



National Policy and the Indiana Healthy Weight Initiative: Key Concepts

Key Concept One – The proposed budget cuts will significantly reduce funding for public health initiatives and other funding that impacts peoples’ ability to access good nutrition and be physically active.

1. Cuts to the Prevention and Public Health Fund
 - a. Significant loss to ISDH and other public health programs state-wide. Trust for America’s Health estimates that Indiana would lose more than \$41 million of funding for public health efforts over 5 years.ⁱ
 - b. The IHWI Coalition Director position is funded entirely by the Prevention and Public Health Fund. By cutting this fund the staff support for the IHWI would not be tenable.
2. Cuts to the Education Budget
 - a. Under the current budget proposal Indiana would see significant cuts to Title II and Title IV funds. These funds can be used to support health and wellness efforts in schools including teacher training and nutrition and physical activity efforts.
 - i. Title II – loss of \$35 million from FY 2017 to FY 2018 (*Supporting Effective Instruction State Grants*)ⁱⁱ
 - ii. Title IV – Loss of \$26 million from FY 2017 to FY 2018 (*21st Century Community Learning Centers and Student Support and Academic Enrichment State Grants*)ⁱⁱⁱ
3. Reduction of SNAP and other hunger relief funds
 - a. The proposed budget reduces SNAP assistance and TEFAP dollars (used by food banks in hunger relief.) Our partners are Feeding America’s hungry had this to say. “The budget makes significant cuts to programs that support millions of Americans who have fallen on hard times, including SNAP (or food stamps), which would be reduced by more than \$190 billion over 10 years – a cut of more than 25 percent and resulting in at least 45 billion meals lost.”^{iv}

Key Concept Two – The repeal of the Affordable Care Act (ACA) threatens to reduce focus on population health, prevention, and value-based care.

1. Return to fee-for-service models
 - The repeal of ACA could weaken healthcare investment in population health, prevention efforts and value-based care. The focus on population health and value based care places a stronger emphasis on preventing healthcare issues in the first place which is widely considered “public health.” The work of IHWI is also focused on population health and prevention.^{vi} Fee for service models do not incentivize population health or prevention efforts.
2. Reduction in community investment by hospitals
 - Changes to ACA could see hospitals reduce investment in “Community Benefit” programs due to changes in non-profit status requirements. Under the ACA to maintain non-profit status hospitals must do Community Health Needs Assessments and Community Health Improvement Plans within their service area. These assessments and planning processes helped stimulate investment in community health. Key IHWI partners and key community partners have built successful coalitions and interventions out of community benefit assessment and planning processes.

Key concept Three– The repeal of ACA will likely result in reducing the number of insured people.

1. Reduced access to high quality healthcare options.
 - Capping Medicaid may close many rural and small hospitals and healthcare centers making access to healthcare services much harder. This includes healthcare services that help address obesity, nutrition, physical activity.
2. Cuts to Medicaid and Children’s Health Insurance Plan (CHIP).
 - The proposed budget reduces low-income persons’ and children’s access to health insurance meaning less healthcare and healthcare resources for some of the most vulnerable populations.^{vii}
3. Increased financial burdens on obese people
 - We know obese people spend significantly more on healthcare than non-obese people^{viii}. Reduced coverage means that obese people would need to spend more resources general healthcare expenses. Specific to obesity, the ACA added coverage of obesity related services and coverages.^{ix} Reduction in this coverage would likely place new financial burden on people specifically seeking treatment for obesity.

Key concept Four – Changes to school nutrition rules and regulations will likely reduce the number of students getting free and reduced lunches and will likely lower the nutritional value of school meals

1. Rolling back of School Nutrition Standards under - Healthy, Hunger-Free Kids Act of 2010.
 - a. The Trump administration now grants waivers to states to opt out of certain nutrition standards for school meals. State’s that opt out may have a lower standard of nutrition to adhere too when providing schools meals.
2. Changes to the Community Enrollment Provision for school lunches – Todd Rokita’s Congressional Bill – Improving Child Nutrition and Education Act
 - a. Changes the threshold for all school meals being free to 60% free and reduced population. That is up from 40%.
 - b. For Indiana this means a loss of 120 schools that can participate impacting 60,000 Hoosier children’s’ school meals.
 - c. We know that kids who eat school meals eat more fruits, vegetables, and dairy than those that don’t.^x

The IHWI does not lobby on behalf of or against any bill. Nor do we ask our stakeholders to lobby on behalf of or against any bill. None of the information contained in this report should be construed as a call-to-action. It is intended to be informational and to raise awareness around legislative policy that is impactful to our work. Each individual and organization must decide on their own what, if any, actions to take regarding legislative policy.

ⁱ <http://healthyamericans.org/reports/prevention-fund-state-facts-2017/release.php?stateid=IN>

ⁱⁱ <https://www2.ed.gov/about/overview/budget/statetables/18stbyprogram.pdf>

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^{iv} <http://feedingindianahungry.org/>

^v <https://www.hhs.gov/about/strategic-plan/strategic-goal-1/index.html>

^{vi} <https://www.nap.edu/read/18546/chapter/1#xii>

^{vii} <https://www.americanprogress.org/issues/healthcare/news/2017/05/30/433056/trump-budget-threatens-childrens-health/>

^{viii} <http://stateofobesity.org/healthcare-costs-obesity/>

^{ix} <https://www.medicaid.gov/medicaid/quality-of-care/improvement-initiatives/reducing-obesity/index.html>

^x <https://www.cdc.gov/healthyschools/npao/schoolmeals.htm>