



Association of Public Health Nursing (APHN) Public Health Policy 2014-2015 Position Paper

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Public Health Nursing Priorities and Sources

Public Health Nursing Priorities Executive Summary

The changing healthcare landscape has brought about opportunities and challenges for all healthcare professionals, including public health nursing. The committee focused on global issues impacting public health across the country, and are identified here:

- The Patient Protection and Affordable Care Act (PPACA) was implemented in 2014 and while the intent to increase access to quality healthcare is an applauded goal, it has not been fully implemented in all states. States implementing a two-fold approach of expanding Medicaid and offering a health insurance marketplace have seen a reduction in uninsured rates, however states that have not fully implemented the PPACA by failing to expand Medicaid, have seen a stagnant uninsured rate. APHN supports full implementation of the PPACA to promote health equity.
- Also through the PPACA, the Prevention and Public Health Fund (PPHF) was allocated to provide expanded and sustained funds for prevention and public health efforts, improve healthcare outcomes, and healthcare quality. APHN aims to protect the PPHF, advocating for funding of programs aimed at prevention.
- Lastly, there are national efforts to strengthen and support programs aimed at preventing multiple chronic diseases such as diabetes, obesity, stroke, and heart disease, which are debilitating and costly. APHN supports the role of community/public health nurses working to prevent and control chronic disease at the population level.

The three policy priorities identify APHN organizational strategies, as well as state and local PHN strategies for each. By using this two-tiered approach, it is anticipated that each priority area can be addressed through national, state and local involvement to improve access to quality health care for all Americans, improve public health efforts, and track and monitor health outcomes.



Public Health Nursing Priorities with Sources & Strategies

1. Protection of the Prevention and Public (PPH) Fund:

Sources of information for this priority:

HHS: <http://www.hhs.gov/open/recordsandreports/prevention/>

FY 2014-2015 funding: <http://www.hhs.gov/open/prevention/index.html>

Senate and House Committees that oversee the PPH Fund:

Senate Committee on Health, Education, Labor & Pension (HELP)

House Committee on Energy & Commerce:

<http://www.naco.org/legislation/policies/Documents/Health/PPHF%202014.pdf>

APHN strategy with this priority:

- Advocate with Congress to protect funds via meetings on the Hill.
- Advocate to HHS to spend the PPH on public health needs.
- Create form letter for membership to use to write to federal officials.

State/local strategy for public health nursing with this priority:

- APHN Members will write letters of support to their congressman and senator.
- Inform APHN on where funds should be spent at state/local level.

2. Supporting the role of community/public health nursing in the prevention and control of chronic disease(s):

Sources of information for this priority:

HHS: Focus on multiple chronic conditions; 2010 strategic framework found here: http://www.hhs.gov/ash/initiatives/mcc/mcc_framework.pdf

September 25, 2014 announcement that nearly \$212 million in grants to prevent chronic diseases, funded in part by the Affordable Care Act, grants focus on preventing tobacco use, obesity, diabetes, heart disease, and stroke.

<http://www.hhs.gov/news/press/2014pres/09/20140925a.html>

CDC/CMS Million Hearts Initiative (2012-2016): <http://millionhearts.hhs.gov/index.html>
(goal is to prevent one million heart attacks and strokes by 2017)



ASTHO State Million Hearts Learning Collaborative that began with 10 states in 2013 (AL, DC, IL, MD, MN, NH, NY, OH, OK, VT) who will continue to scale up their programs and just added six more states (AR, GA, KS, MI, ND, VA) as of October 2014. APHN participated in the first round of 10 states and developed an Issue Brief in support of the role of community/public health nurses in the prevention and control of hypertension.

<http://www.astho.org/Million-Hearts/State-Learning-Collaborative-to-Improve-Blood-Pressure-Control/>

NIH September 2014 call for proposals to support the science of self-management of chronic conditions: [http://grants.nih.gov/grants/guide/pa-files/PA-14-344.html# Part 2. Full](http://grants.nih.gov/grants/guide/pa-files/PA-14-344.html#_Part_2_Full)

AHRQ Multiple Chronic Conditions Research Network:

<http://www.ahrq.gov/professionals/prevention-chronic-care/decision/mcc/index.html>

APHN strategy with this priority:

- Develop partnerships and define funding mechanisms to support C/PH nurse roles in chronic disease prevention and control.
- Define what and how to collect outcome data on C/PH nurse efforts to prevent/control chronic disease.
- Advocate for improved systems of care and PH infrastructure to prevent and manage chronic illness across the lifespan.

State/local strategy for public health nursing with this priority:

- Advocate for clearly defined roles in the prevention/control of chronic disease within practice settings.
- Implement Million Hearts campaign strategies at local /state levels. Disseminate information about campaign.

3. Full implementation of the ACA/Medicaid Expansion:

States that have implemented a two-fold strategy (health insurance exchange and expanding Medicaid) have seen a 4.8 % reduction in uninsured rates. States with only one or neither have seen a 2.7% reduction (Gallup, Feb 24, 2015). The 10 states with the greatest reduction in uninsured rates, expanded Medicaid and established a state-based marketplace exchange or state-federal partnership; reductions range from 11.1% to 4.9% (Gallup, Feb 24, 2015). The most current statistics indicate the uninsured rate for adults averaged 12.9% in the last quarter of 2014 (Gallup, Jan 7, 2015).



Sources of information for this priority:

Kaiser Family Foundation (2014) <http://kff.org/medicaid/issue-brief/how-do-medicaid-disproportionate-share-hospital-dsh-payments-change-under-the-aca/>

National Academy for State Health Policy

AARP

Urban Institute (2014)

Gallup (2015) <http://www.gallup.com/poll/172403/uninsured-rate-sinks-second-quarter.aspx>

<http://www.gallup.com/poll/180425/uninsured-rate-sinks.aspx>

<http://www.gallup.com/poll/181664/arkansas-kentucky-improvement-uninsured-rates.aspx>

Obamacarefacts.com <http://obamacarefacts.com/sign-ups/obamacare-enrollment-numbers/>

State Decisions on creating health insurance marketplaces the Medicaid expansion:
<http://kff.org/health-reform/state-indicator/state-decisions-for-creating-health-insurance-exchanges-and-expanding-medicaid/>

APHN strategy with this priority:

- Educate C/PH nurses on Medicaid expansion (via webinar on all policy priorities)
- Create a fact sheet on Medicaid expansion as a resource for C/PH nurses.

State/local strategy for public health nursing with this priority:

- Collect stories (e.g. from navigators) from those in the community who qualified for Medicaid expansion and insurance marketplaces and how they have been affected by increased access to care.
- Track and disseminate statistics on health coverage and health outcomes from states with Medicaid expansion and/or insurance marketplaces.
- Work with hospitals as allies to advocate for expansion (Disproportionate Share Hospital (DSH) payments will be reduced from FY 2014 to FY 2020).