



Senate Health Reform Bill: Summary of Selected Prevention Provisions

Establishing Prevention Goals and Priorities:

National Prevention, Health Promotion & Public Health Council (Sec. 4001) – Creates a Council within HHS to provide coordination and leadership at the Federal level, and among Federal departments and agencies, with respect to prevention, wellness and health promotion practices, the public health system and integrative health care in the U.S. & to develop the National Prevention Strategy. The Council shall be composed of departmental Secretaries from across the federal government, with the Surgeon General serving as Chair.

National Prevention and Health Promotion Strategy (Sec. 4001) – Tasks the Council with creating a national strategy to: set goals and objectives for improving health through federally-supported prevention, health promotion and public health programs, establish measurable actions and timelines to carry out the strategy, and make recommendations to improve Federal prevention, health promotion, public health and integrative health care practices.

Funding Community Prevention:

Prevention and Public Health Fund (Sec. 4002) Establishes a Fund to provide for an expanded and sustained national investment in prevention and public health programs (over the FY 2008 level). The Fund will support programs authorized by the Public Health Service Act, for prevention, wellness and public health activities, including prevention research and health screenings and initiatives, such as the Community Transformation grant program, the Education and Outreach Campaign for Preventive Benefits, and immunization programs. Funding levels: FY 2010 - \$500 million; FY 2011 - \$750 million; FY 2012 - \$1 billion; FY 2013 - \$1.25 billion; FY 2014 - \$1.5 billion; FY 2015 and each fiscal year thereafter- \$2 billion.

Community Health Centers and the National Health Service Corps Fund (Sec. 10503) - Creates a Community Health Center Fund that provides enhanced funding for the Community Health Center program, the National Health Service Corps, and construction and renovation of community health centers. **Note that the President's proposal would increase this funding.**

Authorizing Targeted Community Prevention Programs:

Community Transformation Grants (Sec. 4201) – Authorizes CDC to award competitive grants to State and local governmental agencies and community-based organizations for the implementation, evaluation, and dissemination of evidence-based community preventive health activities in order to reduce chronic disease rates, prevent the development of secondary conditions, address health disparities, and develop a stronger evidence-base of effective prevention programming. Requires development of a detailed plan including the policy, environmental programmatic and as appropriate infrastructure changes needed to promote healthy living and reduce disparities.

Healthy Aging, Living Well; Evaluation of Community-Based Prevention; and Wellness Programs for Medicare Beneficiaries (Sec. 4202) - Authorizes the Secretary to award competitive grants to health departments and Indian tribes to carry out five-year pilot programs to provide public health community interventions, screenings, and when necessary, clinical referrals for individuals who are between 55-64 years old.

National Diabetes Prevention Program (Sec. 5316) - Creates a CDC National Diabetes Prevention Program targeted at adults at high risk for diabetes, which entails a grant program for community-based diabetes prevention program model sites.

Education & Outreach Campaign Regarding Preventive Benefits (Sec. 4004) - Directs the Secretary to provide for the planning and implementation of a national public-private partnership for a prevention and health promotion outreach and education campaign to raise public awareness of health improvement across the lifespan.

Enhancing Prevention Research:

Clinical and Community Preventive Services Task Forces (Sec. 4003) – Defines, clarifies duties of, and provides better coordination between the U.S. Preventive Services Task Force and the Community Preventive Services Task Force.

Research on Optimizing the Delivery of Public Health Services (Sec. 4301) – Directs the Secretary to fund research in the area of public health services and systems.

Enhancing the Workforce:

National Health Care Workforce Commission (Sec. 5101) – Establishes a commission to serve as a national resource for Congress, the President, States, and Localities, determine whether the demand for health care workers is being met, identify barriers to coordination and encourage innovation. It shall disseminate information on retention practices for health care professionals and shall review current and projected health care workforce supply and demand and make recommendations regarding healthcare workforce priorities, goals and policies. The Commission shall communicate and coordinate with a variety of federal agencies and departments. Specific topics to be reviewed include health care workforce supply and distribution, health care workforce education and training capacity; existing education loan and grant programs, the implications of federal policies; the healthcare workforce needs of specific populations, and recommendations creating or revising loan repayment and scholarship programs. Public health professionals are included in the definition of health care workforce and the definition of health professionals. Public health workforce capacity is also included in the high priority areas list.

State Health Care Workforce Development Grants (Sec. 5102) –

Establishes a competitive healthcare workforce development grant program to enable State partnerships to complete comprehensive planning and to carry out activities leading to coherent and comprehensive health care workforce development strategies at the State and local levels. Authorizes \$8 million for planning grants and \$150 million for implementation grants for FY 2010 and such sums for each subsequent year.

Health Care Workforce Program Assessment (Sec. 5103) – Codifies the existing National Center for Health Care Workforce Analysis to provide for the development of information describing the health care workforce and the analysis of related issues and collect, analyze and report data related to programs under this title. The National Center and relevant regional and State centers and agencies shall collect labor and workforce information and provide analyses and reports to the Commission.

Public Health Workforce Recruitment and Retention Programs (Sec. 5204) – Establishes a public health workforce loan repayment program to eliminate critical public health workforce shortages in Federal, State, local and tribal public health agencies. Individuals receiving assistance must work at least three years in these agencies. In FY 2010, \$195 million is authorized to be appropriated for this program, and such sums as necessary for FY 2011-2015. Sec. 5205 creates allied health workforce recruitment and retention programs.

Training for Mid-Career Public and Allied Health Professionals (Sec. 5206) - Authorizes the Secretary to make grants or enter into contracts to award scholarships to mid-career public health and allied health professionals to enroll in degree or professional training programs. Authorizes \$60 million for these programs in FY 2010 and such sums as necessary for FY 2011-2015.

Elimination of cap on Commissioned Corps (Sec. 5209) This section strikes the required cap of 2,800 for members of the Regular Corps.

Establishing a Ready Reserve Corps (Sec. 5210) - Assimilates active duty Ready Reserve Officers into the Regular Corps & establishes a Ready Reserve to participate in training exercises, be available and ready for involuntary calls to active duty during national emergencies and public health crises, be available for deployment and for backfilling positions left vacant during deployment of active duty Corps members, and be available for service in isolated, hardship & medically underserved communities. This section authorizes \$5 million for FY 2010 – FY 2014 for carrying out the duties and responsibilities of the Commissioned Corps under this section and for recruitment and training; and \$12.5 million for the Ready Reserve Corps for FY 2010 – FY 2014.

Grants to Promote the Community Health Workforce (Sec. 5313) – Directs the Director of CDC to award grants to promote positive health behaviors and outcomes for populations in medically underserved communities through the use of community health workers.

Epidemiology-Laboratory Capacity Grants (Sec. 4304) Directs the Secretary (subject to the availability of appropriations) to establish an Epidemiology and Laboratory Capacity Grant Program to award grants to eligible entities to assist public health agencies in improving surveillance for and response to infectious diseases and other conditions of public health importance. Authorizes \$190 million for each year of fiscal years 2010-2013 to carry out this section.

Fellowship Training in Public Health (Sec. 5314) – Authorizes funding for fellowship training in applied public health epidemiology, public health laboratory science, public health informatics, and expansion of the epidemic intelligence service in order to address documented workforce shortages in State and local health departments. Authorizes, for each of fiscal years 2010 through 2013, \$5 million for epidemiology fellowship training programs, \$5 million for

laboratory fellowship training programs; \$5 million for the Public Health Informatics Fellowship Program; and \$24,500,000 for expanding the Epidemic Intelligence Service.

Training in General, Pediatric and Public Health Dentistry (Sec. 5303) – Authorizes the Secretary to make grants to, or enter into contracts with, a school of dentistry, public or nonprofit private hospital or a public or private nonprofit entity to plan, develop and operate or participate in an approved professional dentistry program; to provide financial assistance to dental students, residents, practicing dentists and dental hygiene students, and for other purposes.

United States Public Health Sciences Track (Sec. 5315) Authorizes the establishment of a United States Public Health Sciences Track with authority to grant appropriate advanced degrees in a manner that uniquely emphasizes team based service, public health, epidemiology, and emergency preparedness and response. Students receive tuition remission and a stipend and are accepted as Commissioned Corps officers with a 2-year service commitment for each year of school covered. Included among the graduates shall be 100 public health students annually. Includes a provision that would develop elite federal disaster teams.

Preventive Medicine & Public Health Training Grant Program - Directs the Secretary to award grants to or enter into contracts with eligible entities to provide training to graduate medical residents in preventive medicine specialties.

Enhancing Access to Preventive Services and Programs through the Health Care System:

Essential Health Benefits Requirements (Sec. 1302) – Includes an essential health benefits package that covers essential health benefits defined by the Secretary and limits cost-sharing. Included in the general benefit categories are preventive and wellness services and chronic disease management, among other things.

Coverage of Preventive Health Services (Sec. 2713) – Stipulates that a group health plan and a health insurance issuer offering group or individual health insurance coverage shall provide coverage for and shall not impose any cost sharing requirements for: (1) evidence based items or services that have in effect a rating of ‘A’ or ‘B’ in the current recommendations of the US Preventive Services Task Force; (2) immunizations that have in effect a recommendation from ACIP; (3) with respect to infants, children, and adolescents, evidence-informed preventive care and screenings provided for in the comprehensive guidelines supported by HRSA; (4) with respect to women, additional preventive care and screenings not described in paragraph (1) as provided for in comprehensive guidelines supported by HRSA.

Removal of Barriers to Preventive Services in Medicare (Sec. 4104) – Waives coinsurance requirements for most preventive services, requiring Medicare to cover 100 percent of the costs. Services for which no coinsurance or deductible would be required are the personalized prevention plan services, an initial preventive physical examination and any covered preventive service if it is recommended with a grade of A or B by the USPSTF.

Medicare Coverage of Annual Wellness Visit Providing a Personalized Prevention Plan (Sec. 4103) – Provides Medicare Part B coverage, with no co-payment or deductible, for personalized prevention plan services. Personalized prevention plan services means the creation of a plan for an individual that includes a health risk assessment and may include other elements,

such as updating family history, listing providers that regularly provide medical care to the individuals, BMI measurement, and other screenings and risk factors.

Evidence-Based Coverage of Preventive Services in Medicare (Sec. 4105) – Provides the Secretary with the authority to modify coverage of existing preventive services, consistent with USPSTF recommendations.

Improving Access to Preventive Services for Eligible Adults in Medicaid (Sec. 4106) – The current Medicaid State option to provide other diagnostic, screening, preventive, and rehabilitation services would be expanded to include: (1) any clinical preventive service recommended with a grade of A or B by the USPSTF and (2) with respect to adults, immunizations recommended by ACIP and their administration. States that cover these services and vaccines, and prohibit cost-sharing would receive an increased Federal medical assistance percentage (FMAP) of one percentage point for these services.

Coverage of Comprehensive Tobacco Cessation Services for Pregnant Women in Medicaid (4107) - States would be required to provide Medicaid coverage for counseling and pharmacotherapy for tobacco cessation by pregnant women without cost-sharing.

Incentives for Prevention of Chronic Diseases in Medicaid (Sec. 4108) – Directs the Secretary to award grants to States to carry out initiatives to provide incentives to Medicaid beneficiaries who successfully participate in a healthy lifestyles program and demonstrate changes in health risk and outcomes.

Funding for Childhood Obesity Demonstration Project (Sec. 4306) – CHIPRA established a Childhood Obesity Demonstration Project and authorized \$25 million for FY 09-13. This section appropriates \$25 million for the Secretary to carry out the demo in FY 10 – FY 14.

Miscellaneous

Nutrition Labeling of Standard Menu Items at Chain Restaurants (Sec. 4205) – Establishes nutrition labeling of standard menu items at chain restaurants (20 or more locations doing business under the same name).

Employer-Based Wellness Programs (Sec. 4303) – Directs CDC to provide employers with TA, consultation and tools in evaluating wellness programs and build evaluation capacity among workplace staff. Directs CDC to study and evaluate employer-based wellness practices.

Grants for Small Businesses to Provide Comprehensive Workplace Wellness Programs (Sec. 10408) - Directs the Secretary to award grants to small businesses to provide employees with access to comprehensive workplace wellness programs.