Title IV: Prevention and Wellness Provisions—Health Care Reform Law (111-148)

Background: The Patient Protection and Affordable Care Act takes an aggressive approach to prevention. Many lawmakers see preventive and wellness initiatives as crucial elements of health reform. They anticipate that key investments in preventive services and delivery models will help lower overall health care spending and improve health indicators for more Americans.

Impact on Nurse-Midwives: ACNM supports efforts to expand prevention and wellness efforts in our communities, particularly in the areas of improvement in maternal and infant health. ACNM believes that focusing on the alignment of evidence-based practice and optimal outcomes rather than on maximizing billable interventions will promote improvements in maternal and prenatal health, infant and child health and development, parenting related to child development outcomes, school readiness, and the socioeconomic status of families.

Summary of Provision(s)

Title IV of the new law illustrates many of the new prevention and wellness initiatives. The following summary offers a review of provisions relating to community and the workplace:

1. Establish a grant program to support the delivery of evidence-based and community-based prevention and wellness services aimed at strengthening prevention activities, reducing chronic disease rates, and addressing health disparities, especially in rural and frontier areas (Section 4201-Funds appropriated for 5 years beginning in FY 2010).

2. Provide grants for up to 5 years to small employers that establish wellness programs (Section 10408-Funds appropriated for 5 years beginning in FY 2011). Provide technical assistance and other resources to evaluate employer-based wellness programs. Conduct a national work-site health policies and programs survey to assess employer-based health policies and programs (Section 4303-Conduct study within two years following enactment).

3. Permit employers to offer employees rewards—in the form of premium discounts, waivers of cost-sharing requirements, or benefits that would otherwise not be provided—of up to 30% of the cost of coverage for participating in a wellness program and meeting certain health-related standards. Employers must offer an alternative standard to individuals for whom it is unreasonably difficult or inadvisable to meet the...
standard. The reward limit may be increased to 50% of the cost of coverage, if deemed appropriate (Section 2705-Effective January 1, 2014).

4. Establish 10 state pilot programs by July 2014 that will permit participating states to apply similar rewards for participating in wellness programs in the individual market and expand demonstrations in 2017, if effective. Require a report on the effectiveness and impact of wellness programs (Section 2705-Report due three years following enactment).

**Timeline for Implementation:** Varies by provision and outlined in the summary of provisions.

**Agency Responsible for Implementation/Enforcement:** The U.S. Department of Health and Human Services, the Office of Personnel Management, and the U.S. Department of Labor will each play a role in implementing provisions related to prevention and wellness.

**Impact on Nurse-Midwives:** Thanks to these new provisions of law, ACNM expects to experience greater opportunity to tackle the ongoing concerns of disparate infant mortality rates, maternal morbidity and mortality, and low birth weight in various communities.