

Coalition for Health Funding

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Healthier America Project

- Blueprint for next Congress and next Administration
 - Key issues
 - Financing public health
 - Structure of public health in federal government
 - Accountability
 - Workforce

Financing Public Health

- How much are all levels of government spending?
- How much is needed?
- What is the return on investment?
- How can we assure stable funding mechanisms?

Current Investment, FY 2005

	\$	Per capita
Federal	\$21,593,000,000	\$72.97
State	\$9,656,746,136	\$33.14
Local	\$3,974,222,981	\$15.19
Total	\$35,223,969,117	\$121.31

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Sources/Assumptions

- Government public health programs – excluding biomedical research and entitlement spending for personal health care services.
- Local spending: NACCHO survey
- State spending: TFAH analysis of state budgets
- Federal spending: Review of HHS agency budgets by NYAM

Federal investment: 2005 vs. proposed 2009 (not adjusted for inflation)

	FY 2005	Proposed FY 2009	Difference
Federal \$	\$21.593 m.	\$21.281 m.	-\$312m.
Per capita	\$72.97	\$71.92	-\$1.05

What do we need to have an adequate public health response?

- Our expert panel estimates **\$20 billion** additional annual investment is needed – *built up over time, with a shared responsibility among all levels of government (excluding biomedical research).*
 - As 3% of National Health Expenditure Accounts (using our assumptions of spending levels)
 - To achieve per capita spending levels based on Washington state in-depth model

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Role of Federal Government in reaching this target

- Increase federal commitment over time
- Motivate states and localities to increase their investment so that “where you live doesn’t determine your level of protection”
 - Whatever the proportion, we are far from an adequate level of federal investment when core funding for federal public health programs is hurting
- Provide a consistent and reliable funding stream for public health programs
- Assure accountability for increased investment

Why increase the investment?

- Better health outcomes
- Better protected from external threats
- Health care cost savings?
 - Primary care based prevention
 - Community level prevention
 - Some question whether prolonging life actually saves money
 - Reduced disability?
 - “compression of morbidity”
- Broader societal savings

The public supports increased prevention

- A strong majority of Americans (57 percent) believe that investing in preventing disease and promoting healthy lifestyles, in tandem with diagnosis and treatment is the best way to improve the health of Americans.
- Americans believe investing in preventing disease and promoting healthy lifestyles is important to reducing healthcare costs (rating 7.2 on a 10-point scale).
 - Greenberg Quinlan Rosner Research, January 2008

Urban Institute Model of Costs and Benefits of Primary Prevention

- Diabetes in California:
 - Estimated cost of a community-based intervention to improve nutrition and increase physical activity statewide: \$83 million
 - Estimated benefits (medical costs associated with diabetes only) of the intervention: \$166 million
 - http://www.preventioninstitute.org/documents/HE_HealthCareReformPolicyDraft_091507.pdf

Expansion of Urban Institute Model

- Multiple conditions, multi-faceted interventions, effects over time
 - By payer and by state
- Looking at high-cost conditions and promising prevention initiatives
 - Will they reduce disease and risk for disease?
 - Will they reverse the progression of disease?
 - Is there evidence to support their effectiveness?
 - Do we have cost data on the interventions?

Promising prevention initiatives

- ❑ Promote *breastfeeding*
- ❑ Increase *walkability* of communities
- ❑ Increase access to *healthy food*
- ❑ Reduce access to unhealthy food
- ❑ Reduce *tobacco* use
- ❑ Reduce *air pollution*
- ❑ *Worksite* initiatives
- ❑ *School* initiatives
- ❑ Revise policies regarding access to alcohol
- ❑ Improve perinatal nutrition

Summary

- All levels of government need to increase their investment in public health
 - Goal of \$20 billion
- Prevention results in direct savings to government in health care costs and to society in higher productivity and competitiveness
- The public supports increased commitment to prevention