

# Support Federal Funding for Prevention

March 2014

## Federal Funding for Prevention: A C-Change Priority

Every American deserves to live a long, healthy life. But we're falling short of that goal. Preventing disease is the most effective, common sense way to improve health and reduce healthcare costs. **About 50% of cancer cases can be prevented by changes in tobacco use, nutrition, and physical activity, and many more lives can be saved through screening.**

Federal funding for prevention has saved lives through programs such as breast and cervical cancer screening and tobacco control.

C-Change is applying a unique three sector collaborative approach to promote a national prioritization of cancer risk reduction. As one of the three main sectors that can contribute to the elimination of cancer, **C-Change believes the federal government must make substantial annual investments in cancer risk reduction efforts**, and that:

- These investment amounts should be no less than the current level,
- New funds should not be used to replace existing risk reduction efforts, and
- Funds should not be delayed in their commitment and implementation.



## The Facts: Investing in Prevention is Necessary and Effective

- ▶ ***It is within our power to prevent about 50 percent of all cancer cases by changes in tobacco use, diet, and exercise.***<sup>i</sup>
- ▶ ***Preventable, non-communicable chronic conditions including cancer consume 75% of the total U.S. spending on medical care.***<sup>ii</sup> U.S. Health expenditures are about 18% of GDP.<sup>iii</sup>
- ▶ ***Current investments in chronic disease prevention are low.*** Only about 1.4 percent of the total 2015 HHS President's budget request for the Department of Health and Human Services (\$77.1 billion) is for CDC's Chronic Disease Program (\$1.08 billion), the leading U.S. government program to prevent chronic diseases.<sup>iv, v</sup> In this FY15 request, CDC's allocation (\$6.6 billion) is less than .002 percent of total requested federal government outlays (\$3.63 trillion).<sup>vi, vii</sup>
- ▶ A 2011 Institute of Medicine consensus report "For the Public's Health, Investing in America's Future" recommends Congress double the current federal appropriation for public health.<sup>viii</sup>
- ▶ A recent Health Affairs article reports that Cancer deaths fell by 1.1 percent for each 10 percent increase in local public health spending between 1993 and 2005. Infant mortality and deaths from cardiovascular disease and diabetes also declined.<sup>ix</sup>
- ▶ Other research demonstrates that prevention through better behavioral and economic conditions will save 4.5 million lives and save almost \$600 billion over the next 25 years.<sup>x</sup>

## Sources of Federal Funding for Cancer Prevention

Several U.S. agencies, such as the National Cancer Institute, the Food and Drug Administration, and the Health Resources and Services Administration invest in cancer prevention efforts. The largest and most direct sources of federal funding for cancer prevention, however, are the **Centers for Disease Control and Prevention** and the federal **Prevention and Public Health Fund**.

### Centers for Disease Control and Prevention (CDC)

Federal discretionary funds to the CDC are a primary source of funding for prevention. CDC supports state and local health departments, health promotion efforts in schools and workplaces, community programs, research, and more. More than 70 percent of the CDC's budget supports state and local health organizations, agencies, and academic institutions.<sup>xi</sup> Specific CDC programs for cancer and chronic disease prevention include:

- Assistance for state/tribe/territory Comprehensive Cancer Control Coalitions;
- Communications campaigns such as *Screen for Life*, which informs those age 50 and older about the importance of regular colorectal cancer screening tests;
- Tracking cancer trends and improving surveillance;
- The National Breast and Cervical Cancer Early Detection Program, which provides access to screening for underserved women throughout the country, territories, served over 1.8 million women between 2008 and 2012;<sup>xii</sup>
- Tobacco control efforts, such as resources to coordinate tobacco prevention and cessation activities, including the 2012 *TIPS from Former Smokers* campaign that led estimated 100,000 smokers quitting tobacco successfully;<sup>xiii</sup>



### Prevention and Public Health Fund

The Prevention and Public Health Fund (PPHF) is the first mandatory funding stream dedicated to disease prevention and early detection. Whatever happens to the ACA going forward, we must ensure these historic funding levels are at minimum, sustained at current levels.

- By law the PPHF is required to “provide for expanded and sustained national investment in prevention and public health programs to improve health and help restrain the rate of growth in private and public health care costs.”<sup>xiv</sup>
- In 2011- 2012, \$202 million of the PPHF was allotted to Community Transformation Grants, for “promoting healthy lifestyles, especially among population groups experiencing the greatest burden of chronic disease.” This included 61 state and local government agencies, tribes, territories, and nonprofit organizations in 36 states, along with 6 national networks of community-based organizations, including support for evaluation, communication, technical assistance, and training. Another 40 grants went to communities of less than 500,000 people in neighborhoods, school districts, villages, towns, cities, and counties to increase opportunities to prevent chronic diseases and promote health.<sup>xv</sup>
- In 2014, \$104 of the \$343 million appropriated for CDC’s Cancer Prevention Control programs, which includes breast, cervical and colorectal cancer screening programs and support for comprehensive cancer control programs, will come from the PPHF, as will \$105 of the total \$205 million for CDC’s Tobacco Prevention and Control programs, \$110 million for the new Community Prevention grants and Racial and Ethnic Approach to Community Health (REACH) program<sup>xvi</sup>

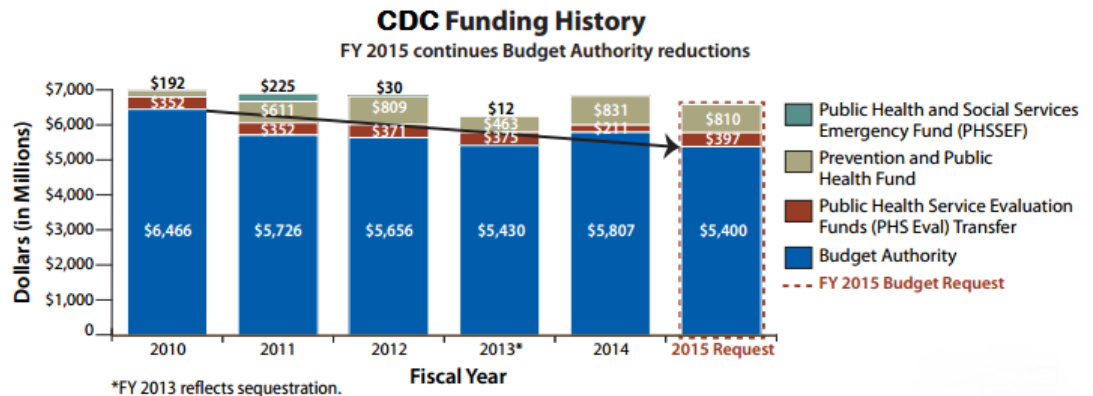
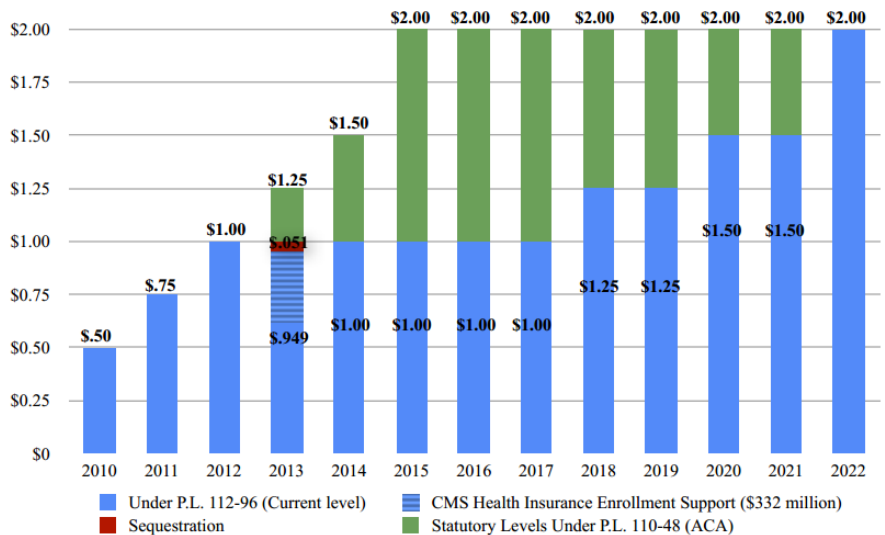
## The Problem: Prevention Funds are Decreasing

Because CDC's budget is allocated by Congress every year, available amounts may vary annually. The ACA's historic provision for mandatory prevention funding through the PPHF has the potential to mitigate this problem by providing a guaranteed funding stream for prevention that allows for long-term strategic execution of prevention programs. However, controversy about the Affordable Care Act and the current economic environment has contributed to frequent threats to investments in disease prevention. Threats include:

- The "Sequester Replacement Reconciliation Act" (HR 5652) voted by the house, threatened to eliminate the PPHF (May 2012)
- The House "Interest Rate Reduction Act" (HR4628) threatened to eliminate the PPHF to pay for student loans (April 2012), but was ultimately rejected
- The Middle Class Tax Relief and Job Creation Act of 2012 (HR 3630), signed into law (February 2012), reduced the Prevention and Public Health Fund by \$6.25 billion over 10 years to temporarily extend unemployment benefits and avert a planned Medicare payment cut to physicians through Dec. 31 2012<sup>xvii</sup>

- The 2015 President's budget request represents a 9.3 percent decrease in CDC Chronic Disease funding compared to planned spending in 2014, as part of an overall reduction to CDC.<sup>xviii, xix</sup>

Prevention and Public Health Fund Allocations (FY 2010 to 2022):  
Current Funding Under Under P.L. 112-96 vs. Funding Established by P.L. 110-48 (ACA)



### What Can C-Change Members Do?

- ▶ **Advocate** that the federal government dedicate sufficient funds to proven prevention strategies, including increases to CDC's chronic disease programs
- ▶ **Ask your constituents** to advocate that the federal government dedicate sufficient funds to proven primary prevention and early detection strategies.
- ▶ **Ask your legislators** to support the full amount of the Prevention Fund to be used for its stated purpose.
- ▶ **Support the federal government** in promoting community based prevention and reach out to community leaders to promote these policies and programs at both the community and state level.

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