Mark Masselli: This is Conversations on Health Care. I am Mark Masselli.

Margaret Flinter: And I am Margaret Flinter.

Mark Masselli: Margaret, the battleground for health reform has moved to the Federal Court and we finally just heard from the Federal Judge in Virginia who ruled that part of the Health Reform Legislation that individual mandate requiring all individuals to purchase health insurance is unconstitutional and we know this is the first ground of a very long battle. Certainly, a political setback for the administration as this is likely to make health care a topic of intense bid in the new congress if they needed any prompting and as well into the 2012 presidential campaign.

Margaret Flinter: Well, certainly true, a little hard to see how it could be made any more of an issue than it already is but about that ruling the fee of this decision ultimately lies of course with the Supreme Court. And the Obama Administration seems confident that things can turn in their favor. This is the first setback to two lawsuits that have already been ruled on concerning health reform and the individual mandate. And the proponents anticipate that the remaining challenges to the law will have worked their way through the system by the time the insurance requirements take place in 2014. And Mark, I think it's important to note that the judge in this case said that the rest of the bill outside of the individual mandate was okay and he wasn't willing to grant an injunction. So I think those can be looked at as somewhat positive elements of this decision.

Mark Masselli: I think you are right about that. They are about 20 lawsuits out there covering the sort of waterfront of issues but this is a very conservative judge. He seemingly has narrowed the focus that people will have on reform but there is much more to happen in the Federal Courts and we will keep an eye on it here.

Margaret Flinter: And I think that even whether people know a lot about healthcare policy or not, one thing that everybody understands is that without the individual mandate you will have a process whereby people with the biggest healthcare problems and of getting insurance if everyone is not in the pool the cost go up. But as simple as it sounds, President Obama Administration have to fight very hard to defend this measure.

Mark Masselli: And they will. Meanwhile implementation will go on. This ruling did not affect the immediate efforts to carry out the law administrative officials. So they still plan to expand medicating create the exchanges in each state.

Margaret Flinter: And on that note, let's return to our show and introduce our guest today, Dr. Howard Koh. Dr. Koh is the Assistant Secretary for Health in the Department of Health and Human Services. He has a long and distinguished

background. He has been dedicated to promoting prevention and wellness policies throughout his entire career which includes being Commissioner of Public Health for the State of Massachusetts. We look forward to hearing from him about public health and its impact on the country.

Mark Masselli: But no matter what the story, you can hear all of our shows on our website www.chcradio.com. You can subscribe to iTunes to get our show regularly downloaded, and if you would like to hang onto our every word and read a transcript of one of our shows, come visit us at www.chcradio.com. You can become a fan of Conversations on Health Care on Facebook and also follow us on Twitter.

Margaret Flinter: And as always if you have feedback email us at www.chcradio.com, we would love to hear from you. Now before we speak with Dr. Howard Koh, let's check in with our producer Loren Bonner for the Headline News.

Loren Bonner: I am Loren Bonner with this week's Headline News. A Federal Court Judge in Virginia issued a much awaited ruling on whether the new health law violates the constitution. Judge Henry Hudson ruled that part of the health law, the individual mandate by health insurance is unconstitutional. The ongoing rollout of the law however will not be affected until the Supreme Court reaches a verdict which could take up to two years. White House Spokesman Robert Gibbs says the Obama Administration expects its law to be upheld as it moves through the judicial process.

Robert Gibbs: We are confident that it is constitutional and quite frankly of the three courts that have rendered decisions on this question to have ruled in our favor.

Loren Bonner: This case is the first to strike down any part of the health reform law. Congress voted to prevent a 25% cut to Medicare payments that would have kicked in January 1st of the New Year. Payments to Medicare providers will remain at current levels until the end of next year. The senate approved the bill with unanimous consent before sending it to the House of Representatives for final vote. Senator Harry Reid said it will give some relief to Medicare providers for the time being while Congress works on a more permanent solution next year.

Senator Harry Reid: It was a struggle to get it done, but we worked together and got it done as done for a year. We have been doing on a monthly basis of three months and at least a year is step in the right direction.

Margaret Flinter: The \$19 Billion Bill otherwise known as the Doc Fix was paid for by a tweet to the new Health Reform Law. The cost will be offset by changing a provision of the new healthcare law that offers subsidies to lower income people to help them buy insurance starting in 2014. This bill allows the

government to recover more of any overpayments that people might receive if they misstate their income or earn more than they expect in a given year. President Obama applauded the action by congress and expects to sign the bill into law shortly and speaking of bill signing President Obama signed the Healthy Hunger-Free Kids Act into law after it passed both houses of Congress with bipartisan support that president says the bill will help provide all children with healthy foods in schools.

Barrack Obama: This act is about doing what's right for our children. Right now across the country, too many kids don't have access to school meals and often the food that's being offered isn't as healthy or as nutritious as it should be.

Loren Bonner: The legislation was strongly supported by First Lady Michelle Obama and her campaign to fight childhood obesity. This week on Conversations on Health Care we are discussing some of the public health and prevention initiatives under way at the Department of Health and Human Although smoking rates have decreased significantly over the Services. decades, tobacco use remains the leading cause of premature and preventable deaths in our society. Approximately 20% of American smoke and the government hopes to reduce that number by 12% by 2020. There are several ways the Department of Health is trying to achieve this. The Affordable Care Act will give Americans in private and public health plans access to recommended preventative care like smoking cessation treatment and Medicaid will be expanded to cover these related programs. Under the new law states that voluntarily cover all recommended preventative services and immunizations for all Medicaid and release will get an increase in their federal Medicaid reimbursements. According to the campaign for tobacco free kids these changes are an important first step to guarantee coverage for smoking cessation to all Medicaid recipients, since lower income Americans have higher rates of smoking compared to the general population. About 33% of Medicaid recipients smoke compared to 20% of the total adult population. Right now only six states provide comprehensive coverage for Medicaid recipients those states include Indiana, Massachusetts, Minnesota, Nevada, Oregon and Pennsylvania. HHS has also brought smoking prevention back into the spotlight with a new national action plan for tobacco control that they hope will finally end to the smoking epidemic. The new plan will require cigarette manufacturers to place gruesome images on cigarette packs. The new warning labels will have to cover half the front and back of packs and 20% of large ads and they could include images of emaciated cancer patients or diseased organs. Beginning in October 2012 cigarette makers that do not put the new warning labels on their packaging will not be allowed to cell their brands in the United States. Let's turn now to our interview with Dr. Howard Koh who can tell us more about building a system of prevention.

Mark Masselli: This is Conversations on Health Care. Today we are speaking with Dr. Howard Koh Assistant Secretary for Health at the US Departmental Health and Human Services. Welcome Dr. Koh.

Dr. Howard Koh: Thank you.

Mark Masselli: Dr. Koh you have had a long and very distinguished career in Medicine and Public Health, we are glad to see you spent eight years here in Connecticut at Yale College and Medical School. You also served for six years as Commissioner of Public Health for the Commonwealth of Massachusetts. From our perspective every state is a potential laboratory for creative approaches to solving difficult issues. What key lessons did you learn as commissioner that you are finding relevant today in your role as HHS Assistant Secretary?

Dr. Howard Koh: I feel very, very blessed to I have had multiple perspectives on health and a lot of what drives me now as assistant secretary comes from my experiences first as a young physician and a clinician caring for patients and then later as the State Health Commissioner as you mentioned. When you are a young doctor in training particularly you want to cure patients and make every patient as healthy as possible and you focus traditionally on individual biology of disease of patients and that's the way I started when I was at Yale Medical School and then went to training later in Boston. But when you go to that experience as a doctor and a clinician and provider, you quickly see so much suffering that could be prevented and even deaths that could be prevented. So that was a transformative for me and I went on to care for patients for over a 30 years and that was tremendously satisfying experience but I saw so many times where prevention should have and could have played a role and then later as a State Health Commissioner I got to see where policy changes and focusing on broader perspectives can really help people and live healthier lives if we focus on public health and prevention so those are some of the messages and themes that bring me to this current job as Assistant Secretary for Health.

Margaret Flinter: And Dr. Koh in this role you have really an enormous portfolio of people in programs to watch out for the Office of Surgeon General, the United States Public Health Service Commission Core, the 10 regional offices around the country, but I note that Secretary Sebelius at the time of your appointment said that you would in particular be focused on carrying out the prevention initiatives under the Patient Protection and Affordable Care Act. Can you describe for our listener some of the key elements of the prevention initiatives under the Health Reform Act and where are we today with getting them ruled out.

Dr. Howard Koh: Well what thrills me now as we are really in a transformative moment in American public health history, because the Affordable Care Act that the President signed into Law in March really focuses on not only increasing access to care an insurance coverage for millions of people but also building true systems of prevention for the first time and that theme applies at multiple levels. So for individuals now new plans are required to offer preventive services to beneficiaries without cost sharing of that means we don't want to cost to be a barrier for people to get good prevention, so for people covered under new plans

they can get cancer screening and tobacco counseling and alcohol counseling and other preventive services without out-of-pocket costs. There are opportunities for states and communities to get more funding for prevention. And then there is on a national level new emphasis on national strategy for prevention. There is a national prevention strategy due to commence in March of 2011. New national prevention council and new national prevention funding that is unprecedented. So this is the time in our country where we are hearing much more about prevention at the individual and the community level and it's a great opportunity for the country.

Mark Masselli: Well Dr. Koh, as you said we are seeing this re-emergence of the importance of public health in prevention and health promotion in the country. We had the pleasure to speak with Dr. Michael McGinnis several weeks ago who did a lot of the initial work on healthy people initiative and we are very interested in seeing the new healthy people 2020 goals that were just released ambitious and important. What are some of the key initiatives you were leading to help America meet these goals and how much of an impact will Health Reform have in our ability to meet these goals?

Dr. Howard Koh: Mark, first of all thank you for mentioning Dr. McGinnis who is a true public health hero for the country and healthy people is a very exciting initiative that gets updated every 10 years. So in fact Healthy People 2020 are national goals for next 10 years was just unveiled by the department last week. And we are very, very excited about it. And their four overarching goals first to improve quantity and quality of life, secondly to achieve true health equity for people and reduce health disparities, third to make sure the message of public health and prevention occurs for people throughout the life span because we know that health is a gift and we should talk about prevention in public health everyday throughout the life span. And then fourth we need a broad community approach to health. So there is a wonderful line in healthy people that the health of the individual is almost inseparable from the health of the greater community and the health of every community drives the health of the entire nation. And so the health of the individual and the health of the community is really interconnected and the message of healthy people 2020 the new vision is that we are all interdependent and we are all interconnected and we all have promises to keep.

Margaret Flinter: Well thank you and I hope that that report gets very widespread dissemination we will certainly do our part on that. As far as challenges ahead for public health one of the most waxing that's been with us is of course continuing to try and reduce smoking consumption, that's our top issue and I think that somewhere we have seen some of the progress on reducing adult and youth smoking rates plateau nationally but I'll go back to Massachusetts for a moment, they have been a real leader and as I understand in 2006 they changed their Medicaid program to pay for tobacco cessation counseling and for treatment for Medicaid enrollees and the result was really quite astonishing drop in the

population of people who smoked to a Medicaid enrollees. And they showed even short term savings from decreased health cost. What in your role are you advocating for nationally in terms of policy reform that will continue to drive down the use of tobacco? What would you like to see in the national policy?

Dr. Howard Koh: We need to remind the country regularly that tobacco dependance remains still the leading preventable cause of death and suffering in this country and around the world. We have over a thousand people a day dying from tobacco dependance in this country and there is no other condition where we are projecting a billion deaths in the 21st century, that's 1 billion deaths in the 21st century around the world because of tobacco dependance and addiction. So there is no greater public health challenge and unfortunately this dependency is increasing falling on lower income populations. So we need to re-double our efforts to end the epidemic and Margaret the experience you just cited is a very exciting example of where when you put all your public health on prevention and resources and apply to this science and intervention you can really make a difference. In the Massachusetts study you mentioned that was outreached for smokers who are on Medicaid. People on Medicaid generally have smoking rates sometimes up to double of the general population but with counseling and with access to pharmaceutical agents to help cessation with outreach and coverage, the smoking rates dropped very, very quickly and as a former Massachusetts Health Commissioner I am very proud of that study and I think that's an example of what we can do in this country to really make a difference with this public health challenge.

Mark Masselli: Today we are speaking with Dr. Howard Koh, Assistant Secretary for Health at the US Department of Health and Human Services. Dr. Koh you oversee the United States Public Health Service Commissioned Corps, one of the seven uniformed services and probably the least know to the general public how does the Corps impact health and health care in the United States and what are the priorities under the current administration?

Dr. Howard Koh: The Commissioned Corps has a very proud history that dates back into the past several centuries and traditionally the core has responded to crisis and protected the public and particularly served vulnerable population. We have tremendous professionals in the Indian Health Service for example, caring for Native American populations around the country. We have Commissioned Corps Officers at the Centers for Diseased Control and Prevention who respond to infectious disease outbreaks and are deployed and served on site with the recent earthquake and in Haiti we had Commissioned Corps Officers travel to Haiti and deliver services there. So the Corps is an area where we have put in tremendous time and energy to make sure that it remains a vibrant organization that serves the country and serves the public health.

Margaret Flinter: Well we are glad to help get the word out about their incredibly good work and Dr. Koh there is an enormous amount of interest in meaningful

use of electronic health records by health care providers and meaningful health information exchange at the state and the regional level. But I think one of the most interesting and important areas for improvement in health and fitness technology is probably in public health and while we do have I think better systems for communication in data that when we did pre-9/11 I think most experts will agree that we still don't have that state-of-the-art health information technology in our state public health departments and local public health departments and we don't really have a national system. How are you and your colleagues at HHS approaching this issue?

Dr. Howard Koh: You are absolutely right Margaret, we need to modernize health records around the country and make it as current as possible so that we can have information available for not only for patients but also for prevention for populations and if we can also use that technology to prompt providers to get prevention delivered for their clients so it's another big bonus. So Dr. Blumenthal The Office of the National Coordinator, the President and congress to put tremendous resources into for more than what's called meaningful uses you have noted to make electronic medical records of the standard of practice around the country.

Mark Masselli: Dr. Koh we can talk about public health prevention wellness in eliminating health disparities without talking about obesity. At our community health center we care for over hundred thousand patients but when it comes to obesity we are taking the fight to schools through our Research Watch Program to downtown social dance halls into parking lots with farmers markets. We are not beating this one in the exam room. We know it's an important issue to the white house and certainly the First Lady has done, been such a great leader what's the thinking at HHS about how to address this from a public health perspective.

Dr. Howard Koh: You are absolutely right obesity has become a major public health challenge in our time particularly among kids and we know that with obesity rates rising it's driving diabetes rates and leading to preventable heart disease and even preventable cancer and other adverse outcomes. So again we need a broad public health approach here and approach that involves not only individuals but entire communities and this is where the First Lady's leadership in her Let's Move initiative has been absolutely tremendous. There was a childhood taskforce report that was unveiled in last February, that put out a number of areas for emphasis so that we need to obviously improve nutrition for young kids. We need to make schools healthier with respect to nutrition. We need to make sure there are no food desserts around the country so that healthy nutritious foods are available to people and successful to people. And we need the broadest community approach here to promote physical activity and fitness and safe routes to schools and other themes.

Margaret Flinter: Dr. Koh there is so much fascinating interesting ground breaking work going around the world and we would like to ask all of our guests this question when you look around the country and the world what do you see in terms of innovation and who should our listeners or Conversations be keeping an eye on?

Dr. Howard Koh: Let's see, one key innovator in my department who I am very proud of is our new first ever Chief Technology Officer Todd Park and Todd comes from the world of data which at first glance doesn't sound that stimulating or innovative but what Todd has done is he has worked very hard to make all health data available to the public for free in what he is calling the committee health data initiative. He often points out that weather information has been made available through government channels so that we have weather channels and weather information that people can use for innovative and creative purposes. He wants a similar situation for publicly collected health data. And when we unveiled Healthy People 2020 last week he was there with us to announce and an applications challenge, an Apps Challenge with the belief that if you get health data online on web that are relevant to your committee and neighborhood and people see the threats that are very relevant person to them it can really motivate action and really galvanize communities to work to make a difference. So Todd Park is a person with lot of innovations.

Mark Masselli: And we would say that's super cool.

Dr. Howard Koh: He uses that term a lot and he also likes talking about Intermojo. And he has got so much energy and I think he is going to make this data come alive and so we can use the best events possible to make people something possible.

Mark Masselli: Well thank you so much and today we have been speaking with Dr. Howard Koh Assistant Secretary for Health at the US Department of Health and Human Services. Thank you so much for joining us today.

Dr. Howard Koh: Mark and Margaret thank you very much.

Mark Masselli: Each week Conversations highlights a bright idea about how to make wellness a part of our communities into everyday lives. This week's bright idea focuses on a public health initiative underway in New Delhi, India, called the Delhi Nullahs project. New Delhi resident urban planner and architect Manit Rastogi conceived the plan in 2008 as a way to transform his city into a healthier place to live. At its core the plan focuses on transforming the city's sewage laden canals or nullahs into a network of clear flowing streams by installing small scale equipment to treat the sewage at its source. The nullahs originally carried storm water but with a rapid urbanization of Delhi they now consist of garbage and waste. The Delhi Nullahs project is about more than just clean water. According to Rastogi it's really about solving a multitude of health issues in New Delhi along

side the cleaned up nullahs which run about 200 miles long through New Delhi walkways and bicycle paths will be added. The goal is to increase physical activity and reduce air pollution for a city that adds 1000 cars daily to its already over crowded roadways. This will hopefully reduce much of the disease that results three pilot projects are already underway in New Delhi. If successful, this model could also be replicated in other developing countries. By revitalizing network of polluted waterways the New Delhi Nullahs project is creating a more sustainable environment, a healthier and more engaged citizenry in New Delhi. Now that's a bright idea.

Margaret Flinter: This is Conversations on Health Care. I am Margaret Flinter.

Mark Messalli: I am Mark Messalli, peace and health.

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