



## KEY PROVIDER ISSUES IN HEALTH CARE REFORM

May 2010 WELLNESS PROVISIONS

The health care reform law contained a number of provisions to address the underlying causes of poor health in America. Many of these provisions are expected to increase the number of wellness programs offered by businesses, encourage more employees to participate, more efficiently track wellness programs, and improve overall effectiveness.

### National Prevention Programs

**The National Prevention, Health Promotion and Public Health Council (SEC. 4001)** The law established a National Prevention and Health Promotion Council to coordinate federal prevention, wellness, and public health activities as well as create policy resolutions to achieve wellness initiatives. The Council will be composed of departmental Secretaries from across the federal government, with the Surgeon General serving as Chair.

**Establishment of the Prevention & Public Health Fund (SEC. 4002)** Effective FY2010, the law established a Prevention and Public Health Fund for prevention, wellness and public health activities. The bill appropriated \$7 billion in funding for FY2010 through FY2015 and \$2 billion for each fiscal year thereafter.

**Community Preventive Services Task Force (SEC. 4003)** The Director for the Centers for Disease Control (CDC) will convene a task force to review the scientific evidence related to the effectiveness of community prevention initiatives. The task force will make recommendations that will be published in the Guide to Community Preventative Services; these recommendations are to be used by individuals, medical associations, patient groups, agencies and scientific societies. The task force will also work to coordinate its efforts with the U.S. Preventive Services Task Force and the Advisory Committee on Immunization Practices, including the examination of how each task force's recommendations relate to community preventative services.

**Public Outreach Campaign (SEC. 4004)** Funding was appropriated to educate the public on healthy lifestyles and behaviors that prevent chronic disease, including proper nutrition and regular exercise.

### Payment for Preventive Services

**Medicaid (SEC. 4108)** Effective January 1, 2011, states that provide Medicaid coverage for recommended preventive services and immunizations will receive a 1 percentage point increase in the Federal Medical Assistance Percentages (FMAP) the services provided.

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**Waiver of Copayments under Medicare, Medicaid & Commercial Insurance (SEC. 2713)** The law eliminates patient's out-of-pocket liability for certain preventive services recommended by the U.S. Preventive Services Task Force with a Grade A or B, including mammograms and colorectal cancer screenings.

**Health Assessments and Incentives for Medicare & Medicaid Beneficiaries (SEC. 4103)** Provide Medicare beneficiaries access to a comprehensive health risk assessment and the creation of a personalized prevention plan. Incentives will be offered to Medicare and Medicaid beneficiaries to complete behavior modification programs. Require Medicaid coverage for tobacco cessation services for pregnant women.

### Employer Based Programs

**Small Business Grant Program (SEC. 10408)** The law authorizes \$200 million over a 5-year period (FY 2011- FY 2015) for grants to small employers (defined as those with up to 100 employees) that offer wellness benefits to employees. A comprehensive wellness program must provide health awareness initiatives, attempt to maximize employee engagement, include initiatives to change unhealthy behavior, and promote a supportive environment.

**Employee Incentive Programs (SEC. 2705 (I))** Permits employers to offer employees rewards—in the form of premium discounts, waivers of cost-sharing requirements, or benefits that would otherwise not be provided—of up to 30 percent of the cost of coverage for participating in a wellness program. The law also establishes 10-state pilot programs to permit participating states to apply similar rewards for participating in wellness programs in the individual market and expand demonstrations in 2017, if effective.

**CDC Grants for Employer-Based Wellness Programs (SEC. 4303)** The Center for Disease Control (CDC) will be responsible for providing employers with technical assistance and other resources to evaluate workplace wellness programs, including measuring employee participation; developing standardized measures of factors that have a positive effect on health behaviors, outcomes, and expenditures; and evaluating the effect of programs on health outcomes, absenteeism, productivity, workplace injury rates, and medical costs.