

October 4, 2011

Dear Joint Select Committee on Deficit Reduction Member:

As leaders of national organizations, we would like to express our strong support for sufficiently funding the nation's public health programs, and in particular, maintaining the Prevention and Public Health Fund (Fund), an unprecedented investment in national, state, and local efforts to prevent disease and reduce long-term health costs. We were disappointed that the President's deficit reduction plan included cuts to the Prevention Fund, which would result in a 25 percent reduction in this investment by FY 2015, severely impacting our efforts to curb chronic disease. We urge you to maintain our investment in the Fund and produce a final deficit reduction plan that recognizes the importance of prevention.

Nearly 700 national, state, and local organizations support the Fund as a primary vehicle for making public health investments that would create jobs and help to lower long-term health care costs. The full list of groups in support of the Fund can be viewed at <http://healthyamericans.org/health-issues/protecting-the-prevention-and-public-health-fund/recent-organizational-letters-in-support-of-prevention-fund/state-by-state-groups-supporting-aca-prevention-fund>. The Fund fills a role that has the support of the American people - a public opinion survey conducted by Trust for America's Health and the Robert Wood Johnson Foundation found that 71 percent of Americans favored an increased investment in disease prevention.

As you know, billions of dollars in mandatory funding are spent each year through Medicare, Medicaid, and other federal health care programs to pay for health care services once patients develop an acute illness, disability, injury, or chronic disease and present for treatment in our health care system. Yet prior to the creation of the Fund, there was no corresponding reliable investment in efforts to promote wellness, prevent disease, and protect against public health or bioterrorism emergencies. At a time when today's children are in danger of becoming the first generation in American history to live shorter, less healthy lives than their parents, we need to get serious as a nation about our commitment to prevention, wellness, and preparedness.

We know you have already received testimony from the Congressional Budget Office regarding the projected growth in federal health care spending and its impact on the deficit.<sup>1</sup> If we are committed to addressing long-term entitlement spending, upfront investment in prevention via discretionary public health programs and the Fund represents our best opportunity to improve health and lower health care costs for the federal government and American businesses. We already know the potential return on investment – a 2008 study by Trust for America's Health concluded that an investment of \$10 per person per year in proven community-based programs to increase physical activity, improve nutrition, and prevent smoking and other tobacco use could save the country more than \$15.6 billion annually within five years. This is a return of \$5.60 for

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<sup>1</sup> Congressional Budget Office, Statement of Douglas W. Elmendorf, Director: Confronting the Nation's Fiscal Policy Challenges, before the Joint Select Committee on Deficit Reduction, September 13, 2011.

every dollar invested.<sup>2</sup> According to the U.S. Chamber of Commerce and Partnership for Prevention, investing in the health of Americans will improve the bottom line for businesses by lowering health care costs, reducing absenteeism, and improving productivity.<sup>3</sup>

We also know that doing nothing is not an option. A recently published study looking at the impact of the obesity epidemic alone estimates that Americans will spend as much as an *additional* \$66 billion *per year* in medical costs in this country by 2030 – over half of which would be borne by the Medicare program. By comparison, if we take action to prevent obesity and reduce the prevalence of related chronic disease and illness, the study estimates that we could achieve significant savings for both private payers and federal and states' governments – even a 1 percent reduction in the average body mass index (BMI) of Americans could result in as many as 2.4 million avoided cases of diabetes, 1.7 million cases of cardiovascular disease, and 127,000 cases of cancer in the next two decades. The results would be even more dramatic with further success.<sup>4</sup>

States and communities are already using Prevention Fund dollars to build epidemiology and laboratory capacity to track and respond to disease outbreaks, train the nation's public health workforce, modernize vaccine systems, prevent the spread of HIV/AIDS, reduce tobacco use, promote behavioral health, prevent injuries, help control the obesity epidemic, and build the evidence base to continually enhance the efficiency and effectiveness of these public health programs.

The Fund guarantees an ongoing commitment to prevention unprecedented in today's "sick care" system, and eliminating it would be an enormous step backward in our progress on cost containment, public health modernization, and wellness promotion. It would also threaten or eliminate the jobs that have already been created by this Fund. Recently released data finds that we've already seen a significant downturn in the nation's public health workforce. A total of 19 percent of the local public health workforce was lost between 2008 and 2010, and among state health departments, nearly 90 percent of agencies cut services. These cuts threaten the air we breathe, the food we eat, and expand the risk of infectious diseases and disasters that could claim many lives.

Once again, as you deliberate strategies to reduce our nation's long-term deficit, we urge you to continue our investment in the Prevention and Public Health Fund. A sensible plan for deficit reduction should recognize that prevention is the key to lowering health care costs and creating a long-term path to a healthier and economically sound America.

Sincerely,

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<sup>2</sup> Trust for America's Health, *Prevention for a Healthier America*, July 2008.

<http://healthyamericans.org/reports/prevention08/>

<sup>3</sup> U.S. Chamber of Commerce and Partnership for Prevention, "Leading by Example: Leading Practices for Employee Health Management," 2007. <http://www.prevent.org/data/files/initiatives/leadingbyexamplefullbook.pdf>

<sup>4</sup> Y Claire Wang, Kim McPherson, Tim Marsh, Steven L Gortmaker, Martin Brown. Health and economic burden of the projected obesity trends in the USA and the UK. *Lancet*. 2011; 378: 815-25.



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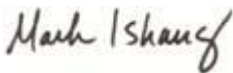
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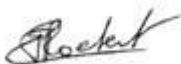
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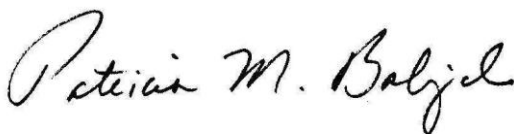
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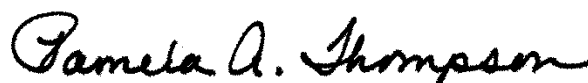
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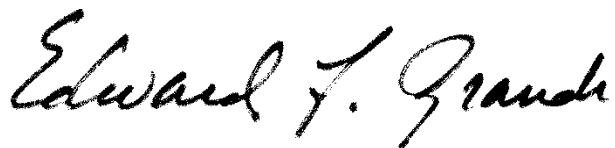
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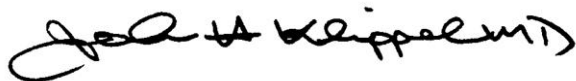
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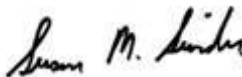
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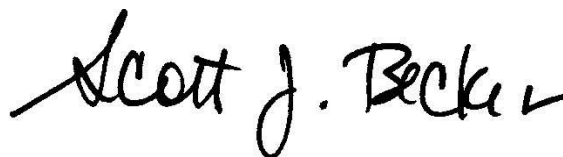
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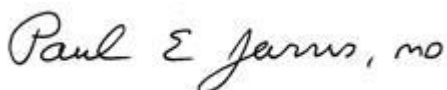
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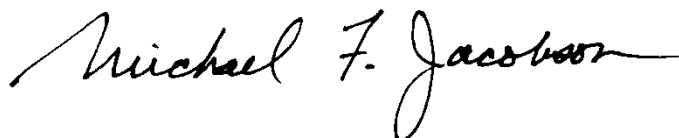
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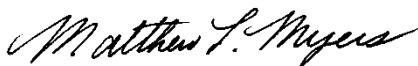
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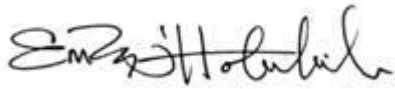
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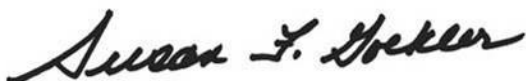




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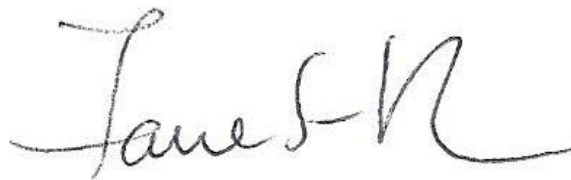
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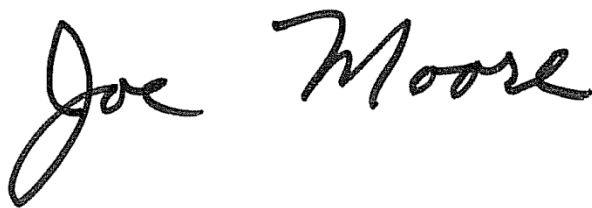
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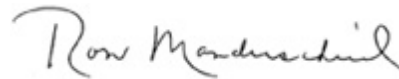
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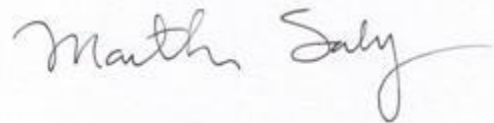
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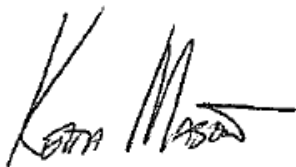
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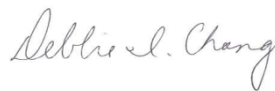
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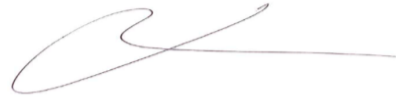
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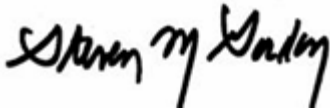
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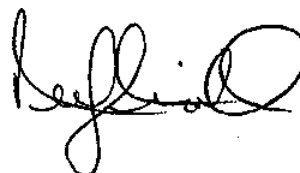
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