651-266-1200

MINUTES COMMUNITY HEALTH SERVICES ADVISORY COMMITTEE May 5, 2010

MEMBERS PRESENT

Nancy Appleton
Patricia Carlson
Hanna Cooper
Dorii Gbolo
Thomas Kottke
Christopher Mullin
Regina Rippel
Paula Robinson
Kerri-Elizabeth Sawyer
Esther Tatley

STAFF PRESENT

Rob Fulton Richard Ragan

2010 Health Care Reform Legislation

Rob Fulton provided an overview of the 2010 Health Care Reform legislation. The information he provided came from a report by the Association for Community Health Improvement of the American Hospital Association. The title of the report is Detailed Summary of 2010 Health Care Reform Legislation dated April 19, 2010.

WELLNESS AND PREVENTION COVERAGE OF PREVENTIVE HEALTH SERVICES The law requires group health plans and private health insurers offering group or individual health insurance to cover preventive services recommended by the U.S. Preventive Services Task Force (USPSTF), immunizations recommended by the Centers for Disease Control and Prevention (CDC), and certain children's services and women's preventive services and screenings with zero enrollee cost sharing (no copayment or deductible would apply).

EFFECTIVENESS OF FEDERAL WELLNESS INITIATIVES

The law calls for the HHS Secretary to conduct an evaluation of existing federal health

and wellness initiatives to determine the extent to which they affect the health status of the American public.

IMPROVING WOMEN'S HEALTH

Beginning in FY 2010, the law creates an Office on Women's Health within HHS headed by a Deputy Assistant Secretary for Women's Health. The office will set goals and objectives related to women's health to improve prevention, treatment and research in women's health programs, establish a Coordinating Committee on Women's Health, and establish a National Women's Health Information Center.

MODERNIZING DISEASE PREVENTION AND PUBLIC HEALTH SYSTEMS
The law creates the National Prevention, Health Promotion and Public Health Council
chaired by the Surgeon General and composed of the heads of the various federal
agencies, including the secretaries of HHS, Agriculture, Education, Transportation and
Labor. The council will: Provide coordination and leadership at the federal level with
respect to prevention, wellness and health promotion practices in the U.S.

INCREASING ACCESS TO CLINICAL PREVENTIVE SERVICES

The law provides \$50 million in grant funding from FY 2010-2013 to support the operation of school-based health centers, with preference given to those in underserved areas and those that serve a large population of low-income children and those in underserved areas. The law will establish a five-year national public education campaign focused on oral health care prevention and education targeted toward children, the elderly and pregnant women. In addition to the one-time "Welcome to Medicare" comprehensive physical exam, the law provides Medicare beneficiaries with annual wellness visits with zero cost-sharing (no co-payment or deductible would apply).

CREATING HEALTHIER COMMUNITIES

The law adopts a number of initiatives, mainly effective from FY 2010-2014, to create healthier communities, including: Community Transformation Grants to state and local government agencies and community-based organizations for evidence-based community preventive health activities to improve individual and community health, reduce the incidence of chronic disease, create healthier school environments and reduce racial and ethnic disparities. Healthy Aging, Living Well grants to states or local health departments to conduct community-based pilot programs for the pre-Medicare population (age 55-64) to identify and treat individuals at risk of developing chronic disease. Removing barriers and improving access to wellness for individuals with disabilities. Initiatives to improve immunization rates in communities, including allowing states to purchase recommended vaccines from the federal government at discounted rates negotiated by the Secretary. Labeling of standard menu items at chain restaurants. This requirement would require chain restaurants with more than 20 sites to disclose caloric information for menu items, and, upon request, to provide additional nutritional information related to such things as the amount of fat, cholesterol, sodium, sugars, protein and fiber contained in the item. This requirement also applies to food sold from chain vending machines. Demonstration programs for individualized wellness

plans for at-risk populations at 10 community health centers to test the impact of wellness plans on reducing risk factors for preventable conditions. Reasonable break time for nursing mothers, which requires employers with more than 50 employees to provide break time and an appropriate place for breastfeeding mothers to express milk for up to one year after the child's birth.

PUBLIC HEALTH AND PREVENTION INNOVATIONS

The law calls for a number of initiatives to improve research related to public health services and chronic disease management.

OTHER PREVENTION AND WELLNESS ACTIVITIES

The new law also requires the HHS Secretary, in conjunction with the CDC, to prepare and make available to the public on a biennial basis a National Diabetes Report Card that tracks trends in health outcomes for individuals with diabetes.

Chair's Report

Hanna reported to the committee that the resolution asking the Saint Paul Public Housing Authority to designate some of their properties as "smoke-free" has been sent and is awaiting a response. The June 2 meeting of the CHSAC will be the final meeting of the program year. Commissioner Sanne Magnan has been invited to speak on health care reform. The meeting will be held at 90 Plato Blvd W. in the first floor conference center. Once you get notified of the meeting, please RSVP to Dick Ragan so he can plan for food. Anyone whose term on the committee is coming to an end should expect a letter from either the City Council or County Board asking if they would like to continue on the committee. Please RSVP ASAP.

Director's Report

Rob Fulton reported that he had been attending a National Association of City and County Health Officials (NACCHO) conference in Minneapolis. The Saint Paul - Ramsey County Department of Public health was a sentinel health department during the H1N1 epidemic. Directors from all sentinel departments got together to discuss what they had learned and to make recommendations on policy issues for improving the response in the future. One of the issues discussed was what to do with all of the left over H1N1 vaccine?

This is the second year of the 2-year budget cycle. The Department's Leadership Team has been reviewing programs and budgets that are supported by levy and Local Public Health Grant funding, and this week reviewed the Critical Success Indicators (CSIs). On June 10th leadership will meet with the County Manager to review the CSIs and discuss progress on outcomes, changes in our 2011 budget, and if there is any reallocation of resources planned. The information will then be presented to the County Board. County departments were given a spending reduction for 2010. The Public Health Department reduction is approximately \$400,000 for 2010. The Department has been operating under a soft freeze for filling vacancies, and with this reduction will move

to a "harder" freeze as the Vacancy Committee reviews requests to fill positions. Depending on decisions by the legislature and affects on the Local Public Health Grants, the SHIP Grant, and other county funding, the budget may have to be modified further. We anticipate additional direction for reductions in 2011.

There are two department staff members participating in the Emerging Leaders Network. They are Kathy Hedin and Ma Her.

The meeting was adjourned at 7:20 pm.