Health Care Reform: Implications for Public Health

Susan Polan, PhD
American University – Next steps in Health Reform 2017
Overview

- About APHA
- Role of public health
- Public health in health reform
- Challenges
- Opportunities
The American Public Health Association champions the health of all people and all communities. We strengthen the profession of public health, promote best practices and share the latest public health research and information. We are the only organization that influences federal policy, has a 140-plus year perspective and brings together members from all fields of public health. Learn more at www.apha.org.

- We have members in every community and 54 state and regional affiliates
APHA Strategic Plan Summary

The U.S. is ranked 34th globally in life expectancy.

The foundation of all APHA work builds on three overarching priorities:
- Ensure the right to health and health care
- Create health equity
- Build public health infrastructure and capacity
Role of public health
WE ARE THE GUARDIANS OF THE FUTURE
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Data Source: National Vital Statistics System, National Center for Health Statistics, CDC. 
Produced by: National Center for Injury Prevention and Control, CDC using WISQARS™.
America Is Not Getting Good Value for Its Health Dollar

The U.S. spends more money per person on health than any other country, but our lives are shorter—by nearly four years—than expected based on health expenditures.

Prepared for the Robert Wood Johnson Foundation by the Center on Social Disparities in Health at the University of California, San Francisco.
Sources: OECD Health Data 2007.
Does not include countries with populations smaller than 500,000. Data are for 2003.
*Per capita health expenditures in 2003 U.S. dollars, purchasing power parity
© 2008 Robert Wood Johnson Foundation

www.commissiononhealth.org
Why The U.S. Performs So Poorly

- Lowest rank for health outcomes for high income countries
- Lack of universal coverage
- Complex service delivery & payment
- Focus on treatment over primary care & preventive care
- Inadequate focus on social determinants

Commonwealth fund, 2017
In OECD, for every $1 spent on health care, about $2 is spent on social services.

In the US, for $1 spent on health care, about 55 cents is spent on social services.
What do we know?

• Biggest threat to health in the US is preventable disease
• Access to care ⇔ Health
• Root causes of these diseases are linked to social determinants and conditions that shape opportunity to attain good health
Health is a state of complete physical, mental, and social well-being
So....Health Is About More Than Healthcare

Figure 2

Social Determinants of Health

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Health Outcomes
Mortality, Morbidity, Life Expectancy, Health Care Expenditures, Health Status, Functional Limitations
Public health in health reform
The ACA Was Designed To Address

- Expanding health insurance coverage
- Enhance the system focus on prevention
- Increase attention to Social determinants of health & health disparities
- Reform the delivery and payment system to pay for results vs volume
- Bend the cost curve and make insurance affordable for individuals and families
- Improve the U.S. health outcomes
Community Prevention

ACA Population Health Strategies

- National Prevention Council & Strategy
- Community Preventive Services Task Force (Research)
- Community health needs assessments
- Health education
  - Menu labelling
  - Tobacco risk reduction
- Health equity
  - Data collection
  - Targeted programs on health equity funded
Prevention and Public Health Fund

• A much needed investment in prevention broadly defined
• The U.S.’s first mandatory funding for public health
• For prevention / public health innovation
• Meant to supplement, not supplant, existing funding
• Public health system still underfunded; but a start
Move upstream

- Energy policy is health policy
- Transportation policy is health policy
- Land use policy is health policy
- Education policy is health policy
- Tax policy is health policy
- Agricultural policy is health policy
- Economic development policy is health policy
- Criminal justice policy is health policy

www.thenationshealth.org/sdoh
Challenges
Percent change since FY2010, adjusted for inflation

- Cut through FY2017
- Additional cut proposed in FY2018

- EPA
- State¹
- Justice
- Labor
- Agriculture¹
- HUD
- Transportation
- HHS
- Treasury
- Energy²
- Education
- Interior

¹ Includes USAID and other Treasury International programs, as well as the Food for Peace Title II grants (excluded from Dept of Agriculture).
² Excludes National Nuclear Security Administration.

Note: EPA = Environmental Protection Agency. HUD = Housing and Urban Development. HHS = Health and Human Services. Commerce is excluded due to the complication of funding for the Census Bureau.

2018 Appropriations – HRSA

• HRSA fared well in the Senate bill. Funding for HRSA totaled $6.218 billion for the agency’s discretionary budget authority. This represents a $4.45 million increase over FY 2017.

• In good news for maternal health, the bill provides $5 million for a new Screening and Treatment for Maternal Depression program as authorized in the 21st Century Cures Act to make grants to states to establish, improve or maintain programs to train professionals to screen, assess and treat for maternal depression in women who are pregnant or have given birth within the preceding 12 months. A handful of programs received small increases in funding, including rural health and workforce programs.
2018 Appropriations - CDC

- The Senate Labor-HHS-Education appropriations bill, which has already passed the full committee, provides $7.119 billion in program level funding to the CDC. This total is about $44.95 million less than what the agency was allocated in FY 2017.
  - Elimination of the REACH program, totaling $50.9 million annually.
  - Most other CDC programs were level funded and a few programs got small increases in the Senate bill.
  - House bill provides $118 million less to CDC than the Senate version. On a positive note, the cuts proposed in the House bill to CDC’s National Center for Environmental Health, including the elimination of the Climate and Health Program and the nearly $9 million reduction to the National Environmental Public Health Tracking Network, were not included in the Senate version, which provided level funding for all NCEH programs.
CDC funding FY14-FY18

FY 2014
- Budget Authority: $5,791
- PHS Evaluation Transfer: $211
FY 2015
- Budget Authority: $5,998
- PHS Evaluation Transfer: $15
FY 2016
- Annualized FY 2017 CR
- Budget Authority: $6,271
- PHS Evaluation Transfer: $15
FY 2017 Annualized CR
- Budget Authority: $6,294
FY 2018 PB
- Public Health and Social Services Emergency Fund: $4,992
- Prevention Fund: $841
- PHS Evaluation Transfer: $143

Total Annualized FY 2017 CR: $7,185
Prevention fund 2010-2025

Prevention and Public Health Fund Allocations (FY 2010 to 2025):
Funding Under P.L. 112-96 and Under H.R. 6 (21st Century Cures) vs. Funding
Established by P.L. 110-48 (ACA)
(dollars in billions)
Racial and Ethnic Approaches to Community Health program (REACH)

- Only community-based, culturally relevant and multi-disciplinary federally funded program dedicated to the elimination of racial and ethnic health disparities health and only community health program currently funded at CDC
  - tackling risk factors for some of the most expensive and burdensome health conditions impacting racial and ethnic groups
Opioids

- Nationwide health emergency ≠ a comprehensive plan or assure additional dollars. Need
  - to increase health insurance coverage, especially Medicaid,
  - protect essential benefits so that victims of the crisis can access treatment.
  - systems-based approach to reduce the supply of opioids across the country,
  - increase access to overdose reversal drugs and provide dedicated funding to health agencies responding to the crisis. The administration should also stop its attempts to repeal the Affordable Care Act, cut Medicaid and defund the Prevention and Public Health Fund.