

December 7, 2009

The Honorable Harry Reid  
Majority Leader  
U.S. Senate  
Washington, DC 20510

Dear Mr. Majority Leader:

The undersigned organizations representing health, public health, and children's advocacy would like to express our strong support for a range of preventive health provisions benefitting children in the Patient Protection and Affordable Care Act (PPACA).

Improving the health of children is fundamental to improving the health and wellbeing of our entire nation. A wealth of scientific evidence demonstrates that myriad adult health disorders and chronic diseases have their roots in childhood. Almost 90 percent of adult smokers began smoking before the age of 18. Overweight and obese children have a marked increase in risk for many disorders, such as diabetes and heart disease, in adulthood. The Adverse Childhood Experiences study has shown strong correlations between childhood physical and emotional trauma and increased risk in adulthood of substance abuse, certain cancers, heart disease, obesity, and suicide, as well as numerous other disorders.

We commend you for including in the Patient Protection and Affordable Care Act a range of prevention initiatives that will improve children's health and provide access to care for greater numbers of children. In particular, we strongly support the following provisions.

***Essential Health Benefits (Sec. 1302).*** The essential health benefits package covers pediatric services as well as "preventive and wellness services." While the Secretary of Health and Human Services will determine the specific services that must be covered, we deeply appreciate the inclusion of this category of benefits, which will have a positive impact upon the growth and development of our nation's children.

***Preventive Health Services (Sec. 2708).*** The bill requires health plans to cover well child care, defined as the Health Resources and Services Administration's comprehensive guidelines for infants, children and adolescents, as well as all immunizations recommended by the federal Advisory Committee on Immunization Practices, with no cost-sharing. This section is absolutely critical to ensuring that all children have access to comprehensive preventive clinical services.

***Home visiting programs (Sec. 2951).*** Home visitation programs have shown measurable increases in child health outcomes across a range of indicators. We commend you for recognizing the potential in these programs and providing \$1.5 billion over five years to establish or expand home visiting programs.

***National Prevention and Health Promotion Strategy (Sec. 4001).*** There is a significant need to coordinate current and planned federal preventive health and wellness activities. We support the development of this national strategy and look forward to working with the associated Council to address children's issues within it.

***Prevention and Public Health Fund (Sec. 4002).*** The Prevention and Public Health Fund has the potential to make a significant impact on children's health by improving both clinical and community-based prevention. In addition to improving preventive services for children delivered in the medical setting, this fund will build healthier communities by providing safe, healthy environments for children to live, learn and play. Joint ventures that link clinical and community prevention efforts, medicine, and public health are more likely than isolated efforts to benefit children, youth and families.

***Clinical and Community Preventive Services Task Forces (Sec. 4003).*** Our organizations fully support the authorization of these task forces, which refines their missions to include a more specific focus on different age groups, including children of different ages, and areas where gaps exist. We appreciate your efforts to coordinate the activities of the task forces and to examine areas in which their work overlaps or intersects.

***Prevention Education and Outreach Campaign (Sec. 4004).*** Experience has shown that benefits are often not utilized unless both health care providers and the general population are made aware of their existence. The education and outreach campaign established in Sec. 4004 will ensure that families and providers know that these vital benefits are available for children.

***Oral Health Promotion (Sec. 4102).*** Dental caries is the most common disease of childhood. We fully support the grant and education programs on oral health, and appreciate the inclusion of specific references to children as well as improved national oral health surveillance activities.

***Tobacco Cessation Services (Secs. 4107 and 2502).*** Research continues to uncover additional adverse impacts of tobacco exposure for the fetus and pregnant mother, as well as children of all ages. Medicaid coverage for tobacco cessation has the potential to help many more women quit smoking and improve both their own health and that of their children. In addition, the coverage of tobacco cessation drugs under Medicaid will provide valuable assistance to individuals, including parents, who are attempting to stop using tobacco products.

***Medicaid Chronic Disease Prevention Program (Sec. 4108).*** This program provides \$100 million for innovative projects to improve the health of individuals covered by Medicaid. Given that more than half of Medicaid beneficiaries are children, we appreciate the inclusion of outcomes on weight management, development of diabetes, and tobacco use.

***Community Transformation Grants (Sec. 4201).*** The Community Transformation Grants complement the work of the Prevention and Public Health Fund in driving community-based improvements that will benefit children's health. We commend you for including a variety of pediatric-specific issues in this grant program, such as the focus on school environments, obesity, and family wellness.

***Immunizations (Sec. 4204).*** Immunizations are the single greatest public health victory of the twentieth century, having all but eliminated numerous deadly infectious diseases. The permanent authorization of the Section 317 immunization program is a welcome acknowledgement of the importance of this initiative.

***Menu Labeling (Sec. 4205).*** Consumers cannot make healthier choices when dining out if they are not provided nutrition information. Menu labeling represents a critical step toward enabling families to make healthier food selections.

***Breastfeeding Support (Sec. 4207).*** An enormous body of research demonstrates the health benefits of breastfeeding for both mother and child. The American Academy of Pediatrics recommends breastfeeding at least until a child reaches the age of one year. Section 4207 will provide women who return to work with safe, sanitary conditions and reasonable break times to express breast milk in order to provide the best possible nutrition for their babies.

***Public Health Services Research (Sec. 4301).*** We appreciate the inclusion of preventive services research as one of the key areas for the research program established under Section 4301.

***Childhood Obesity Demonstration Project Funding (Sec. 4306).*** We are grateful for the inclusion of full funding of \$25 million over five years for the childhood obesity demonstration project established under the Child Health Insurance Program Reauthorization Act.

***CBO Scoring of Prevention (Sec. 4401).*** Our organizations share Congress's frustration over the Congressional Budget Office's (CBO) methods for scoring the costs and benefits of prevention and wellness initiatives, particularly with regard to children's health. We look forward to working with you and CBO to develop more accurate and useful models.

***Health and Wellness Initiatives Evaluation. (Sec. 4402).*** Evaluation is central to our ability to develop effective interventions and ensure that resources are not being wasted on ineffective programs. We fully support the rational, thoughtful evaluation of federal prevention and wellness programs.

***National Health Care Workforce Commission (Sec. 5101).*** Health care reform's increased focus on preventive health will almost certainly require a concomitant increase in the health care workforce in the public and private sectors. We applaud the inclusion of this provision and look forward to working with the commission to examine the unique challenges associated with the pediatric health care workforce.

In conclusion, our organizations enthusiastically support the Patient Protection and Affordable Care Act's strong focus on prevention and wellness. Our nation's children will be healthier, and will grow into healthier adults, if our health care system can evolve to emphasize prevention and the maintenance of good health. We look forward to working with you in support of these provisions throughout the Senate's deliberations on this historic legislation.

Sincerely,

Academic Pediatric Association  
Academy of Breastfeeding Medicine  
American Academy of Pediatrics  
American Celiac Disease Alliance  
American College of Cardiology  
American College of Osteopathic Pediatricians  
American College of Preventive Medicine  
American Dental Hygienists' Association  
American Pediatric Society  
American Probation and Parole Association  
American Psychological Association  
American Public Health Association  
American School Health Association  
American Thoracic Society  
Ascension Health  
Association of Maternal and Child Health Programs  
Association of Medical School Pediatric Department Chairs  
Association of Schools of Public Health  
Association of University Centers on Disabilities  
Association of Women's Health, Obstetric and Neonatal Nurses  
Baby-Friendly USA  
Center for Adolescent Health & the Law  
Center for Law and Social Policy  
Child & Family Policy Center  
Child Welfare League of America  
Children's Dental Health Project  
Easter Seals  
Every Child Matters Education Fund  
Family Voices  
First Focus Campaign for Children  
Generations United  
March of Dimes  
Medicaid Health Plans of America  
Mental Health America  
National Alliance of Breastfeeding Advocacy/Research, Education and Legal Branch  
National Alliance to Advance Adolescent Health

National Assembly on School-Based Health Care  
National Association of Children's Hospitals  
National Association of Pediatric Nurse Practitioners  
National Association of School Nurses  
National Center on Shared Leadership  
National Coalition for Parent Advocacy in CPS  
National Initiative for Children's Healthcare Quality  
National WIC Association  
Nemours  
New England Alliance for Children's Health  
New York Academy of Medicine  
New York City Health and Hospitals Corp.  
Parents Anonymous  
Partnership for Prevention  
Society for Adolescent Medicine  
Society for Pediatric Research  
Strengthening Families All Around the World  
The Child and Family Policy Center  
The Children's Health Fund  
The Children's Partnership  
The Healthy Children Project  
Trust for America's Health  
United States Lactation Consultants Association  
Voices for America's Children  
Wellstart International  
Youth Villages, Inc.  
Zero to Three