

## Federal Health Reform: Prevention & Wellness Provisions

The Senate Health, Education, Labor and Pensions (HELP) Affordable Choices Act and the House Tri-Committee H.R. 3200, include efforts to boost prevention and wellness. The following is a summary of some of those provisions.

**Senate Approach to Investment in Prevention and Wellness.** The Senate HELP bill directs the federal Health and Human Services (HHS) secretary to plan and implement a national public-private partnership for a prevention and health promotion outreach and education campaign. The campaign would be focused on raising public awareness of health improvements across the life span.

The measure includes “Community Transformation” grants to state and local governmental agencies and community-based organizations. The grants would be used for the implementation, evaluation, and dissemination of proven evidence-based community preventive health activities to reduce chronic disease rates, address health disparities, and develop a stronger evidence base of effective prevention.

The Senate bill provides for grants to state or local health departments to carry out 5-year pilot programs to provide public health community interventions, screenings, and — where necessary — clinical referrals for individuals who are between 55 and 64 years old.

The Senate approach includes a program to fund “Community Health Teams” to support the development of medical homes by increasing access to comprehensive, community-based, coordinated care.

Additionally, the Senate measure includes the “Healthy Aging, Living Well” program to improve the health status of the pre-Medicare-eligible population to help control chronic disease and reduce Medicare costs. The Centers for Disease Control (CDC) would be authorized to provide grants to states or large local health departments to conduct pilot programs in the 55 to 64-year-old population. Pilot programs would evaluate chronic disease risk factors, conduct evidence-based public health interventions, and ensure that individuals identified with chronic disease or at-risk for chronic disease receive clinical treatment to reduce risk.

**House Approach to Investment in Prevention and Wellness.** The House legislation directs the HHS secretary to develop a “National Prevention and Wellness Strategy” to improve the nation’s health through evidence-based clinical and community-based prevention and wellness activities including core public health infrastructure improvement activities.

The measure establishes the Prevention and Wellness Trust, which authorizes \$2.4 billion in FY 2010. The trust increases each year and grows to \$4.6 billion by FY 2019.

The measure also authorizes funds from the Prevention and Wellness Trust to be used for Community Based Prevention and Wellness Services to provide evidence-based, community-

based prevention and wellness services in priority areas identified in the National Prevention and Wellness Strategy. Funding builds from \$1.1 billion in FY 2010 to \$2.3 billion in FY 2019.

**Prevention Task Force.** Both measures require a Community Preventive Services Task Force to review the scientific evidence related to the effectiveness, appropriateness and cost-effectiveness of community preventive interventions. The House version also authorizes up to \$30 million in Prevention and Wellness funds for a Task Force on Clinical Preventive Services.

**Prevention Research.** Both vehicles provide funds for prevention research. The Senate version directs HHS and CDC to fund research in the area of public health services and systems that examines evidence-based practices relating to prevention, with particular focus on high priority areas in the National Prevention Strategy or Healthy People 2020.

The House authorizes funding for Prevention and Wellness research in priority areas identified in the National Prevention and Wellness Strategy and by the Clinical Preventive Services and Community Preventive Services Task Forces. Funding increases from \$100 million in FY 2010 to \$383 million in FY 2019.

**Oral Health.** Only the Senate version provides oral health provisions, which includes a 5-year national public education campaign; demonstration grants for dental disease management activities; requirement to update and improve Pregnancy Risk Assessment Monitoring System (PRAMS) as it relates to oral health.

**Immunizations.** Both versions contain immunization provisions. The House expands access to vaccines and includes public health clinics under the vaccines for children program. The Senate includes grants to states to improve the provision of recommended immunizations for all ages. This version also allows HHS to negotiate and enter into contracts with manufacturers of vaccines for the purchase and delivery of vaccines for adults. Additionally, the Senate allows states to purchase adult vaccines directly from manufacturers at HHS prices.

**Worksite Wellness.** The Senate HELP measure includes specific worksite wellness provisions. The measure directs the CDC director to establish a workplace wellness promotion campaign and to conduct a national worksite health policies and programs survey to assess employer-based health policies and programs. The Senate version also includes workplace wellness demonstration projects. The Senate version allows premium discounts for employees who participate in workplace wellness programs from 20 to 30 percent. The House does not include similar provisions.

**Coverage of Preventive Services.** Both measures require health plans to cover certain clinical preventive services, such as well baby and well child care. Additionally, health plans would be required to impose minimal costs sharing on certain clinical preventative services and items.

Both measures establish a body to provide recommendations on essential health benefits to be covered by health insurance.

Both versions eliminate Medicare cost sharing for certain clinical preventative services.

The Senate authorizes \$50 million for nurse managed health clinics to provide comprehensive primary care and wellness services in medically underserved communities.

**Other Prevention Provisions.** The Senate version requires nutrition labeling of menu items at chain restaurants and of articles of food sold from vending machines.

The Senate version also establishes a “National Prevention, Health Promotion and Public Health Council.” This group is a multidisciplinary group intended to provide coordination and leadership at the federal level on prevention, wellness, and health promotion practices; the public health system; and integrative health care. The council is charged with developing a national prevention, health promotion and public health strategy.

The Senate measure also establishes a “Coordinated Environmental Public Health Network.” This network will build upon and coordinate among existing environmental and health data collection systems and create state environmental public health networks. These networks will track the incidence, prevalence, and trend of priority chronic conditions and potentially related environmental exposures.

The Senate also creates a temporary Right Choices Program to provide uninsured adults with access to preventive services.