by the Secretary. Included in general categories are preventive and wellness services and chronic disease management.
- Stipulates that group health plans shall provide coverage, without cost-sharing, for preventive services with an “A” or “B” rating from the US Preventive Services Task Force and immunizations recommended by the Advisory Committee on Immunization Practices.

# True community-based prevention

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- Senate HELP Community Transformation Grants
  - Requires detailed plan for policy, environmental, programmatic and infrastructure changes to promote health living and reduce disparities
    - Create healthier school environments, including healthy food options, physical activity opportunities, promotion of healthy lifestyles
    - Develop and promote programs targeting increased access to nutrition, physical activity, smoking cessation and safety
    - Highlight healthy options at restaurants and food venues

# Health Disparities

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## □ **House Bill:**

- Includes the identification of health disparities in prevention and wellness as a required element of the National Prevention and Wellness Strategy.
- Creates a grant program to support the delivery of evidence-based and community-based prevention and wellness services. Provides preference to grantees that address significant health disparities. Directs the Secretary to award not less than 50 percent of funds for planning or implementing prevention and wellness services whose primary purpose is to achieve a measurable reduction in health disparities.

# Health Disparities

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## □ **House Bill:**

- Calls for a study on the feasibility of developing Medicare payment systems for language services, providing Medicare demonstration grants to reimburse culturally and linguistically appropriate services, and developing standards for the collection of data on race, ethnicity, and primary language.

# Health Disparities

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## □ **Senate Bill:**

- Includes a section on “addressing health care disparities”
  - Directs the Secretary to evaluate approaches for the collection of data to allow for the ongoing, accurate, and timely collection and evaluation of data on disparities in health care services and performance on the basis of race, ethnicity, sex, primary language, and disability status.
  - Requires the Secretary to report to Congress on the evaluation of the data collected and recommend improvements for the identification of health care disparities.

# Health Disparities

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## □ **Senate Bill:**

### ■ Community transformation grants

- The focus of these grants includes addressing health disparities.
- Eligible activities include prioritizing strategies to reduce racial and ethnic disparities, including social, economic, and geographic determinants of health.
- Tester amendment filed on 11/2 would add a related grant program focusing on the reduction of health disparities in rural areas.

# Healthy Aging, Living Well Pilot Program

## □ **CDC Pilot Program – Community Prevention Targeted to Pre-Medicare Population**

- Funds would be provided to health departments and Indian tribes to carry out five-year pilot programs to provide public health community interventions, screenings, and clinical referrals for individuals who are between 55-64 years old.
- Grantees would design a strategy to improve the health status of this population through community based public health interventions, such as improving nutrition, increasing physical activity, reducing tobacco use and substance abuse, improving mental health and promoting healthy lifestyles among the target population.

# Public Health Workforce

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## □ **House Bill**

- Creates a Public Health Workforce Corps to ensure an adequate supply of public health professionals.
- Establishes the Public Health Workforce Scholarship Program and Public Health Workforce Loan Repayment Program for individuals who join the Corps and are placed as public health professionals.
- Establishes a public health workforce training and enhancement program that supports public health fellowships and traineeships.

# Public Health Workforce

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## □ **Senate Bill:**

- Establishes a public health workforce loan repayment program for individuals who work at least three years in public health agencies and authorizes grants for mid-career public and allied health training programs.
- Eliminates the cap on the Commissioned Corps and creates a Ready Reserve Corps to assist during national emergencies.
- Authorizes funding for public health fellowships.
- Creates a Public Health Sciences Track.

## Who needs to hear from us in the short term?

- The following Senators are toward the middle of the political spectrum and several are viewed as key swing votes. It's important to note that Senators Bayh, Webb, Conrad and Nelson have each already voted in support of at least two amendment of four viewed as “divisive” to the health reform bill.

Evan Bayh (D-IN)

Susan Collins (R-ME)

Kent Conrad (D-ND)

Byron Dorgan (D-ND)

Mary Landrieu (D-LA)

Joe Lieberman (I-CT)

Blanche Lincoln (D-AR)

Claire McCaskill (D-MO)

Ben Nelson (D-NE)

Olympia Snowe (R-ME)

George Voinovich (R-OH)

# Power Brokers

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- When the bill moves to conference, the following members will play primary roles:
  - House Speaker Nancy Pelosi (D-CA)
  - House Majority Leader Steny Hoyer (D-MD)
  - House Minority Leader John Boehner (R-OH)
  - House Energy and Commerce Chair Henry Waxman (D-CA)
  - House Energy and Commerce Ranking Member Joe Barton (R-TX)
  - Senate Majority Leader Harry Reid (D-NV)
  - Senate Finance Chairman Max Baucus (D-MT)
  - Senate HELP Chairman Tom Harkin (D-IA)
  - Senate HELP Ranking Member Mike Enzi (R-WY)
  - Senate Minority Leader Mitch McConnell (R-KY)

# TFAH Reports

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Please visit [www.healthyamericans.org/health-reform](http://www.healthyamericans.org/health-reform) for a compendium of health reform information. E-mail [rhamburg@tfah.org](mailto:rhamburg@tfah.org) to be added to a wellness and prevention health reform daily digest.

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