

DEPARTMENT OF HEALTH AND HUMAN SERVICES

The Affordable Care Act and the Prevention and Public Health Fund
Report to Congress for FY 2014

August 2015

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Introduction

The Affordable Care Act established the Prevention and Public Health Fund (Prevention Fund) to provide expanded and sustained national investments in prevention and public health, to improve health outcomes, and to enhance health care quality. To date, the Prevention Fund has invested in a broad range of evidence-based activities including community and clinical prevention initiatives; research, surveillance and tracking; public health infrastructure; immunizations and screenings; tobacco prevention; and public health workforce and training. Section 220 of the Consolidated Appropriations Act of FY 2012 (P.L. 112-74) directed the Department of Health and Human Services (HHS, the Department) to establish a publicly accessible website to provide information on the use of funds made available through the Prevention and Public Health Fund authorized in the Affordable Care Act (P.L. 111-148). Section 220 requires a report detailing the uses of all funds transferred under section 4002(c) during the fiscal year, to be posted not later than 90 days after the end of the fiscal year. These requirements were continued by the Appropriations Acts of 2013 (P.L. 113-6) and 2014 (P.L. 113-73). This report fulfills the requirement to make available an annual report on the use of all funds.

Background

Chronic diseases and conditions—such as heart disease, stroke, cancer, diabetes, obesity, and arthritis—are among the most common, costly, and preventable of all health problems. Seven of the top ten causes of death in 2010 were chronic diseases, and the most recent analyses indicate that 86 percent of all health care spending that year was for people with one or more chronic medical conditions.¹ As of 2012, about half of all adults—117 million people—had one or more chronic health conditions. Racial and ethnic minority communities experience higher rates of many chronic diseases, including obesity, cancer, diabetes, and HIV/AIDS. Over the past three decades, childhood obesity rates in America have tripled, and today, almost one in three children in America are overweight or obese. The numbers are even higher in African American and Hispanic communities, where nearly 40 percent of the children are overweight or obese.²

Many experts agree that an emphasis on prevention and public health interventions has the potential to improve the health of Americans. According to a 2012 Institute of Medicine report, “For the Public’s Health: Investing in a Healthier Future,” an estimated 80 percent of cases of heart disease and of type-2 diabetes and 40 percent of cases of cancer could be prevented by implementing public health interventions that increase physical activity and healthy eating and help reduce tobacco use and excessive alcohol use.

Studies have also shown that insurance coverage can lead to better health.^{3,4} It helps people obtain the primary care, preventive services, prescription drugs and mental health services they need to stay healthy, prevent disease before it starts or stop it from worsening. New coverage options available in the Marketplaces have increased access to preventive care and will help improve health outcomes for the millions of individuals who will be able to enroll in affordable health plans. By concentrating on the causes of chronic disease and helping Americans get the preventive care they need to stay healthy, the

¹ <http://www.ahrq.gov/professionals/prevention-chronic-care/decision/mcc/mccchartbook.pdf>

² <http://www.cdc.gov/chronicdisease/overview/>

³ <http://www.pnhp.org/excessdeaths/health-insurance-and-mortality-in-US-adults.pdf>

⁴ <http://www.iom.edu/~media/Files/Report%20Files/2003/Care-Without-Coverage-Too-Little-Too-Late/Uninsured2FINAL.pdf>

Affordable Care Act helps move the nation from a focus on sickness and disease to one based on wellness and prevention.

Process for Prevention Fund Allocation

The Affordable Care Act states that the purpose of the Prevention Fund is for an “expanded and sustained national investment in prevention and public health programs that will improve health and help restrain the rate of growth in private and public sector health care costs.” The Prevention Fund is a funding source for new and existing HHS programs that meet this purpose. As part of the annual budget process, HHS proposes a budget that funds high-performing programs, eliminates duplicative and ineffective programs, and ensures investments are coordinated across agencies and funding sources. The allocation for the Prevention Fund is part of this process, which allows HHS to ensure that investments from the Prevention Fund coordinate with and are not duplicative of existing programs in HHS. Beginning in FY 2014, annual appropriations legislation has directed the allocation of Prevention Fund resources by identifying amounts for the Department to direct to specific programs.

Because of the availability of Prevention Fund resources, public health organizations, state and local health departments, schools and other educational institutions, tribal organizations, as well as community and faith-based organizations have received much-needed financial support for initiatives focused on tobacco cessation, obesity prevention, health coverage enrollment assistance, and increasing the primary care and public health workforce. Programs vary in approach, but depending on the specific program, factors considered in funding may include population size, burden of disease, percentage of uninsured, and ability to reduce health disparities and/or achieve positive health outcomes. The Department continues to engage in constructive dialogue with Congress and stakeholders on specific, high-impact and evidence-based investments that can make a difference in the health of Americans. By investing in state and local public health capacity and community efforts to implement proven prevention programs, investments made possible by the Prevention Fund can make a significant impact on the leading causes of morbidity and mortality.

Prevention Fund Overview

Through the Prevention Fund, the Affordable Care Act works to address factors that influence our health. The historic creation of the Prevention Fund marks the first time ongoing dedicated funding for public health has been provided by federal law. In FY 2010, \$500 million of the Prevention Fund was distributed to states and communities to boost prevention and public health efforts, improve health, enhance health care quality, and foster the next generation of primary health professionals. In FY 2011 and FY 2012, \$750 million and \$1 billion of the Prevention Fund, respectively, built on the initial investment and expanded opportunities to improve community health, strengthen public health capacity in state and local health departments, and improve public health research and tracking to better address public health concerns. In FY 2013, a total of \$949 million was available to HHS after accounting for sequestration and the enactment of the Middle Class Tax Relief and Job Creation Act of 2012, which revised the amount of funding available for the Prevention Fund beginning in FY 2013. In FY 2014, the funding level of \$928 million reflects the required reduction from the mandatory sequester pursuant to the Balanced Budget and Emergency Deficit Control Act, as amended.

A summary of activities funded in FY 2014 is included below.

Community Prevention: Funding supports prevention activities to improve health and reduce chronic disease risk factors.

Tobacco Use Prevention

- The Centers for Disease Control and Prevention (CDC) continued the nationwide media campaign to increase awareness of the risks of smoking and to encourage smokers to quit. CDC also continued support for and enhanced the capacity of state telephone-based tobacco cessation services. In 2012, CDC's "Tips From Former Smokers" national ad campaign motivated 1.6 million smokers to make a quit attempt. At least 100,000 of them will succeed. In 2013, the campaign generated over 150,000 additional calls to state quitlines. In 2014, CDC released additional Tips advertisements.

Obesity Prevention and Fitness

- CDC funds supported population-, practice-, and evidence-based strategies and interventions to improve health and wellness, reduce chronic disease risk factors, build capacity for prevention efforts, enhance the evidence base for chronic disease prevention strategies, and address the social, economic, environmental, and individual factors that influence weight status in a variety of settings, including early child care facilities, workplaces, schools, communities, and health care facilities.

Reducing Chronic Disease Disparities

- CDC supported community-based efforts to reduce chronic disease that sought to identify, develop, and disseminate effective strategies for reducing racial and ethnic health disparities. Funds addressed risk factors including tobacco use and exposure, physical inactivity, poor nutrition, and lack of access to chronic disease prevention, risk reduction, and disease management.

Suicide Prevention

- The Substance Abuse and Mental Health Services Administration (SAMHSA) provided support to the following Suicide Prevention programs:
 - The National Strategy on Suicide Prevention (NSSP) grants supported states in implementing the goals and objectives of the 2012 NSSP focused on preventing suicide and suicide attempts among working-age adults 25-64 years old in order to reduce the overall suicide rate and number of suicides in the U.S. nationally.
 - The Garret Lee Smith (GLS)-Youth Violence Prevention-State/Tribal program supported states and tribes (including Alaska Villages and urban Indian organizations) in developing and implementing statewide or tribal youth suicide prevention and early intervention strategies, grounded in public/private collaboration among youth-serving institutions, schools, juvenile justice systems, foster care systems, substance abuse and mental health programs.
 - The GLS-Youth Violence Prevention-Campus program continued to assist colleges and universities in building a foundation for their efforts to prevent suicide attempts and completions and to enhance services for students with mental and substance use disorders that put them at risk for suicide and suicide attempts.
 - The National Suicide Prevention Lifeline program continued to provide national telephonic access at any time of the day or night to suicide prevention and crisis intervention services through toll-free suicide prevention hotline numbers, including 1-800-273-TALK (8255).
 - The Suicide Prevention Resource Center grant supported high-impact objectives of the NSSP, provided technical assistance for NSSP implementation, and developed an implementation plan for preventing suicide among men in mid-life.

Substance Abuse

- SAMHSA supported Access to Recovery (ATR), a systems transformation program that uses vouchers for clinical treatment and recovery support services. These services promote and help maintain long-term recovery for individuals overcoming substance abuse issues. For this third cohort of ATR grantees, these grants have provided a mixture of clinical and recovery support treatment services to almost 266,000 clients.

Falls Prevention

- The Administration for Community Living (ACL) awarded funds to increase participation by tribal elders and other older adults and adults with disabilities in evidence-based community programs to reduce falls and falls risk while also increasing the sustainability of these programs through innovative funding arrangements. ACL awarded grants to tribal organizations and domestic public and private nonprofit entities, including state agencies and community organizations. ACL also awarded a grant for a National Falls Prevention Resource Center to increase public education about the risk of falls and how to prevent them, and to assist in sustainability efforts.

Chronic Disease Self-Management

- ACL continued to fund efforts that provide older adults and adults with disabilities with education and tools to help them better manage chronic conditions such as diabetes, heart disease, arthritis, HIV/AIDS, and depression.

Home and Community-Based Support Services

- ACL awarded three-year, forward funded cooperative agreements through the Alzheimer's Disease Initiative-Specialized Supportive Services program. Grantees include community-based organizations, a university research institution, and state and local government agencies. Each grant project is designed to enhance the dementia-capability of their home and community-based service system for people with Alzheimer's disease and related dementias.

Clinical Prevention: Funding supports programs to improve Americans' access to important preventive services and the care necessary to meet diverse healthcare needs.

Access to Critical Wellness and Preventive Health Services

- CDC funds increased awareness of and expanded access to preventive health and wellness programs in a variety of settings, including; immunization programs for uninsured and underinsured children, adolescents, and adults; cardiovascular disease and stroke prevention programs such as *Million Hearts*®; maternal and child wellness programs including support and promotion of breastfeeding; diabetes prevention programs; and cancer prevention and screening efforts such as the National Breast and Cervical Cancer Early Detection Program.

Public Health Infrastructure and Training: These efforts help state and local health departments meet 21st century challenges.

Public Health Workforce

- CDC continued its support for the expansion of applied epidemiology and laboratory fellowships to help develop a prepared, diverse, and sustainable public health workforce through professional development and public health work experience.

Childhood Lead Poisoning Prevention

- Lead poisoning is a serious pediatric health problem in the United States. CDC's Childhood Lead Poisoning Prevention program supports data collection and state efforts to eliminate lead hazards before children can be exposed.

Detection and Response Capacity

- CDC funded state, local, and territorial programs and initiatives working across the healthcare system to maximize healthcare-associated infection (HAI) prevention efforts and strengthen and integrate capacity for detecting, tracking, and responding to infectious diseases and other public health threats. CDC continued to support health departments in all 50 states, Washington, D.C., and Puerto Rico that have implemented HAI prevention initiatives through program development and implementation.

Communities' Unique Public Health Needs

- CDC funded Preventive Health and Health Services Block Grants for 50 states, 2 American Indian tribes, 8 U.S. territories, and the District of Columbia to address their unique public health needs and challenges with innovative and community driven methods. State funding priorities are tied to individual Healthy People 2020 goals and objectives and include addressing emerging health issues and gaps; decreasing premature death and disabilities; achieving health equity by addressing the social determinants of health; supporting local programs such as community fluoridation; and establishing data and surveillance systems.

Public Health Research and Data Collection: These programs support the scientific study of prevention to better understand how to translate research into practice.

Prevention Research

- The Agency for Healthcare Research and Quality (AHRQ) provided funds for scientific, technical, and administrative support to maximize the quality and effectiveness of the U.S. Preventive Services Task Force.

Conclusion

The U.S. Department of Health and Human Services takes a broad approach to addressing the health and well-being of our communities. The health of Americans is influenced by where Americans live, work, play, and go to school; therefore, many Federal agencies have a role in improving the health of the nation.

The National Prevention Council, established by the Affordable Care Act, and composed of senior officials across the government, continues to elevate and coordinate prevention activities in order to attain the goals put forth in the National Prevention Strategy (Strategy), a focused effort across Departments to promote the nation's health. In addition, both the Prevention Fund and the Strategy align with Healthy People 2020 (HP2020). HP2020 contains the nation's health objectives over a broad range of health priorities. The Strategy identifies priority recommendations that all sectors can implement to meet prevention and wellness goals, such as healthy and safe community environments and tobacco-free living, which align with the objectives of HP2020.

The Presidentially-appointed Advisory Group on Prevention, Health Promotion, and Integrative and Public Health brings a non-Federal perspective to the Strategy's policy and program recommendations and to its implementation as a *national* strategy. Involvement and support from other partners at the state and local levels as well as the private sector have been key to the Strategy's successful implementation.

Efforts like the Prevention Fund and the National Prevention Council promote prevention at the federal level and in states and communities across the country. Building on the increased access to insurance coverage and preventive services due to the Affordable Care Act, these activities help Americans lead healthier lives.

**FY 2014 Prevention and Public Health Fund Allocation
(dollars in millions)**

Agency	Activity or Program	Allocation	Use of Funds
ACL	Alzheimer's Disease Prevention Education and Outreach	14.7	To continue an education campaign for people caring for someone with Alzheimer's or dementia and to operate and update the alzheimers.gov website. To fund new grants to states that expand specialized services and supports targeting certain categories of individuals living with Alzheimer's disease or related disorders.
ACL	Chronic Disease Self-Management Program	8.0	To award continuation grants to selected states and a resource center to help older adults and adults with disabilities cope with their chronic conditions by providing access to evidence-based chronic disease self-management programs, and also to assist state grantees in developing sustainability plans to continue providing these programs after the grant period ends.
ACL	Falls Prevention	5.0	To award competitive grants to implement and disseminate evidence-based community programs/strategies that have been proven to reduce the incidence of falls for older adults, tribal elders, and adults with disabilities, and establish a resource center to promote the importance of falls prevention strategies and promote public education about the risks of falls and ways to prevent them.
AHRQ	Clinical Preventive Services Task Force	7.0	To maximize the quality and effectiveness of the U.S. Preventive Services Task Force by providing scientific, technical, and administrative support.

Agency	Activity or Program	Allocation	Use of Funds
CDC	Breastfeeding Promotion and Support	8.0	To fund community initiatives to support breastfeeding mothers and support hospitals in promoting breastfeeding.
CDC	Cancer Prevention and Control	104.0	To support the National Breast and Cervical Cancer Early Detection Program which provides breast cancer screening, outreach, and case management services for qualified individuals through state, territorial, and tribal Health organizations.
CDC	Diabetes Prevention State Grants	73.0	To implement improved and enhanced diabetes prevention and control strategies within state and local organizations that address primary prevention and support the National Diabetes Prevention Program lifestyle change intervention.
CDC	Epidemiology and Laboratory Capacity (ELC/EIP)	40.0	To enhance the ability of state, local, and territorial grantee capacity for detecting and responding to infectious diseases and other public health threats.
CDC	State Healthcare Associated Infections (HAI) Prevention	12.0	To strengthen public health infrastructure for HAI activities related to monitoring, response, and prevention across all health care settings and to accelerate electronic reporting to detect HAIs at the state level.
CDC	Heart Disease and Stroke Prevention State Grants	73.0	To implement improved and enhanced heart disease and stroke prevention efforts.

Agency	Activity or Program	Allocation	Use of Funds
CDC	Million Hearts Program	4.0	To improve cardiovascular disease and stroke prevention by promoting medication management and adherence strategies and improving the ability to track blood pressure and cholesterol controls.
CDC	National Early Care Collaboratives	4.0	To meet the national Preventing Childhood Obesity (2nd Ed.) standards in several states/territories/tribes resulting in improved obesity prevention practices in early childcare and education facilities and equitable access to early childcare and education services.
CDC	Nutrition, Physical Activity, and Obesity (NPAO)	35.0	To reduce obesity and obesity-related diseases through state programs, research, surveillance, training, intervention development and evaluation, leadership, policy and environmental change, communication and social marketing, and partnership development.
CDC	Tobacco Use Prevention	105.0	To raise awareness and shift key attitudes and beliefs about the harms of tobacco use and exposure to secondhand smoke in areas of the country with some of the highest rates of tobacco use prevalence.
CDC	Preventive Health and Health Services Block Grants	160.0	To support programs that focus on the leading causes of death and disability and the ability to respond rapidly to emerging health issues, including outbreaks of foodborne infections and waterborne diseases.
CDC	Racial and Ethnic Approaches to Community Health (REACH)	30.0	To improve linkages between the health care system and minority communities with unique social, economic, and cultural circumstances; and change the chronic disease conditions and risk factors in local communities.

Agency	Activity or Program	Allocation	Use of Funds
CDC	Immunization	160.3	To improve the public health immunization infrastructure in order to maintain and increase vaccine coverage among children, adolescents, and adults.
CDC	Lead Poisoning Prevention	13.0	To support and enhance surveillance capacity at the state and city level to prevent and, ultimately, eliminate childhood lead poisoning.
CDC	Workplace Wellness	10.0	To improve the health of employees and organizations through the application of science-based programs, policies, and practices that address chronic disease prevention and health promotion in the workplace.
SAMHSA	Suicide Prevention	12.0	To support the National Strategy on Suicide Prevention, Garrett Lee Smith State/Tribal grants, Garrett Lee Smith Campus grant programs, National Suicide Prevention Lifeline program, and the Suicide Prevention Resource Center grant.
SAMHSA	Access to Recovery	50.0	To help people achieve long-term, lasting recovery from substance use problems and disorders and/or assist individuals who need help maintaining their recovery.
Total		\$928.0	