



What the Different Budget Proposals Mean for Obesity Prevention and Treatment

As the White House and Congress continue to refine budget proposals for the remainder of FY 2011 and beyond, several proposals have been introduced that would threaten or reduce funding for critical obesity prevention and treatment programs. These include a six-month spending bill for 2011 (H.R. 1473) that is expected to pass the House and Senate by April 15; House Budget Committee Chairman Paul Ryan's Budget Proposal for FY 2012 (covering the next ten years); and President Obama's Proposed budget for FY 2012. Below are summaries of how each of the three plans could potentially impact anti-obesity programs.

I. Six-Month Spending Bill for 2011 (H.R. 1473)

The House and Senate leaders' plan—which cuts \$38.5 billion below 2010 levels—contains more bad news than good news for programs enacted to reverse the obesity epidemic:

Prevention and Public Health Fund

The Prevention and Public Health Fund would retain its \$750 million in funding for 2011 as authorized under Affordable Care Act. Unfortunately, threats to future funding of this important program remain active, as the House has passed a full repeal of the Fund; the repeal measure now moves to the senate, where action is not expected in the near term. This key provision was enacted to enable state and local governments, community organizations and nonprofits to increase healthy food options in schools; create physical activity programs at the community level, and incentivize workplace wellness.

Supplemental Nutrition Assistance Program

The Supplemental Nutrition Assistance Program (SNAP) would receive a seven percent cut under the plan. The program, which replaced "food stamps" and provides nutritional support to nearly 31 million Americans, encourages the consumption of fruits and vegetables. The cut would risk reducing access to nutritious foods for those most in need.

USDA Agriculture Research Initiative

The USDA's Agriculture and Food Research Initiative would receive a one percent increase over 2010 spending levels. This program funds research on nutrition and obesity reduction.

Nutrition and Physical Activity Program to Prevent Obesity

Funding for the Centers for Disease Control would be cut by \$730 million from 2010 levels. This could place at risk critical CDC anti-obesity initiatives, such as the Nutrition and Physical Activity Program to Prevent Obesity, which funds statewide efforts to bolster healthful eating and physical activity.

II. House Budget Committee (Ryan) Budget Proposal

The House Republican budget proposal recently released by Budget Committee Chairman Paul Ryan (R-Wisconsin) seeks to reduce federal spending by \$6.2 trillion over the next 10 years. While the budget proposal does not have the force of law, it provides a roadmap for the authorizing and appropriating committees to reduce or eliminate specific federally funded programs. Several provisions in Rep. Ryan's proposal aim to diminish critical anti-obesity initiatives, including:

Repealing the Affordable Care Act and its Obesity-Related Provisions

A central goal of Ryan Budget Resolution is full repeal of the Affordable Care Act, which contained initiatives to address the obesity epidemic through important educational and prevention efforts. Among the key items that are authorized and funded under the Affordable Act that would be eliminated if it is repealed are:

- **Section 2713 – Coverage of Preventive Health Services**, which requires insurance companies to provide coverage for obesity screening and intensive counseling (determined to be a “B” priority for the U.S. Preventative Services Taskforce).
- **Section 4002 – \$15 billion Prevention and Public Health Fund**. The fund is designed to support a range of programs for prevention, wellness and public health activities including research and health screenings. Importantly, the fund supports the Affordable Care Act's new Community Transformation Grants, which the Centers for Disease Control would administer to state and local governmental agencies and community-based organizations for evidence-based community preventive health activities.
- **Section 4004 – Education and Outreach Campaign Regarding Preventive Benefits**. The centerpiece of this provision is a public awareness campaign to disseminate information that will, among other efforts, include a media campaign on proper nutrition, regular exercise, obesity reduction and disease screening.
- **Section 4103 – Medicare Coverage of Annual Wellness Visit Providing a Personalized Prevention Plan**. This provision calls for a Medicare Annual Wellness visit to include personalized prevention plan services, including measuring body mass index (“BMI”) or waist circumference, and including referrals for certain therapeutic interventions to promote weight loss.
- **Section 4306 – Funding for Childhood Obesity Demonstration Project**. This provision authorizes and appropriates \$25 million for a childhood obesity demonstration project. The measure prompts the HHS Secretary to develop a comprehensive grant program for reducing childhood obesity. If successful, the project could be implemented on a broader scale.

Cuts to Medicare and Medicaid

Beyond repealing the Affordable Care Act, the Ryan Budget Resolution makes major cuts in federal spending for Medicare (\$398 billion reduction over ten years) and Medicaid (\$735 billion reduction over ten years), which would be converted into a block grant program.

Supplemental Nutrition Assistance Program Reductions

In addition, the Supplemental Nutrition Assistance Program (SNAP) would also be converted into a block grant program, and states would have to reduce number of recipients. Given that SNAP encourages greater consumption of fruits and vegetables, reducing the program would reduce access to nutritious foods among communities most in need.

III. President Obama's Budget

The President's 2012 budget proposal contains support for many nutrition and obesity programs. For example:

Supplemental Nutrition Assistance Program

The Budget would fully fund the SNAP program and supports the program's goal of encouraging greater consumption of fresh fruits and vegetables by SNAP recipients. In addition, the proposal includes \$35 million for the Healthy Food Financing Initiative, which would provide micro-financing loans to build more grocery stores in "food deserts," a critical effort to provide better access to more nutritious foods, particularly for minority communities.

Affordable Care Act

On health care, the President's budget calls for full funding and implantation of the Affordable Care Act and the Prevention and Public Health Fund, which contains funding for a range of obesity related programs including Community Transformation Grants.

Healthy, Hunger-Free Kids Act

The President's budget also calls for full funding and implementation of the Healthy, Hunger-Free Kids Act, which was enacted last year to reauthorize a range of childhood nutrition programs, including more funding for healthy school meals and, for the first time in more than 30 years, efforts to update the nutritional standards of school-provided meals.

However, the President's Budget also made a number of proposals to consolidate key programs that may force obesity specific programs to compete with other funding priorities. Broad consolidation of resources across government programs could severely jeopardize important initiatives—from increasing physical activity to making nutritious foods more accessible to at risk populations—which are intended to improve the nation's long-term physical and economic health.

Among the programs that, under the President's Budget, may be at risk of reduction or elimination are:

USDA Funding for nutrition and obesity reduction

USDA would consolidate a number of key research programs under the agency's Agriculture and Food Research Initiative, which would be funded at \$325 million and which is supposed to focus its research on "human Nutrition and obesity reduction." This is a strong level of funding. However, the newly expanded initiative would also be charged with funding a host of other activities, including food safety, sustainable bioenergy, global food security, and climate change.

Dedicated funding for PEP Grants

Under the President's budget proposal, funding for the Carol M. White Physical Education Program (PEP)—which enables schools and community-based organizations to initiate, expand, and improve physical education programs—would now have to compete against other programs within the Safe,

Successful and Healthy Students Initiative. Given the well-evidenced link between student physical activity and academic achievement, coupled with alarming evidence that very few students receive required levels of physical activity, now it not the time to jeopardize PEP grants or force them to compete for scarce resources.

Physical Activity as a Means of Transportation

The President's budget would consolidate 55 DOT programs into five massive consolidated programs, including a new "livability grant" program that is intended to fund projects that accommodate pedestrian and bicycle access. However, the program is also intended to fund major, multi-modal transportation projects, which would force critical programs, such as the Safe Routes to School program to compete against massive infrastructure projects, as well as jeopardize funding that would otherwise enable Americans to have safe spaces to walk and play.

The Nutrition and Physical Activity Program to Prevent Obesity

Under the President's budget for the Centers for Disease Control (CDC), this vital obesity prevention program may end up having to compete for funding with heart disease, stroke, diabetes, cancer, arthritis and other programs, under one competitive grant. Ironically, given that obesity is a leading cause of many of these costly chronic diseases, by jeopardizing obesity prevention efforts, the budget could solidify the nonsensical health care delivery system whereby doctors must wait until a patient is diagnosed one of these chronic diseases before the underlying cause —obesity— can be treated. The CDC would be funded at \$5.8 billion, which would represent a \$574 million cut from current funding.