

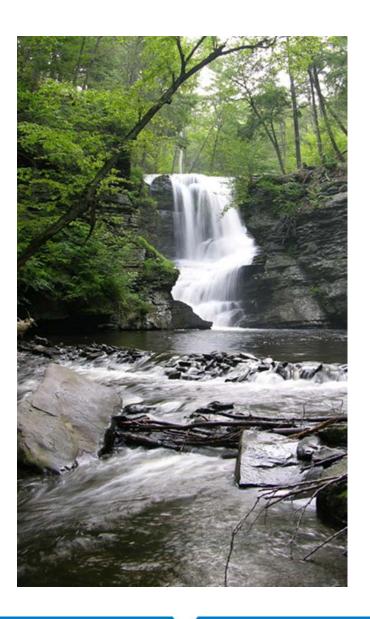
Susan Polan, PhD

American University – Next steps in Health Reform 2017



Overview

- About APHA
- Role of public health
- Public health in health reform
- Challenges
- Opportunities





About APHA



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

We will achieve our mission if we: Support a diverse · Strengthen Strengthen Build a public health workforce our core public health public health · Foster new Expand our base practice movement public health science · Advance health THE Facilitate in all policies HEALTHIEST cross-sector efforts NATION Align organizational capacity and infrastructure · Configure components, staff and programs to maximize opportunities to achieve central challenge · Ensure responsible stewardship

Role of public health







10 Leading Causes of Death by Age Group, United States - 2014

	Age Groups										
Rank	<1	1-4	5-9	10-14	15-24	25-34	35-44	45-54	55-64	65+	Total
1	Congenital Anomalies 4,746	Unintentional Injury 1,216	Unintentional Injury 730	Unintentional Injury 750	Unintentional Injury 11,836	Unintentional Injury 17,357	Unintentional Injury 16,048	Malignant Neoplasms 44,834	Malignant Neoplasms 115,282	Heart Disease 489,722	Heart Disease 614,348
2	Short Gestation 4,173	Congenital Anomalies 399	Malignant Neoplasms 436	Suicide 425	Suicide 5,079	Suicide 6,569	Malignant Neoplasms 11,267	Heart Disease 34,791	Heart Disease 74,473	Malignant Neoplasms 413,885	Malignant Neoplasms 591,699
3	Maternal Pregnancy Comp. 1,574	Homicide 364	Congenital Anomalies 192	Malignant Neoplasms 416	Homicide 4,144	Homicide 4,159	Heart Disease 10,368	Unintentional Injury 20,610	Unintentional Injury 18,030	Chronic Low. Respiratory Disease 124,693	Chronic Low. Respiratory Disease 147,101
4	SIDS 1,545	Malignant Neoplasms 321	Homicide 123	Congenital Anomalies 156	Malignant Neoplasms 1,569	Malignant Neoplasms 3,624	Suicide 6,706	Suicide 8,767	Chronic Low. Respiratory Disease 16,492	Cerebro- vascular 113,308	Unintentional Injury 136,053
5	Unintentional Injury 1,161	Heart Disease 149	Heart Disease 69	Homicide 156	Heart Disease 953	Heart Disease 3,341	Homicide 2,588	Liver Disease 8,627	Diabetes Mellitus 13,342	Alzheimer's Disease 92,604	Cerebro- vascular 133,103
6	Placenta Cord. Membranes 965	Influenza & Pneumonia 109	Chronic Low. Respiratory Disease 68	Heart Disease 122	Congenital Anomalies 377	Liver Disease 725	Liver Disease 2,582	Diabetes Mellitus 6,062	Liver Disease 12,792	Diabetes Mellitus 54,161	Alzheimer's Disease 93,541
7	Bacterial Sepsis 544	Chronic Low Respiratory Disease 53	Influenza & Pneumonia 57	Chronic Low Respiratory Disease 71	Influenza & Pneumonia 199	Diabetes Mellitus 709	Diabetes Mellitus 1,999	Cerebro- vascular 5,349	Cerebro- vascular 11,727	Unintentional Injury 48,295	Diabetes Mellitus 76,488
8	Respiratory Distress 460	Septicemia 53	Cerebro- vascular 45	Cerebro- vascular 43	Diabetes Mellitus 181	HIV 583	Cerebro- vascular 1,745	Chronic Low. Respiratory Disease 4,402	Suicide 7,527	Influenza & Pneumonia 44,836	Influenza & Pneumonia 55,227
9	Circulatory System Disease 444	Benign Neoplasms 38	Benign Neoplasms 36	Influenza & Pneumonia 41	Chronic Low Respiratory Disease 178	Cerebro- vascular 579	HIV 1,174	Influenza & Pneumonia 2,731	Septicemia 5,709	Nephritis 39,957	Nephritis 48,146
10	Neonatal Hemorrhage 441	Perinatal Period 38	Septicemia 33	Benign Neoplasms 38	Cerebro- vascular 177	Influenza & Pneumonia 549	Influenza & Pneumonia 1,125	Septicemia 2,514	Influenza & Pneumonia 5,390	Septicemia 29,124	Suicide 42,773

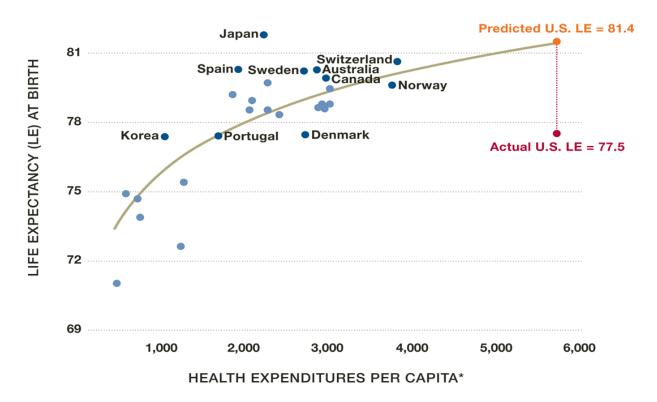
Data Source: National Vital Statistics System, National Center for Health Statistics, CDC. Produced by: National Center for Injury Prevention and Control, CDC using WISQARS™.





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

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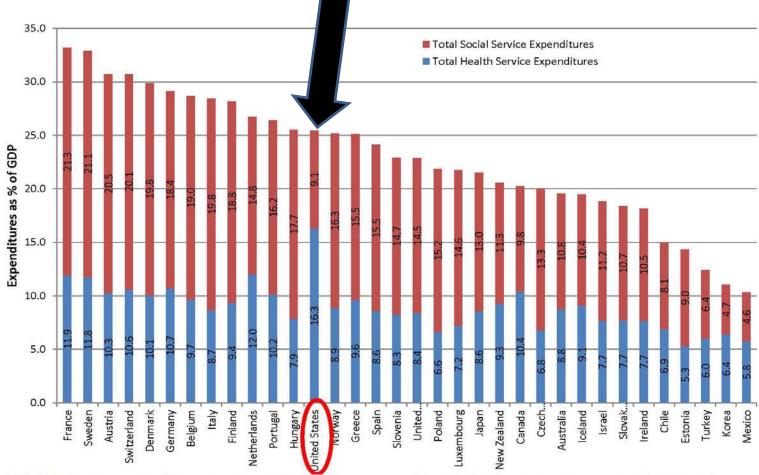
www.commissiononhealth.org



Why The U.S. Performs So Poorly



Spending On Social Services v. Health



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
- 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

Social Determinants of Health

Economic Stability	Neighborhood and Physical Environment	Education	Food	Community and Social Context	Health Care System
Employment	Housing	Literacy	Hunger	Social	Health
Income	Transportation	Language	Access to	integration	coverage
Expenses	Safety	Early childhood education	healthy options	Support systems	Provider availability
Debt	Parks			Community	Provider
Medical bills	Playgrounds	Vocational training		engagement	linguistic and cultural
Support	Walkability	Higher		Discrimination	competency
		education			Quality of care

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



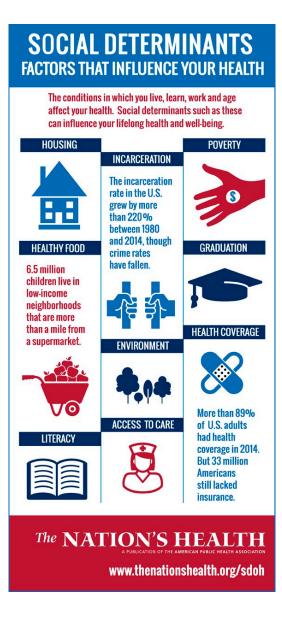
Prevention and Public Health Fund

- 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

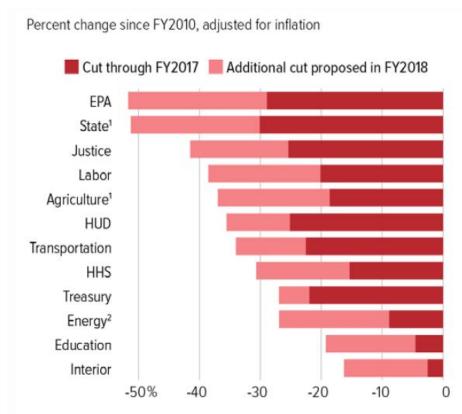


www.thenationshealth.org/sdoh



Challenges





¹ Includes USAID and other Treasury international programs, as well as the Food for Peace Title II grants (excluded from Dept of Agriculture).

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.

Source: CBPP based on the Office of Management and Budget and Congressional Budget Office, Inflation data from Bureau of Labor Statistics.



² Excludes National Nuclear Security Administration.



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.

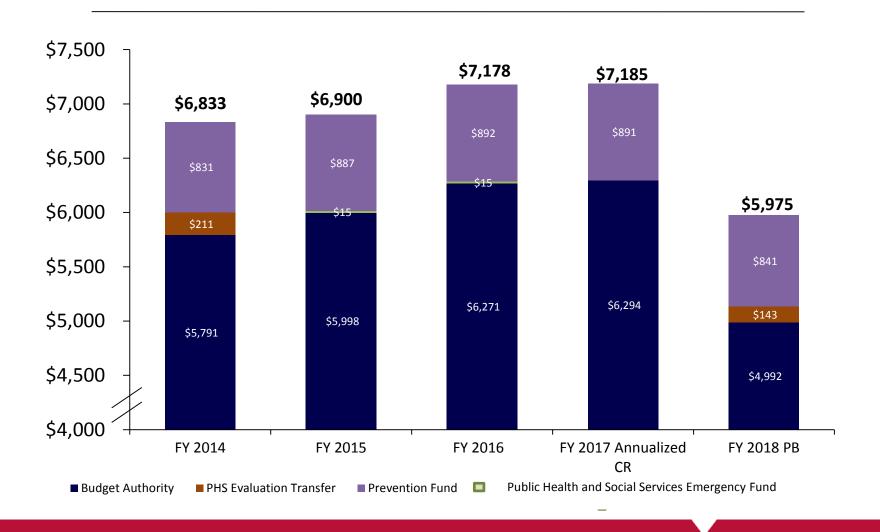


2018 Appropriations - CDC

- 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

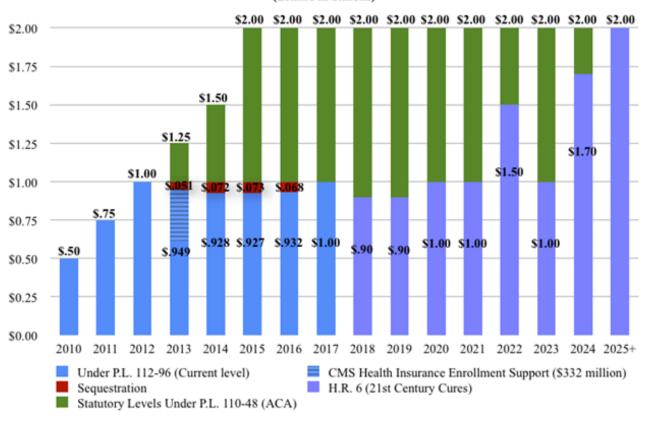




Prevention fund 2010-2025

Prevention and Public Health Fund Allocations (FY 2010 to 2025): Funding Under 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)

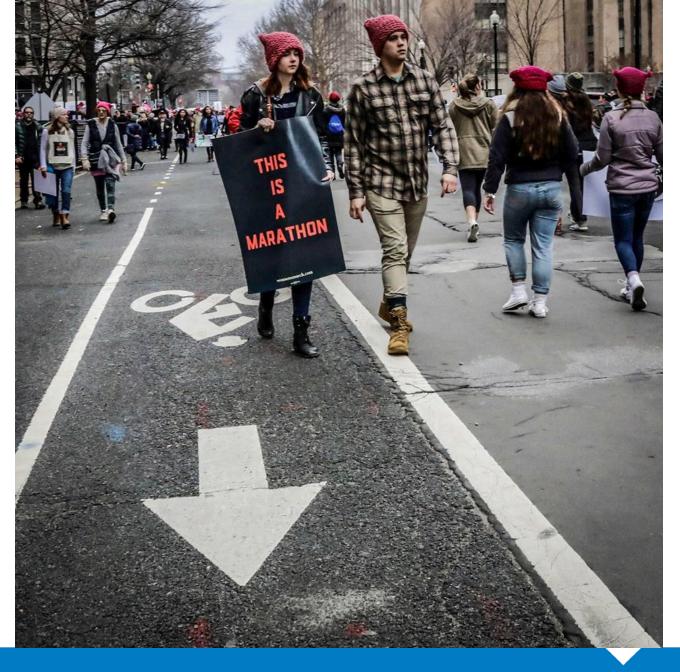
- Only community-based, culturally relevant and multidisciplinary federally funded program dedicated to the elimination of racial and ethnic health disparities health and only community health program currently funded at CDC
 - tackling risk factors for some of the most expensive and burdensome health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





Susan Polan, PhD
AED, Public Affairs and Advocacy
202-777-2510
Susan.polan@apha.org





800 I Street, NW Washington, DC 20001-3710 202-777-APHA www.apha.org