

FY2016 President’s Budget Proposal– Public Health Programs

On February 4, the President released his [FY2016 Budget Proposal](#). While it is a political document that does not have the force of law, it is an important marker for Administration priorities and a starting place for Congressional deliberations on revenues and spending.

NACCHO has provided an initial analysis of the budget below and will continue to revise it as more details and clarifications are provided. A detailed chart of the President’s proposed Prevention and Public Health Fund allocation is also [available](#).

Please contact Eli Briggs, NACCHO Director of Government Affairs, with any questions at ebriggs@naccho.org.

NACCHO Priority Public Health Program Funding FY2016

	Program (\$ in millions)	FY2014	FY2015	FY2016 President’s Budget
HHS	<i>Prevention and Public Health Fund (PPHF)</i>	928	927	1,000
CDC	Public Health Emergency Preparedness Cooperative Agreements	645	644	644
CDC	Section 317 Immunization Program (<i>PPHF</i>)	611 (160)	611 (210)	561 (210)
CDC	Partnerships to Improve Community Health (Community Prevention Grants)	80	80	60
CDC	Food Safety	40	48	50
CDC	Epidemiology and Lab Capacity Grants (<i>PPHF</i>)	91 (40)	91 (40)	104 (40)
CDC	Preventive Public Health & Health Services Block Grant (<i>PPHF</i>)	160 (160)	160 (160)	0
CDC	Public Health Workforce Development (<i>PPHF</i>)	52	52	67 (15)
ASPR	Hospital Preparedness Program	255	255	255
ASPR	Medical Reserve Corps	11	9	6
FDA	Center for Food Safety & Applied Nutrition	928	900	1,200

Health and Human Services

The President’s budget proposes \$83.8 billion in discretionary budget authority for the Department of Health and Human Services, an increase of \$4.8 billion from FY 2015. More details on the President’s proposal for the HHS budget can be found in the [Budget in Brief](#).

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Prevention and Public Health Fund

The President's budget includes \$914 million for the Prevention and Public Health Fund (PPHF) for FY2015. NACCHO has created a [chart](#) that includes the FY2015 proposed allocation.

Preventing Opioid Abuse

The President's budget includes \$133 million to address the growing problem of opioid abuse. This would include \$48 million in new funding for CDC to oversee state-level overdose prevention, including improvements in prescription drug monitoring programs, and \$5.6 million in new funding to address heroin-related overdose deaths through collection of real-time hospital emergency data and better mortality data. The Substance Abuse and Mental Health Services Administration would receive \$12 million for a new 10-state grant program aiming to reduce opioid-overdose deaths through purchase of naloxone and training of first responders to use it and \$10 million for state prevention efforts and \$13 million to support medication-assisted addiction treatment.

Centers for Disease Control and Prevention

The President's budget includes an increase of \$141 million from FY2015 for the Centers for Disease Control and Prevention (CDC). Details on the CDC budget proposal can be found in CDC's [FY2016 Congressional Budget Justification](#) or CJ. CDC has also created a series of [one-pagers](#) for each of the Centers.

Programs of interest at CDC are as follows:

- Immunization and Respiratory Diseases- \$748 million, a cut of \$50 million from FY2015.
 - Section 317 Immunization Program - \$561 million, a cut of \$50 million from FY2015, includes \$210 million from the PPHF.
 - Influenza Planning and Response - \$188 million, same as FY2015. This incorporates core pandemic and seasonal influenza activities.
- HIV, Viral Hepatitis, STD, and TB Prevention - \$1.2 billion, an increase of \$44 million from FY2015.
 - HIV Prevention - \$799 million, an increase of \$13 million from FY2015.
 - HIV Prevention with Health Departments - \$398 million, same as FY2015.
 - HIV Surveillance, Research and Programs to Support HIV Prevention - \$120 million, same as FY2015.
 - HIV Adolescent and School Health - \$37 million, an increase of \$6 million from FY2015.
 - Viral Hepatitis Prevention - \$63 million, an increase of \$31 million from FY2015.
 - STD Prevention - \$157 million, same as FY2015.
 - TB Prevention - \$142 million, same as FY2015.
- Emerging and Zoonotic Infectious Diseases – \$699 million, an increase of \$276 million over FY2015. The total includes \$55 million from the PPHF.
 - Core Infectious Diseases - \$501 million, an increase of \$276 million over FY2015, includes \$264 million for an [Antimicrobial Resistance Initiative](#).
 - Food Safety - \$50 million, an increase of \$2 million over FY2015.
 - Epidemiology and Laboratory Capacity Grants - \$104 million, \$40 million from the PPHF, same as FY2014.
 - National Healthcare Safety Network - \$32 million, an increase of \$14 million over FY2015.

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- Advanced Molecular Detection and Response to Infectious Disease Outbreaks - \$30 million, same as FY2015.
- Healthcare Associated Infections - \$15 million from the PPHF, an increase of \$3 million over FY2015.
- Chronic Disease Prevention and Health Promotion – \$1 billion, a cut of \$140 million from FY2015, \$480 million provided through the PPHF.
 - Partnerships to Improve Community Health (created by Congress in FY2014 as Community Prevention Grants) - \$60 million, a cut of \$20 million.
 - Racial and Ethnic Approaches to Community Health – eliminated, \$51 million cut.
 - Tobacco Prevention and Control - \$215 million, same as FY2015, \$110 million provided through the PPHF.
 - Million Hearts - \$4 million through the PPHF, same as FY2015.
 - Cancer Prevention and Control - \$298 million, a cut of \$55 million from FY2015, \$179 million provided through the PPHF. \$65 million from the PPHF is for the Breast and Cervical Cancer Screening Program.
 - Safe Motherhood/Infant Health - \$45 million, same as FY2015.
 - Arthritis - \$27 million, an increase of \$4 million over FY2015.
 - Chronic grants to states:
 - Nutrition, Physical Activity, and Obesity - \$40 million, a cut of \$7 million from FY2015, \$4 million from PPHF.
 - High-Rate Obesity Counties – eliminated, \$5 million cut.
 - Heart Disease and Stroke Prevention – \$130 million, same as FY2015, \$73 million from the PPHF.
 - Diabetes Prevention and Control - \$140 million, same as FY2015, \$73 million from PPHF. \$10 million is for the Diabetes Prevention Program.
 - School Health - \$15 million, same as FY2015.
- Birth Defects, Developmental Disabilities, Disability and Health - \$132 million, same as FY2015.
- Public Health and Scientific Services - \$539 million, an increase of \$58 million from FY2015.
 - Public Health Workforce Development - \$67 million, an increase of \$15 million from FY2015. \$36 million from the PPHF.
 - Surveillance, Epidemiology, and Public Health Informatics - \$311 million, an increase of \$38 million from FY2015.
 - Health Statistics - \$160 million, an increase of \$5 million from FY2015.
 - Foundational Capacities - \$8 million in new funding to support state and local health departments’ efforts to address gaps in foundational capabilities that align with national accreditation standards and are essential to health departments’ ability to protect and improve health.
- Environmental Health - \$179 million, same as FY2015, \$37 million provided by the PPHF.
 - Environmental Health Activities - \$56 million, an increase of \$10 million from FY2015.
 - Climate and health - \$18.6 million, an increase of \$10 million from FY2015.
 - Built Environment and Health grants - \$870,000, same as FY2015.
 - Childhood Lead Poisoning (Healthy Homes) - \$16 million, same as FY2015, \$13 million is from the PPHF.
 - Asthma - \$28 million, same as FY2015.

- Environmental and Health Outcome Tracking Network - \$24 million, a cut of \$10 million from FY2015, all from the PPHF.
- Injury Prevention and Control- \$257 million, an increase of \$87 million from FY2015.
 - Intentional Injury - \$108 million, an increase of \$16 million from FY2015.
 - Rape Prevention and Education – \$44 million, an increase of \$6 million from FY2015.
 - Gun Violence Prevention Research – new funding of \$10 million to fund research to begin examining the questions outlined in the Institute of Medicine and National Research Council [Consensus Report](#).
 - Unintentional Injury - \$9 million, the same as FY2015.
 - National Violent Death Reporting System - \$24 million, an increase of \$12 million from FY2015. The increase expands the program to all 50 states and Washington, DC.
 - Injury Prevention Activities - \$108 million, an increase of \$59 million from FY2015 to fund state-level [prescription drug overdose prevention](#) efforts. The areas of focus include: prescription drug overdose, motor vehicle injury, child injury and suicide.
- Public Health Preparedness and Response - \$1.4 billion, an increase of \$29 million from FY2015.
 - Public Health Emergency Preparedness (PHEP) - \$644, a cut of \$17 million from FY2015.
 - Academic Centers for Public Health Preparedness – eliminated, \$8 million cut.
 - All Other State and Local Capacity – eliminated, \$9 million cut.
 - Strategic National Stockpile - \$571 million, an increase of \$37 million from FY2015.
- CDC-Wide Activities and Program Support - \$114 million, a cut of \$160 million from FY2015.
 - Public Health Leadership and Support - \$114 million, same as FY2015.
 - Preventive Health and Health Services Block Grant – eliminated, \$160 million cut.

Health Resources and Services Administration

The President’s Budget proposal includes \$10.4 billion for the Health Resources and Services Administration which is \$112 million above FY2015. Details of the HRSA budget proposal can be found in HRSA’s [FY2016 Congressional Budget Justification](#).

Programs of interest at HRSA are as follows:

- Community Health Centers – \$4.2 billion, \$809 million cut from FY2015. \$2.7 billion is mandatory funding from the ACA.
- Public Health and Preventive Medicine Training Programs - \$17 million, a \$4 million cut from FY2015. This includes funding for the Public Health Training Centers.
- Maternal and Child Health Block Grant – \$637 million, same as FY2015. \$550 million is for state grants.
- Maternal, Infant and Early Childhood Visiting Program - \$500 million in proposed mandatory funding, a \$100 million increase from FY2015 to add up to 10 additional competitive state awards.
- Ryan White AIDS Programs – \$2.3 billion, same as FY2015. Proposal includes consolidation of funds from Part D and Part C.
 - Part A cities - \$656 million, same as FY2015.
 - Part B states - \$415 million, same as FY2015.
 - Part B AIDS Drug Assistance Program - \$900 million, same as FY2015.
- Title X Family Planning Program - \$300 million, an increase of \$14 million over FY2015.

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- Teen Pregnancy Prevention Initiative - \$105 million, an increase of \$4 million over FY2015,
 - At least \$95 million is for grants and cooperative agreements.
- Abstinence Education Grants – eliminated, \$5 million cut over FY2015.

Public Health and Social Services Emergency Fund

- Assistant Secretary for Preparedness and Response – \$1.5 billion, an increase of \$437 million over FY2015. Details of the ASPR budget proposal can be found in PHSSEF [FY2016 Congressional Budget Justification](#).
 - Hospital Preparedness Program- \$255 million, same as FY2015.
 - Medical Countermeasure (MCM) Dispensing – eliminated again, \$5 million cut from FY2014.
 - Biomedical Advanced Research and Development Authority- \$522 million, an increase of \$49 million over FY2015.
 - Project BioShield - \$646 million, an increase of \$391 million over FY2015.
 - Medical Reserve Corps - \$6 million, a cut of \$3 million from FY2015.

Food and Drug Administration

Details of the FDA budget proposal can be found in [FDA's Congressional Budget Justification](#).

- Center for Food Safety and Applied Nutrition - \$1.2 billion, \$253 million increase from FY2015.

U.S. Department of Agriculture

Details of the FDA budget proposal can be found in USDA's [Budget Summary](#).

- Special Supplemental Nutrition Program for Women, Infants and Children (WIC) - \$6.6 billion, same as FY2015.
 - \$60 million for breastfeeding peer counselors.
 - \$14 million for infrastructure funding.
 - \$55 million for management information systems/electronic benefits transfer (MIS/EBT)
 - An increase of \$25 million to a contingency fund in case of unanticipated increases in program costs.