

Preventive Health Savings Act (H.R. 2584/S. 1361)

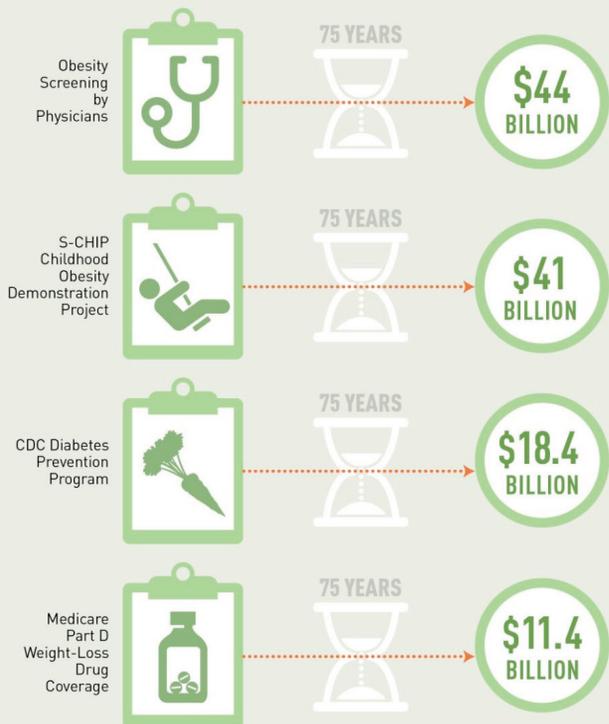
About Us

The Academy of Nutrition and Dietetics is the world's largest organization of food and nutrition professionals representing more than 100,000 credentialed practitioners, including registered dietitian nutritionists (RDNs), nutrition and dietetics technicians, registered and advanced-degree nutritionists. Academy members play a key role in shaping the public's food choices, improving people's nutritional status and preventing and treating chronic disease. We work with all leaders to find nonpartisan public policy solutions that promote health and reduce the burden of chronic disease through nutrition services and interventions.

Co-sponsor the Preventive Health Savings Act

The Preventive Health Savings Act (H.R. 2584/S. 1361) will allow policymakers to more accurately assess the economic impact of legislation that would prevent chronic disease. This legislation would permit leaders in Congress to request the Congressional Budget Office estimate the long-term health savings that are possible from preventive health initiatives. Congressional leaders would be able to request an analysis of the two 10-year periods beyond the existing 10-year scoring window, for a total of 30 years. Within this extended window, CBO would be required to determine — based on its review of credible and publicly available epidemiological projection models, clinical trials or observational studies in humans — whether the initiative would result in substantial savings outside the normal scoring window. This change would offer significant recognition to the role prevention plays in saving taxpayer dollars.

Federal Obesity-Prevention Efforts Could Save Billions of Dollars Over 75 Years



Note: Estimates above are extrapolations from per capita costs. Numbers represent successful obesity prevention policies for one million females. The study found the highest cost savings for women, so only those savings are represented.
Source: *The Long-Term Returns of Obesity Prevention Policies* by The Campaign to End Obesity, April 2013. Support for the report and this image was provided by the Robert Wood Johnson Foundation.

Source: *The Robert Wood Johnson Foundation's Campaign to End Obesity*³

The Fiscal Impact of Chronic Disease Prevention

Today, more than 117 million Americans (approximately half of all adults) live with a chronic condition such as diabetes, heart disease or asthma.¹ This number is expected to climb to 171 million by 2030 as the U.S. population ages.²

¹ Centers for Disease Control and Prevention; <http://www.cdc.gov/chronicdisease/overview/>. Accessed June 30, 2015.

² *Ibid.*

³ Campaign to End Obesity. *The Long-Term Returns of Obesity Prevention*. Robert Wood Johnson Foundation. Available

<http://www.rwjf.org/en/research-publications/find-rwjf-research/2013/04/the-long-term-returns-of-obesity-prevention-programs.html>. April 2013.

Much of the illness, suffering and early death related to chronic diseases are caused by modifiable health behaviors such as lack of physical activity, poor nutrition and tobacco use.

More than 75 percent of health care costs can be attributed to chronic conditions,⁴ and the average costs for someone with one or more chronic conditions is five times greater than for someone without any chronic conditions.⁵ As many as one in four children in the U.S., or 15 million to 18 million children under 18, suffers from a chronic health condition.⁶ Preventing or delaying the onset of new cases of these chronic conditions would dramatically improve the health of Americans while lowering health care costs.

Current CBO Scoring of Prevention Programs

A major limitation of CBO's current approach is that it does not score prevention efforts, including evidence-based nutrition interventions to prevent chronic diseases. The CBO does not acknowledge the cost savings that could result from legislation that helps prevent diseases that cost the federal government billions of dollars. Therefore, a bill that would extend coverage of a successful diabetes prevention program to Medicare-eligible seniors would be likely to receive a high CBO score, even if the long-term savings associated with preventing thousands of new cases of diabetes among Medicare beneficiaries would eventually greatly exceed the initial cost of extending coverage.

Without being able to credit prevention programs for long-term budgetary savings, the CBO scoring process for prevention-related bills greatly distorts the impact that these programs have on federal spending. While prevention programs may require an initial investment that may be associated with short-term upfront costs, the long-term costs associated with treating the diseases that these programs are meant to prevent may be greatly reduced.

The Academy of Nutrition and Dietetics believes it is time for the CBO to reconsider its methods for estimating costs and savings associated with prevention programs.

View of the Academy of Nutrition and Dietetics on the Preventive Health Savings Act

The Academy of Nutrition and Dietetics supports the Preventive Health Savings Act and is urging members of Congress to cosponsor and pass the bill. As the chronic disease epidemic continues to grow in this country, so does the need for legislation that will allow Congress to accurately assess the full savings of enacting prevention-focused measures. By cosponsoring and voting for H.R. 2584/S. 1361, members of Congress would ensure the CBO can convey an accurate assessment of the full savings of enacting prevention-focused measures.

The Preventive Health Savings Act (H.R. 2584/S. 1361) is a bipartisan bill that was introduced in the 116th Congress by Representatives Michael C. Burgess, M.D. (Texas) and Diana DeGette (Colo.) and Senators Ben Cardin (Md.), Mike Crapo (Idaho) and Angus King (Maine).

Key Takeaways

- The Congressional Budget Office is responsible for providing nonpartisan guidance to Congress about the projected economic impact of key legislation.
- Current CBO analysis fails to account for the long-term cost savings associated with preventive health initiatives.
- The Preventive Health Savings Act will enable CBO to provide Congress with a more accurate assessment of the long-term budgetary effects of preventive health programs.

⁴ Centers for Disease Control and Prevention. Chronic Disease Prevention and Health Promotion. CDC website. <http://www.cdc.gov/chronicdisease/>, 2015. Accessed June 15, 2015.

⁵ Partnership for Solutions. Chronic Conditions: Making the Case for Ongoing Care. Partnership for Solutions website. Available <http://www.partnershipforsolutions.org/DMS/files/chronicbook2004.pdf>. September 2004 Update.

⁶ Compas BE, Jaser SS, Dunn MJ, Rodrigues EM. Coping with chronic illness in childhood and adolescence. *Annu Rev Clin Psychol.* 2012;8:455-480.