



NCAALHD

North Carolina Association
of Local Health Directors

222 N. Person Street, Suite 208
Raleigh, NC 27601

P (919) 828 6201
F (919) 828 6203

www.ncalhd.org

January 17, 2017

Within two years of implementation of the Affordable Care Act (ACA) a portion of federal funds which had traditionally been used to fund state and local public health programs were rolled over into the ACA's Prevention and Public Health Fund. The federal funds which were originally proposed as part of the ACA specifically targeting new preventive health initiatives were either never allocated for that purpose or were only available for a short period of time. Instead, traditional state and local public health funding (\$931 million plus nationally) that existed long before the ACA was enacted were moved under the ACA. These funds which had nothing to do with the enactment of the ACA are currently being used to fund existing local public health prevention initiatives nationwide. These initiatives include: Chronic Disease Prevention, Immunizations, Diabetes Prevention, Heart Disease and Stroke Prevention, Lead Poisoning Prevention, Epidemiology and Laboratory Capacity, among other programs. Of these federal funds, North Carolina receives approximately \$29.6 million which goes to support the program areas mentioned above in local health departments.

Public health has been underfunded for more than 30 years and in the last few years, federal support for a strong public health infrastructure has been waning. Federal funds which were promised in the ACA to aid state and local public health programs to build capacity and infrastructure and improve the health of the nation through programs focused on healthy and active living and health promotion, education, and chronic disease prevention have never come to fruition. In December, the World Health Organization ranked the United States 37th among the nations of the world with regard to individual health and on that same list the United States didn't even make the top 10 of industrialized nations.

I'm concerned that if the Prevention and Public Health funds within the ACA are eliminated without considering the impact that such a change will have on these important public health initiatives that the overall health of the nation will suffer a blow that will likely take a generation or more to overcome. What we don't want to have happen is for state and local public health to be inadvertently harmed by the across the board elimination of these critical infrastructure funds. These are core public health funds that go to support and protect the health of virtually every local community in the nation to address Rapidly Emerging Infectious Disease like ZIKA, Hepatitis C, Antibiotic Resistant Infections, Coronavirus (MERS), Meningitis, Mumps, Influenza, etc. In light of recent national and international concern around communicable disease outbreaks, it is imperative that continued funding of state and local public health programs focused on protecting the public's health and improving quality and reducing cost of healthcare are maintained or even increased as these programs are essential in helping create a healthier and economically secure nation.

Please consider when proposing changes to the ACA the potential negative impact that any eliminations or reductions in funding will have on state and local public health efforts to promote, protect and enhance the health of all Americans. If you have any questions, please don't hesitate to contact me directly.

Sincerely,

A handwritten signature in black ink, appearing to read 'James J. Bruckner', written in a cursive style.

James J. Bruckner, MSHS
President, NC Association of Local Health Directors