The Affordable Care Act
Summary and Progress of Key Prevention and Public Health Provisions

The following document provides a high-level overview of prevention and public health provisions included in the Affordable Care Act (as amended by the Health Care and Education Reconciliation Act) as well as implementation progress to-date.

§ 2713 – Coverage of Preventive Health Services
- Requires all new group health plans to cover USPSTF (see section 4003) recommended and other preventive health services.

**Update:**
- On July 14, HHS/Labor/Treasury released an interim final rule with comment period implementing this coverage requirement for group health plans (including self-insured plans) and health insurance products. [http://www.healthcare.gov/center/regulations/prevention/recommendations.html](http://www.healthcare.gov/center/regulations/prevention/recommendations.html)

§ 4001 – National Prevention, Health Promotion, and Public Health Council
- Establishes “the Council” within HHS, chaired by the Surgeon General and consisting of Secretaries and Directors (or their designees) from twelve statutory agencies and additional agencies at the Surgeon General’s discretion.
- Council will coordinate leadership on prevention, wellness, and health promotion policies and activities across the federal level.
- Council will develop the National Prevention and Health Promotion Strategy (NPS) with consultation from relevant stakeholders and an Advisory Group of 25 non-Federal public health and health care stakeholders.
  - NPS is due within 1 year of enactment (March 23, 2011).
  - Strategy must set specific goals and objectives for improving health, establish specific actions and timelines, and determine accountability within and across Federal agencies.
- Council will submit an annual report to Congress every year through 2015.
**Update:**

- On June 10, President Obama signed an Executive Order establishing the Council.
- The Council released a 2010 Annual Status Report on June 30, 2010, which included a description of preliminary work completed, proposed guiding principles to steer the NPS development process, and a work plan and timeline.
- On October 1, the Council released a Draft Framework to guide NPS development, including Vision, Goals, and Strategic Directions. The Council accepted public comment on this Draft Framework through December 5.
- The Council has not yet announced the formation of an Advisory Group.
- For more information: [http://www.healthcare.gov/center/councils/nphpphc/](http://www.healthcare.gov/center/councils/nphpphc/)

§ 4002 – Prevention and Public Health Fund

- Establishes “the Fund” administered by the HHS Office of the Secretary to provide for “expanded and sustained national investment in prevention and public health programs.”
- Dedicated (authorized and appropriated funding as follows):
  - FY2010 - $500 million
  - FY2011 - $750 million
  - FY 2012 - $1 billion
  - FY 2013 - $1.25 billion
  - FY 2014 - $1.5 billion
  - FY 2015 and after - $2.0 billion each year
- The Fund can be used to fund any program authorized by the Public Health Service Act over fiscal year 2008 levels for “prevention, wellness, and public health activities.”
  - House and Senate Appropriation Committees may also provide for the transfer of funds.

**Update:**

- In June, HHS announced FY2010 designations for the Fund, which of the appropriated $500 million included:
  - $126 million for Community and Clinical Prevention
    - Federal, state, and local prevention initiatives
    - Integrating primary care into community-based behavioral settings
    - Obesity prevention and fitness
    - Tobacco cessation
  - $70 million for Public Health Infrastructure
  - $31 million for Research and Tracking
    - Data collection and analysis
    - CDC Community Guide
    - Clinical Preventive Services Task Force
  - $23 million to expand CDC public health workforce training programs
- Unfortunately, the remaining $250 million was diverted to primary care programs. HHS has gone on record assuring this is a “one-shot” occurrence.
In September, more information was released about some of the FY2010 funding: http://www.hhs.gov/news/press/2010pres/09/20100924a.html

To-date, Senate and House appropriators have not enacted FY2011 appropriations bills.

- The Senate Labor/HHS/Education Appropriations Subcommittee FY2011 report (July 2010) would direct the bulk of the $750 million amount to the CDC ($663 million) for:
  - Community Transformation Grants ($220 million)
  - REACH ($50 million)
  - Chronic Disease state grants ($140 million)
  - Smoking Cessation ($90 million)
  - Epi/Lab Capacity grants ($50 million)
  - Prevention research centers ($10 million)
  - National Center for Health Statistics ($34 million)
  - Extramural grants for prevention research ($20 million)
  - Disability and health promotion ($5 million)
  - National Birth Defects Prevention Study ($5 million)
  - Community health worker demonstration grants ($30 million)
  - Task Force on Community Preventive Services ($7 million)

- The House Subcommittee report would transfer $594 million to CDC but materials released do not specify the fund breakdown.

- The Continuing Resolution passed by the House on December 8 includes the following designations for the FY2011 Fund appropriations:
  - $20 million for HRSA
  - $630 million for CDC
  - $88 million for SAMHSA
  - $12 million for AHRQ

§ 4003 – Clinical and Community Preventive Services

- Expands and clarifies the role of the U.S. Preventive Services Task Force (USPSTF) and Community Preventive Services Task Force and encourages coordination between the two.

Update:

- USPSTF has posted a list of “A” and “B” recommended services for the purposes of implementing the ACA. http://www.uspreventiveservicestaskforce.org/uspstf/uspabrecs.htm

- There are new coverage provisions and/or requirements for “A” and “B” services for private health plans (§2713), Medicare (§4104, 4105), and Medicaid (§4106).
§ 4004 – Education and Outreach Campaign
- Directs HHS to implement a public-private partnership to conduct prevention and health promotion outreach and an educational campaign.
- Directs CDC to implement a national science-based media campaign on health promotion and disease prevention.

§ 4101 – School-Based Health Centers
- Directs HHS to award grants to support school-based health centers in communities that face difficulties accessing pediatric health services.

§ 4102 – Oral Health
- Authorizes a five-year public health education campaign focused on oral healthcare prevention and education.
- Establishes demonstration grants and other oral health improvement initiatives.

§ 4103 – Medicare Coverage of Annual Wellness Visit
- Makes an annual wellness visit, including a personalized prevention plan, available to Medicare beneficiaries.

§ 4104 – Removal of Barriers to Preventive Services in Medicare
- Makes covered Medicare services with a USPSTF rating of “A” or “B” available to beneficiaries at no out-of-pocket cost.

§ 4105 – Evidence-based Coverage of Preventive Services
- Authorizes CMS to modify coverage of any currently-covered Medicare service consistent with a USPSTF recommendation if the service is not used for diagnosis or treatment.

**Update:**
- On June 25, CMS released a proposed rule to implement the annual wellness visit and new covered preventive services.

- On November 29, CMS published a CY2011 physician fee schedule final rule that includes implementation of the requirements of sections 4104 and 4105 for physician payments (separate rules addressed or will address other Medicare preventive care settings).

§ 4106 – Improving Access to Preventive Services for Eligible Adults in Medicaid
- Expands current option for States to provide DSPR services to include any USPSTF “A” or “B” service or ACIP recommended immunization.
- States that cover these services with prohibited cost-sharing for beneficiaries would receive a one point FMAP increase for these services.
§ 4107 – Coverage of Comprehensive Tobacco Cessation Services for Pregnant Women in Medicaid

- Requires States to provide Medicaid coverage for counseling and pharmaceutical therapy for tobacco cessation for pregnant women and prohibits associated cost-sharing.

§ 4108 – Incentives for Prevention of Chronic Diseases in Medicaid

- Creates HHS grants to States to administer programs to provide incentives to Medicaid beneficiaries who participate in healthy lifestyles programs and demonstrate changes in health risks and outcomes.

§ 4201 – Community Transformation Grants

- Authorizes CDC grants to State and local governments and community-based organizations to implement, evaluate, and disseminate evidence-based community preventive health activities to reduce chronic disease rates.

Update:

- In July and August 2010, Trust for America’s Health held two consultation meetings to gather input and consensus around implementation of the CTG program. Summary materials of those meetings can be found here: http://healthyamericans.org/health-reform/
- On November 4, Dialogue4Health, along with PolicyLink, Trust for America’s Health, Prevention Institute, and the Public Health Institute, hosted a webinar with CDC and other federal representatives to discuss implementation of Section 4201. For more information: http://www.dialogue4health.org/hcr/11_4_10.html
- CTG funding is contingent on the FY2011 appropriations process. CDC has indicated they are readying a FOA for the CTG program in anticipation of FY2011 funding.

§ 4202 – Healthy Aging, Living Well and Other Programs

- Authorizes CDC to award grants to health departments to carry out five-year pilot programs with strategies to improve the health risks and outcomes of community individuals age 55-64.
- HHS shall conduct an evaluation of community-based prevention and wellness programs and develop a plan to promote healthy living for Medicare beneficiaries.

§ 4204 – Immunizations

- Authorizes states to obtain additional quantities of adult vaccines and reauthorizes a demonstration program to improve immunization coverage.

§ 4205 – Nutrition Labeling of Standard Menu Items at Chain Restaurants

- Requires nutrition labeling of standard menu items at restaurants operating in 20 locations or more under the same name.
Update:
- Although this provision was effective upon enactment of ACA, enforcement of Section 4205 remains inactive until implementing regulations are finalized.

§ 4206 – Demonstration Project Concerning Individualized Wellness Plan
- Requires HHS to establish a pilot program to test the effect of utilizing individualized wellness plans among at-risk populations in the community health center setting.

§ 4301 – Research on Optimizing the Delivery of Public Health Services
- Directs CDC to fund research in the area of public health services and systems, including best practices related to prevention, translating interventions from research to real-world settings, and organizing, financing, and delivering public health services.

§ 4302 – Understanding Health Disparities: Data Collection and Analysis
- Requires that any federally-supported health program, survey, or report to include data on race, ethnicity, gender, geographic location, SES, language, and disability status.

§ 4303 – Employer-Based Wellness Programs
- Requires CDC to provide employers with technical assistance and other tools to evaluate workplace wellness programs and directs CDC to study the issue.

§ 4304 – Epidemiology-Laboratory Capacity Grants
- Directs HHS 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.

Update:
- FY2010 CDC funding contained significant funding for capacity building, including for epidemiology, laboratory, and health information systems capacity.

§ 4306 – Funding for Childhood Obesity Demonstration Project
- Appropriates $25 million for CMS to carry out the CHIPRA Childhood Obesity Demonstration Project during FY2010 – FY2014.

§ 5204 – Public Health Workforce Recruitment and Retention Program
• Creates a Public Health Workforce Loan Repayment Program to offer loan repayment to
public health students and workers in exchange for working at least three years at a
federal, state, local, or tribal public health agency.
• In FY 2010, $195 million is authorized to be appropriated for this program, and such
sums as necessary for FY 2011-2015.

§ 5206 – Grants for State and Local Programs
• Permits HHS to make grants to create scholarship awards to mid-career public and allied
health professionals employed in public and allied health positions at the Federal, State,
tribal, or local level to receive additional training in public or allied health fields.
• Scholarships may be for degree or professional training programs.
• Authorizes $60 million for these programs in FY 2010 and such sums as necessary for

§ 5313 – Grants to Promote Community Health Workforce
• 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.

§ 5314 – Fellowship Training in Public Health
• 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.

§ 5304 – National Diabetes Prevention Program
• 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.

§ 10408 – Grants for Small Businesses to Provide Comprehensive Workplace Wellness
Programs
• Directs HHS to award grants to small businesses to provide employers with access to
comprehensive workplace wellness programs.

§ 10503 – Community Health Centers and National Health Service Corps Fund
• Creates dedicated fund for Community Health Center program and the National Health
Services Corps.
• The fund totals $10 billion over five years.