

NACCHO's 2017 Federal Legislative and Policy Agenda



The Federal Legislative and Policy Agenda guides NACCHO's work as the national voice for local health departments, especially in its interactions with federal agencies and Congress. The agenda features NACCHO's priority issues and is informed by member input and approved annually by the Board of Directors.

NACCHO's mission is to be a leader, partner, catalyst, and voice with local health departments. NACCHO's Federal Legislative and Policy Agenda recognizes that policy decisions both within and outside the traditional health sphere impact health status. NACCHO urges policymakers at the local, state, and federal levels to provide adequate funding for core public health services and safety net health and human services programs that can ensure a healthy and safe population, including healthy food, housing, environment, and access to healthcare and employment.

I. Issues for Priority Focus

- A. A balanced approach to federal deficit reduction, including spending cuts and revenue, and an end to sequestration. In the event of sequestration relief, parity must remain between defense and non-defense budget caps.
- B. FY2017 and FY2018 budget and appropriations for programs within the Centers for Disease Control and Prevention (CDC), Food and Drug Administration, Health Resources and Services Administration and Office of the Assistant Secretary for Preparedness and Response (ASPR) which strengthen local health department performance, including the following:
 1. Public health emergency preparedness (including CDC Public Health Emergency Preparedness grants, ASPR Hospital Preparedness grants and Medical Reserve Corps)
 2. Surveillance, prevention, control, and investigation of infectious disease
 3. Capacity Building
 - a. Funding to allow local health departments to meet accreditation requirements, build systems capacity for health information technology, and support foundational capabilities
 - b. Epidemiology and Lab Capacity (ELC) Grants
 - c. Preventive Health and Health Services Block Grants
 4. Chronic disease prevention
 5. Delivery of clinical and community prevention services
 6. Local health department workforce continuing education and training
 7. Surveillance and investigation of foodborne illness
- C. Continuation at authorized levels for the Prevention and Public Health Fund, which supports Childhood Lead Poisoning Prevention, Section 317 Immunization Program, Diabetes and Heart Disease Prevention, and Preventive Health and Health Services Block Grant
- D. Infrastructure and policies that support local health department capacity (in particular, workforce and technology) to participate in health data exchange with health care and human service providers
- E. Implementation and planning for reauthorization of the Pandemic and All-Hazards Preparedness Reauthorization Act
- F. Establishment of a Public Health Emergency Fund to allow immediate access to emergency funding when public health disasters or disease outbreaks occur.
- G. Support for local health department involvement in implementation of the Affordable Care Act (ACA), including maintenance of core public health programs authorized and funded by the ACA and clinical and community preventive services supported by the ACA
 1. Any modifications to the ACA should expand rather than limit access to health care services.

II. Issues to Address in Coalition (in alphabetical order)

- A. CDC's total budget and FY2017 and FY2018 appropriations for programs with impact on local health departments or public health activities, including the following:
 - 1. CDC environmental health activities
 - 2. 2CDC infectious disease prevention and control funding, including vector borne disease surveillance and prevention
 - 3. Funding and implementation of the FDA Food Safety Modernization Act (FSMA) to increase the safety and security of our food supply, reduce the incidence of foodborne illness and make imported foods safer.
 - 4. Injury and violence prevention
 - 5. Maternal and Child Health block grant
 - 6. Maternal, Infant and Early Childhood Home Visiting program
 - 7. Preventive Health and Health Services block grant
 - 8. Section 317 Immunization Program
 - 9. Sexual/reproductive health including Title X family planning funding
 - 10. Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)
- B. Child nutrition reauthorization that supports access to healthy food and accessibility of locally-grown food for urban and rural areas
 - 1. Adequate funding for the Supplemental Nutrition Assistance Program
 - 2. Adequate funding for WIC
- C. Chronic disease prevention including implementation of menu labeling
- D. Clean Air Act protection
- E. Climate change adaptation and mitigation
- F. Continuation of primary care funding streams authorized in the Affordable Care Act (Children's Health Insurance Program, Community Health Centers, Maternal, Infant and Early Childhood Home Visiting program, National Health Service Corps)
- G. Implementation of Toxic Substances Control Act reauthorization
- H. Infectious disease prevention including combating antimicrobial resistant bacteria and promoting adult immunization and antibiotic stewardship
- I. Ryan White CARE Act reauthorization
- J. Substance abuse prevention and control, including prescription drug overdose prevention and increased access to medication assisted therapy
- K. Support for Medicaid including expansion as enacted in the ACA
- L. Tobacco control and prevention and regulation of tobacco products (including e-cigarettes)
- M. Transportation bill implementation and reauthorization including support for active living/public transportation
- N. Violence prevention with an emphasis on health equity

III. Issues to Address with a Long-Term Perspective

- A. Seek opportunities to promote collaboration between and integration of public health and health care providers (including federally qualified health centers and hospitals) in Federally funded programs to address population health
- B. Identify approaches in all NACCHO's advocacy activities that will contribute to the elimination of health inequities and ensure that such approaches are framed and addressed explicitly. A health in all policies approach may be used to explicitly address decisions made outside the health sector that significantly impact public health. Examples of specific policy recommendations include the following:
 - 1. Supporting policies and programs to reduce poverty such as Transitional Jobs programs, expanding the Earned Income Tax Credit, and increasing minimum wage to a livable wage
 - 2. Supporting policies and programs to improve educational attainment such as expansion of Head Start and maintenance of child care subsidy
 - 3. Supporting policies and programs to improve access to safe, affordable housing
- C. Achieve greater local health department consensus in state public health enterprise decision-making concerning the distribution and uses of federal funds to support both state and local public health activities, similar to the requirement in the Public Health Emergency Preparedness grant program