



National Association of County & City Health Officials

The National Connection for Local Public Health

## FY2018 President’s Budget Proposal NACCHO Priority Public Health Program Funding

The President has released his FY2018 budget, [A New Foundation for American Greatness](#). Below, is NACCHO’s analysis of the budget proposal as it impacts programs of importance to local health departments.

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	Program (\$ in millions)	FY2015	FY2016	FY2017	FY2018 Pres. Budget	NACCHO Request
HHS	Prevention and Public Health Fund (PPHF)	927	932	891	881	1,000
<b>Emergency Preparedness</b>						
CDC	Public Health Emergency Preparedness Cooperative Agreements	644	660	660	551	705
ASPR	Hospital Preparedness Program	255	255	255	227	300
ASPR	Medical Reserve Corps	9	6	6	6	11
<b>Infectious Disease</b>						
CDC	Section 317 Immunization Program (PPHF)	611 (210)	611 (324)	607 (324)	521 (204)	650
CDC	Core Infectious Disease [Antibiotic Resistance]	225 -	393 [160]	396 [163]	235 [140]	428 [200]
CDC	Epidemiology and Lab Capacity Grants (PPHF)	110 (40)	195 (40)	195 (40)	155	195
<b>Injury Prevention</b>						
CDC	Opioid Prescription Drug Overdose Prevention	20	70	112	75	112
<b>Environmental Health</b>						
CDC	Childhood Lead Poisoning Prevention (PPHF)	16 (13)	17 (17)	17 (17)	17	35
<b>Public Health Capacity Building</b>						
CDC	Preventive Health & Health Services Block Grant (PPHF)	160 (160)	160 (160)	160 (160)	0	170
CDC	Public Health Workforce Development	52	52	50	45	57
<b>Chronic Disease Prevention</b>						
CDC	Heart Disease and Stroke Prevention (PPHF)	130 (73)	160 (73)	130 (73)	*	130
CDC	Diabetes Prevention (PPHF)	150 (73)	170 (73)	140 (73)	*	140

\*Could be supported by new America’s Health Block Grant Program

Opioid Abuse and Overdose Prevention						
	Program (\$ in millions)	FY2015	FY2016	FY2017	FY2018 Pres. Budget	NACCHO Request
CDC	Opioid Prescription Drug Overdose Prevention	20	70	112	107	112
CDC	Illicit Opioid Use Risk Factors	-	6	14	\$0	14
SAMHSA	Opioid Treatment Programs/Regulatory Activities	9	9	9	9	9
SAMHSA	Medication-Assisted Treatment for Prescription Drug and Opioid Addiction	12	25	56	60	60
SAMHSA	Grants to Prevent Prescription Drug/Opioid Overdose Related Deaths	-	12	12	12	26
DOJ	Anti-Heroin Task Forces	7	7	0	0	10

*\$ Illicit Opioid Use Risk Factors combined with Opioid Prescription Drug Overdose Program*

#### Overview

The FY2018 President’s budget is not good news for public health or advocates of public health. If the budget were to be enacted as written, the [Centers for Disease Control and Prevention](#) (CDC) would see a \$1.2 billion cut, the [Health Resources and Services Administration](#) (HRSA) a \$602 million cut and the [National Institutes of Health](#) a \$5.7 billion cut.

The Hospital Preparedness Program is proposed to receive a \$27 million cut after the Administration claimed the program was “duplicative” with the Public Health Emergency Preparedness Program, which also received a cut of \$109 million. The President’s budget introduces the America’s Health Block Grant, a \$500 million block grant that consolidates funds given to states for chronic disease grant programs such as heart disease and stroke prevention, tobacco prevention, and diabetes prevention programs while cutting \$222 million. The budget proposes to eliminate a number of programs such as Million Hearts, Preventive Health and Health Services Block Grant, Racial and Ethnic Approaches to Community Health (REACH), and Climate Change.

A rare bright spot at HRSA is an increase of \$30 million for the Maternal and Child Health Block Grant Program but it comes at the cost of cutting Autism and Sickle Cell funding and other smaller programs. The Pandemic Influenza program administered by the Assistant Secretary for Preparedness and Response (ASPR) received a \$135 million increase.

The budget proposal also creates a Federal Emergency Response Fund by establishing a 1% transfer authority for the HHS Secretary to be triggered by significant events “with respect to domestic preparedness and global health; to prevent, prepare for, or respond to a chemical,

biological, radiological, or nuclear threat; to prevent, prepare for, or respond to an emerging infectious disease.”

The Budget proposes to cut the Substance Abuse and Mental Health Services Administration (SAMHSA) by \$399 million. While the Budget does include a 2% increase in drug treatment spending, this includes \$500 million already authorized by the 21st Century Cures Act. By counting the spending previously authorized for drug treatment, which was intended as supplemental, the Budget would effectively cut spending on substance use treatment. The Community Mental Health Services Block Grant is cut by \$116 million, which provides funding for states to treat those living with serious mental illnesses.

The Budget proposal does not include any funds to continue the ACA’s subsidy programs. Instead, it includes a sharp decline in spending for ACA programs, resulting from an assumption that the President will be able to sign the AHCA into law prior to the start of FY 2018. The Budget assumes that the ACA’s cost-sharing reductions will be eliminated, and that the ACA’s income-based subsidies will be replaced by the AHCA’s age-based tax credits. As a result, the Budget contains a \$1.25 trillion reduction in spending over ten years through the AHCA’s changes to ACA programs that help provide access to care for low- and moderate-income individuals.

The Budget proposes a cut of \$610 billion in federal spending for Medicaid over ten years. These cuts are in addition to the Medicaid cuts proposed in the AHCA. The two cuts together would amount to a total cut of more than \$1.4 trillion over ten years. Medicaid would be cut roughly in half by 2027, when the program is projected to cover 87 million individuals under current law, causing tens of millions of individuals to lose coverage through the program.

NACCHO will continue to advocate for funding for public health programs that protect the public’s health and keep people safe. Congress will now take up this budget and write its own bills to fund the government in FY2018, starting in October 2017.

#### *Centers for Disease Control and Prevention*

The budget provides \$5.975 billion for the CDC, a cut of \$1.2 billion from FY2017, including \$841 million from the Prevention and Public Health Fund (PPHF). NACCHO has created a [chart](#) that includes the FY2018 allocation of the PPHF.

Programs of interest to local health departments at CDC are as follows:

- Immunization and Respiratory Diseases - \$701 million, a cut of \$93 million from FY2017.
  - Section 317 Immunization Program - \$521 million, a cut of \$86 million from FY2017, \$204 million from the PPHF.
  - Influenza Planning and Response - \$180 million, a cut of \$8 million from FY2017. This incorporates core pandemic and seasonal influenza activities.
- HIV, Viral Hepatitis, STD, and TB Prevention - \$934 million, a cut of \$186 million from FY2017.

- HIV Prevention and Research - \$640 million, a cut of \$148 million from FY2017.
- Viral Hepatitis Prevention - \$34 million, same as FY2017.
- STD Prevention - \$130 million, a cut of \$22 million from FY2017.
- TB Prevention - \$130 million, a cut of \$12 million from FY2017.
- Emerging and Zoonotic Infectious Diseases – \$514 million, a cut of \$74 million from FY2017. The total includes \$137 million from the PPHF.
  - Core Infectious Diseases - \$235 million, a cut of \$161 million from FY2017.
    - Antibiotic Resistance Initiative - \$137 million, a cut of \$26 million from FY2017. The full amount is from the PPHF.
    - Vector-borne Diseases - \$50 million, a \$24 million increase from FY2017.
  - Emerging Infectious Diseases - \$155 million, a \$8 million increase from FY2017.
  - Food Safety - \$52 million, a cut of \$2 million from FY2017.
  - Epidemiology and Laboratory Capacity Grants - \$70 million, a cut of \$40 million.
  - National Healthcare Safety Network - \$21 million, same as FY2017.
  - Advanced Molecular Detection - \$30 million, same as FY2017.
  - Healthcare Associated Infections - eliminated, cut of \$12 million.
- Chronic Disease Prevention and Health Promotion – \$952 million, a cut of \$222 million from FY2017, \$500 million from the PPHF.
  - Racial and Ethnic Approaches to Community Health – eliminated, cut of \$51 million.
  - Tobacco - included in the new America’s Health Block Grant.
  - Million Hearts – eliminated, cut of \$4 million.
  - Cancer Prevention and Control - \$337 million, a cut of \$20 million from FY2017.
  - Safe Motherhood/Infant Health - \$46 million, same as FY2017.
  - Chronic grants to states:
    - Creates “America’s Health Block Grant” - \$500 million block grant that consolidates the following programs:
      - Nutrition, Physical Activity, and Obesity
      - High-Rate Obesity Counties
      - Heart Disease and Stroke Prevention
      - Diabetes
      - Tobacco Prevention and Control
      - Arthritis
    - Diabetes Prevention Program - \$20 million, a cut of \$3 million from FY2017.
    - School Health - \$15 million, same as FY2017.
- Birth Defects, Developmental Disabilities, Disability and Health - \$100 million, a cut of \$38 million from FY2017. The budget eliminates the categorical condition lines and provides no specifics on what programs within the Center will be funded.
- Environmental Health - \$157 million, a cut of \$24 million from FY2017.
  - Environmental Health Activities – \$34 million, a cut of \$11 million from FY2017.
  - Climate Change – eliminated.
  - Childhood Lead Poisoning (Healthy Homes) - \$17 million, same as FY2017.
  - Asthma - \$25 million, a cut of \$4 million from FY2017.

- Environmental and Health Outcome Tracking Network - \$25 million, a cut of \$9 million from FY2017.
- Injury Prevention and Control - \$216 million, a cut of \$70 million from FY2017.
  - Intentional Injury - \$98 million, same as FY2017.
    - Rape Prevention - \$44 million, same as FY2017.
  - Unintentional Injury - \$7 million, a cut of \$2 million.
  - National Violent Death Reporting System - \$16 million, same as FY2017.
  - Injury Prevention Activities - \$20 million, a cut of \$9 million from FY2017.
  - Prescription Drug Overdose Prevention - \$75 million, a cut of \$37 million and combined with the Illicit Opioids Use Risk Factors budget line.
- Public Health Preparedness and Response - \$1.3 billion, a cut of \$136 million from FY2017.
  - Public Health Emergency Preparedness (PHEP) – \$551 million, a cut of \$109 million from FY2017.
  - Academic Centers for Public Health Preparedness - eliminated, cut of \$8 million.
  - Strategic National Stockpile - \$575 million, same as FY2017.
- Public Health and Scientific Services - \$460 million, a cut of \$25 million from FY2017.
  - Public Health Workforce Development - \$45 million, a cut of \$5 million from FY2017.
  - Surveillance, Epidemiology, and Public Health Informatics - \$260 million, a cut of \$19 million from FY2017
  - Health Statistics - \$160 million, same as FY2017.
- CDC-Wide Activities and Program Support - \$105 million, a cut of \$169 million.
  - Public Health Leadership and Support - \$105 million, a cut of \$9 million from FY2017.
  - Preventive Health and Health Services Block Grant – eliminated, cut of \$160 million.

#### *Health Resources and Services Administration*

The bill includes \$5.5 billion for the Health Resources and Services Administration, a cut of \$602 million from FY2017. Programs of interest at HRSA are as follows:

- Community Health Centers - \$1.38 billion, a cut of \$220 million from FY2017.
- Public Health and Preventive Medicine - eliminated, a cut of \$17 million for preventive medicine residencies and public health training centers.
- Maternal and Child Health Block Grant - \$667 million, an increase of \$30 million from FY2017.
- Maternal, Infant, and Early Childhood Home Visiting Program - \$400 million, same as FY2017.
- Ryan White AIDS Programs – \$2.26 billion, a cut of \$59 million from FY2017, from the elimination of the AIDS Education and Training Centers and Special Projects of National Significance.
  - Part A Emergency Assistance (cities) - \$656 million, same as FY2017.
  - Part B Comprehensive Care (states) - \$415 million, same as FY2017.
  - Part B AIDS Drug Assistance Program - \$900 million, same as FY2017.

#### *HHS Office of Population Health*

- Title X Family Planning Program – \$287 million, same as FY2017.

*HHS Office of Adolescent Health*

- Teen Pregnancy Prevention Program – eliminated, cut of \$110 million.

*HHS Office of the National Coordinator*

- Office of the National Coordinator for Health IT - \$38 million, cut of \$22 million.

*HHS Public Health and Social Services Emergency Fund*

- Assistant Secretary for Preparedness and Response - \$1.6 billion, an increase of \$200 million.
  - Hospital Preparedness Program - \$227 million, a cut of \$27 million.
  - Biomedical Advanced Research and Development Authority - \$512 million, same as FY2017.
  - Project BioShield - \$510 million, same as FY2017.
  - Medical Reserve Corps - \$6 million, same as FY2017.
  - Pandemic Influenza Preparedness - \$207 million, an increase of \$135 million.

*Food and Drug Administration*

- Food safety - \$1.4 billion, a cut of \$117 million from FY2017.

*Department of Agriculture*

- Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) - \$6.15 billion, a cut of \$188 million from FY2017.
- Supplemental Nutrition Assistance Program (SNAP) – \$74 million in FY2018, with a cut of \$193 billion over the next 10 years. Proposes to require states cover, on average, 25% of SNAP benefits, phased in between 2020 and 2023.
- Food Safety and Inspection Service - \$1.3 billion, same as FY2017. Creates a new user fee implemented in 2019 estimated to collect \$6 billion over ten years.