

**Actions in the National Prevention Strategy
that Can be Cross-Walked to the Affordable Care Act**

Clinical Preventive Services		
Action	Section of Natl. Prev. Strategy	Relevant ACA Provision(s)
<i>The federal government will support delivery of clinical preventive services in various health care and out-of-home care settings, including Federally Qualified Health Centers; Bureau of Prisons, Department of Defense, and Veterans Affairs facilities; and among Medicare providers.</i>	Clinical and Community Preventive Services (p. 20)	
<i>The federal government will identify, pilot, and support strategies to reduce cardiovascular disease, including improving screening and treatment for high blood pressure and cholesterol.</i>	Clinical and Community Preventive Services (p. 20)	
<i>The federal government will encourage older adults to seek a free annual Medicare wellness visit, a new benefit provided by the Affordable Care Act.</i>	Clinical and Community Preventive Services (p. 20)	
<i>The federal government will educate clinicians, Federal employees, and the public (especially those in underserved populations) about coverage improvements and elimination of cost-sharing for clinical preventive services as set forth in the Affordable Care Act.</i>	Clinical and Community Preventive Services (p. 20)	
<i>The federal government will develop new and improved vaccines, enhance understanding of the safety of vaccines and vaccination practices, support informed vaccine decision-making, and improve access to and better use of recommended vaccines.</i>	Clinical and Community Preventive Services (p. 20)	
<i>The federal government will research complementary and alternative medicine strategies to determine effectiveness and</i>	Clinical and Community Preventive Services (p. 20)	

how they can be better integrated into clinical preventive care.		
<i>State, tribal, local and territorial governments can increase delivery of clinical preventive services, including ABCS, by Medicaid and Children’s Health Insurance Program (CHIP) providers.</i>	Clinical and Community Preventive Services (p. 20)	
<i>Businesses and employers can offer health coverage that provides employees and their families with access to a range of clinical preventive services with no or reduced out-of-pocket costs.</i>	Clinical and Community Preventive Services (p. 21)	
<i>Health care systems, insurers and clinicians can inform patients about the benefits of preventive services and offer recommended clinical preventive services, including the ABCS, as a routine part of care.</i>	Clinical and Community Preventive Services (p. 21)	
<i>Health care systems, insurers and clinicians can reduce or eliminate client out-of pocket costs for certain preventive services, as required for most health plans by the Affordable Care Act, and educate and encourage enrollees to access these services.</i>	Clinical and Community Preventive Services (p. 21)	
<i>The federal government will promote utilization of smoking cessation benefits by Federal employees, Medicare and Medicaid beneficiaries, and active duty and military retirees.</i>	Tobacco-Free Living (p.29)	
<i>The federal government will make cessation services more accessible and available by implementing applicable provisions of the Affordable Care Act, including in government health care delivery sites.</i>	Tobacco-Free Living (p.29)	
<i>Health care systems, insurers and clinicians can implement evidence-based recommendations for tobacco use treatment and provide information to their patients on the health effects of tobacco use and secondhand smoke exposure.</i>	Tobacco-Free Living (p.29)	
<i>Health care systems, insurers and clinicians can reduce or</i>	Tobacco-Free Living (p.30)	

eliminate out-of-pocket costs for cessation therapies.		
<i>The federal government will provide education, outreach, and training to address parity in employment-based group health plans and health insurance coverage for substance use disorders.</i>	Preventing Drug Abuse and Excessive Alcohol Use (pp. 32-33)	
<i>Health care systems, insurers and clinicians can identify and screen patients for excessive drinking using SBIRT, implement provider reminder systems for SBIRT (e.g., electronic medical record clinical reminders) and evaluate the effectiveness of alternative methods for providing SBIRT (e.g., by phone or via the internet).</i>	Preventing Drug Abuse and Excessive Alcohol Use (p. 33)	
<i>Health care systems, insurers, and clinicians can screen for obesity by measuring body mass index and deliver appropriate care according to clinical practice guidelines for obesity.</i>	Healthy Eating (p. 35)	
<i>The federal government will develop and disseminate clinical guidelines, best practices, and tools on increasing physical activity and reducing the number of overweight and obese individuals.</i>	Active Living (p.39)	
<i>Health care systems, insurers, and clinicians can conduct physical activity assessments, provide counseling, and refer patients to allied health care or health and fitness professionals.</i>	Active Living (p.40)	
<i>Health care systems, insurers, and clinicians can support clinicians in implementing physical activity assessments, counseling, and referrals (e.g., provide training to clinicians, implement clinical reminder systems).</i>	Active Living (p.40)	
<i>Health care systems, insurers, and clinicians can conduct falls-risk assessments for older adults, including medication review and modification and vision screening.</i>	Injury and Violence-Free Living (p. 43)	
<i>Health care systems, insurers, and clinicians can include</i>	Injury and Violence-Free Living	

occupational and environmental risk assessment in patient medical history-taking.	(p. 43)	
<i>The federal government will increase access to comprehensive preconception and prenatal care, especially for low-income and at-risk women.</i>	Reproductive and Sexual Health (p. 45)	
<i>The federal government will promote and disseminate national screening recommendations for HIV and other STIs.</i>	Reproductive and Sexual Health (p. 45)	
<i>The federal government will promote and disseminate best practices and tools to reduce behavioral risk factors (e.g., sexual violence, alcohol and other drug use) that contribute to high rates of HIV/STIs and teen pregnancy.</i>	Reproductive and Sexual Health (p. 45)	
<i>Health care systems, insurers, and clinicians can advise patients about factors that affect birth outcomes, such as alcohol, tobacco and other drugs, poor nutrition, stress, lack of prenatal care, and chronic illness or other medical problems.</i>	Reproductive and Sexual Health (p.46)	
<i>Health care systems, insurers, and clinicians can include sexual health risk assessments as a part of routine care, help patients identify ways to reduce risk for unintended pregnancy, HIV and other STIs, and provide recommended testing and treatment for HIV and other STIs to patients and their partners when appropriate.</i>	Reproductive and Sexual Health (p.46)	
<i>Health care systems, insurers, and clinicians can provide vaccination for Hepatitis B virus and Human Papillomavirus, as recommended by the Advisory Committee on Immunization Practices.</i>	Reproductive and Sexual Health (p.46)	
<i>Health care systems, insurers, and clinicians can offer counseling and services to patients regarding the range of contraceptive choices either onsite or through referral consistent with Federal, state, and local regulations and laws.</i>	Reproductive and Sexual Health (p.46)	
<i>The federal government will improve access to high-quality</i>	Mental and Emotional Well-Being	

mental health services and facilitate integration of mental health services into a range of clinical and community settings (e.g., Federally Qualified Health Centers, Bureau of Prisons, Department of Defense, and Veterans Affairs facilities).	(p. 49)	
<i>State, tribal, local and territorial governments can pilot and evaluate models of integrated mental and physical health in primary care, with particular attention to underserved populations and areas, such as rural communities.</i>	Mental and Emotional Well-Being (p. 49)	
<i>Health care systems, insurers, and clinicians can screen for mental health needs among children and adults, especially those with disabilities and chronic conditions, and refer people to treatment and community resources as needed.</i>	Mental and Emotional Well-Being (p.50)	

Integration of Clinical and Community Health		
Action	Section of Natl. Prev. Strategy	Relevant ACA Provision(s)
<i>The federal government will improve use of patient-centered medical homes and community health teams, which are supported by the Affordable Care Act.</i>	Clinical and Community Preventive Services (p. 20)	
<i>The federal government will promote and expand research efforts to identify high-priority clinical and community preventive services and test innovative strategies to support delivery of these services.</i>	Clinical and Community Preventive Services (p. 20)	
<i>State, tribal, local, and territorial governments can foster collaboration among community-based organizations, the education and faith-based sectors, businesses, and clinicians to identify underserved groups and implement programs to improve access to preventive services.</i>	Clinical and Community Preventive Services (p. 20)	
<i>Health care systems, insurers and clinicians can adopt medical home or team-based care models.</i>	Clinical and Community Preventive Services (p. 21)	
<i>Health care systems, insurers and clinicians can create</i>	Clinical and Community	

linkages with and connect patients to community resources (i.e. tobacco quitlines), family support, and education programs.	Preventive Services (p. 21)	
<i>Health care systems, insurers and clinicians can facilitate coordination among diverse care providers (e.g. clinical care, behavioral health, community health workers, complementary and alternative medicine).</i>	Clinical and Community Preventive Services (p. 21)	
<i>Health care systems, insurers and clinicians can enhance care coordination and quality of care (e.g., medical home models, integrated care teams).</i>	Elimination of Health Disparities (p. 27)	
<i>The federal government will encourage HIV testing and treatment, align programs to better identify people living with HIV, and link those who test positive to care.</i>	Reproductive and Sexual Health (p.46)	
<i>Community, non-profit, and faith-based organizations can support pregnant women obtaining prenatal care in the first trimester (e.g., transportation services, patient navigators).</i>	Reproductive and Sexual Health (p.46)	
<i>Community, non-profit, and faith-based organizations can promote and offer HIV and other STI testing and enhance linkages with reproductive and sexual health services (e.g., counseling, contraception, HIV/STI testing and treatment).</i>	Reproductive and Sexual Health (p.46)	
<i>Community, non-profit, and faith-based organizations can expand access to mental health services (e.g., patient navigation and support groups) and enhance linkages between mental health, substance abuse, disability, and other social services.</i>	Mental and Emotional Well-Being (p.50)	

Community-Based Preventive Services		
Action	Section of Natl. Prev. Strategy	Relevant ACA Provision(s)
<i>Community, non-profit, and faith-based organizations can Support use of retail sites, schools, churches, and community</i>	Clinical and Community Preventive Services (p. 21)	

centers for the provision of evidence-based preventive services.		
<i>Community, non-profit, and faith-based organizations can expand public-private partnerships to implement community preventive services (e.g., school-based oral health programs, community-based diabetes prevention programs).</i>	Clinical and Community Preventive Services (p. 21)	
<i>Community, non-profit, and faith-based organizations can identify and help connect people to key resources (e.g., for health care, education, and safe playgrounds).</i>	Empowered People (p. 24)	
<i>The federal government will develop and evaluate community-based interventions to reduce health disparities and health outcomes [sic].</i>	Elimination of Health Disparities (p. 26)	
<i>Early learning centers, schools, colleges and universities can offer preventive services (e.g., mental health services, oral care, vision, and hearing screenings) for all children, especially those at risk.</i>	Elimination of Disparities (p. 27)	
<i>Community, non-profit, and faith-based organizations can implement sustained and effective media campaigns, including raising awareness of tobacco cessation resources.</i>	Tobacco-Free Living (p.30)	
<i>State, tribal, local and territorial governments can implement strategies to prevent transmission of HIV, hepatitis and other infectious diseases associated with drug use.</i>	Preventing Drug Abuse and Excessive Alcohol Use (p.33)	
<i>Community, non-profit, and faith-based organizations can educate youth and adults about the risks of drug abuse (including prescription misuse) and excessive drinking.</i>	Preventing Drug Abuse and Excessive Alcohol Use (p.33)	
<i>Community, non-profit, and faith-based organizations can implement culturally and linguistically appropriate social supports for breastfeeding, such as marketing campaigns and breastfeeding peer support programs.</i>	Healthy Eating (p. 36)	
<i>Early learning centers, schools, colleges and universities can</i>	Active Living (p.40)	

make physical activity facilities available to the local community.		
<i>Community, non-profit, and faith-based organizations can offer low or no-cost physical activity programs (e.g., intramural sports, physical activity clubs).</i>	Active Living (p.40)	
<i>Community, non-profit, and faith-based organizations can offer opportunities for physical activity across the lifespan (e.g., aerobic and muscle strengthening exercise classes for seniors).</i>	Active Living (p.40)	
<i>Community, non-profit, and faith-based organizations can build public awareness about preventing falls, promote fall prevention programs in home and community settings, and educate older adults on how to prevent falls.</i>	Injury and Violence-Free Living (p. 43)	
<i>State, tribal, local and territorial governments can implement evidence-based practices to prevent teen pregnancy and HIV/STIs and ensure that resources are targeted to communities at highest risk.</i>	Reproductive and Sexual Health (p.46)	
<i>Community, non-profit, and faith-based organizations can educate communities, clinicians, pregnant women, and families on how to prevent infant mortality (e.g., nutrition, stress reduction, postpartum and newborn care).</i>	Reproductive and Sexual Health (p.46)	
<i>Community, non-profit, and faith-based organizations can provide space and organized activities (e.g., opportunities for volunteering) that encourage social participation and inclusion for all people, including older people and persons with disabilities.</i>	Mental and Emotional Well-Being (p.50)	
<i>Community, non-profit, and faith-based organizations can support child and youth development programs (e.g., peer mentoring programs, volunteering programs) and promote inclusion of youth with mental, emotional, and behavioral</i>	Mental and Emotional Well-Being (p.50)	

problems.		
<i>Community, non-profit, and faith-based organizations can train key community members (e.g., adults who work with the elderly, youth, and armed services personnel) to identify the signs of depression and suicide and refer people to resources.</i>	Mental and Emotional Well-Being (p.50)	

Policy/Structural Changes to Impact Health		
Action	Section of Natl. Prev. Strategy	Relevant ACA Provision(s)
<i>The federal government will coordinate investments in transportation, housing, environmental protection, and community infrastructure to promote sustainable and healthy communities.</i>	Healthy and Safe Community Environments (p. 16)	
<i>The federal government will enhance capacity of state, tribal, local, and territorial governments to create healthy, livable and sustainable communities (e.g., increase access to healthy food and opportunities for physical activity, revitalize brownfields, enhance alternative transportation options, and develop green facilities and buildings).</i>	Healthy and Safe Community Environments (p. 16)	
<i>The federal government will support and expand cross-sector activities to enhance access to high quality education, jobs, economic opportunity, and opportunities for healthy living (e.g., access to parks, grocery stores, and safe neighborhoods).</i>	Elimination of Health Disparities (p. 26)	
<i>Community, non-profit, and faith-based organizations can work with local policy makers to implement comprehensive tobacco prevention and control programs.</i>	Tobacco-Free Living (p.30)	
<i>The federal government will support initiatives to increase the availability of healthy and affordable foods in underserved urban, rural, and frontier communities.</i>	Healthy Eating (p. 36)	
<i>Early learning centers, schools, colleges and universities can implement and enforce policies that increase the availability</i>	Healthy Eating (p. 36)	

of healthy foods, including in a la carte lines, school stores, vending machines, and fundraisers.		
<i>Community, non-profit, and faith-based organizations can lead or convene city, county, and regional food policy councils to assess local community needs and expand programs (e.g., community gardens, farmers markets) that bring healthy foods, especially locally grown fruits and vegetables, to schools, businesses, and communities.</i>	Healthy Eating (p. 36)	
<i>The federal government will support coordinated, comprehensive, and multicomponent programs and policies to encourage physical activity and physical education, especially in schools and early learning centers.</i>	Active Living (p.39)	
<i>State, tribal, local and territorial governments can design safe neighborhoods that encourage physical activity (e.g., include sidewalks, bike lanes, adequate lighting, multi-use trails, walkways, and parks).</i>	Active Living (p.39)	
<i>Businesses and employers can design or redesign communities to promote opportunities for active transportation (e.g., include places for physical activity in building and development plans).</i>	Active Living (p.39)	
<i>Early learning centers, schools, colleges and universities can support walk and bike to schools programs (e.g., “Safe Routes to School”) and work with local governments to make decisions about selecting school sites that can promote physical activity.</i>	Active Living (p.40)	
<i>Community, non-profit, and faith-based organizations can develop and institute policies and joint use agreements that address liability concerns and encourage shared use of physical activity facilities (e.g., school gymnasiums, community recreation centers).</i>	Active Living (p.40)	

<i>Community, non-profit, and faith-based organizations can promote safer and more connected communities that prevent injury and violence (e.g., by designing safer environments, fostering economic growth).</i>	Injury and Violence-Free Living (p. 43)	
<i>Community, non-profit, and faith-based organizations can implement programs that assist juveniles and adults who are re-entering their communities following incarceration that support their returning to school, securing employment, and leading healthy lifestyles.</i>	Injury and Violence-Free Living (p. 43)	

Workplace Wellness		
Action	Section of Natl. Prev. Strategy	Relevant ACA Provision(s)
<i>Businesses and employers can provide incentives for employees and their families to access clinical preventive services, consistent with existing law.</i>	Clinical and Community Preventive Services (p. 21)	
<i>Businesses and employers can provide employees with on-site clinical preventive services and comprehensive wellness programs, consistent with existing law.</i>	Clinical and Community Preventive Services (p. 21)	
<i>Businesses and employers can provide easy-to-use employee information about clinical preventive services covered under the Affordable Care Act.</i>	Clinical and Community Preventive Services (p. 21)	
<i>Businesses and employers can provide evidence-based incentives to increase tobacco cessation, consistent with existing law.</i>	Tobacco Free Living (p.29)	
<i>Businesses and employers can implement policies that facilitate the provision of SBIRT or offer alcohol and substance abuse counseling through employee assistance programs.</i>	Preventing Drug Abuse and Excessive Alcohol Use (p.33)	
<i>Businesses and employers can include substance use disorder benefits in health coverage and encourage employees to use</i>	Preventing Drug Abuse and Excessive Alcohol Use (p.33)	

these services as needed.		
<i>Businesses and employers can</i> implement comprehensive workplace injury prevention programs that include management commitment, employee participation, hazard identification and remediation, worker training, and evaluation.	Injury and Violence-Free Living (p. 43)	
<i>Businesses and employers can</i> ensure that mental health services are included as a benefit on health plans and encourage employees to use these services as needed.	Mental and Emotional Well-Being (p.50)	
<i>Businesses and employers can</i> provide education, outreach, and training to address mental health parity in employment-based health insurance coverage and group health plans.	Mental and Emotional Well-Being (p.50)	

Health Information Technology		
Action	Section of Natl. Prev. Strategy	Relevant ACA Provision(s)
<i>The federal government will</i> support state, tribal, local, and territorial partners to enhance epidemiology and laboratory capacity, health information technology and performance improvement.	Healthy and Safe Community Environments (p. 16)	
<i>State, tribal, local and territorial governments can</i> promote the use of interoperable systems to support data-driven prevention decisions and implement evidence-based prevention policies and programs, such as those listed in the Guide to Community Preventive Services.	Healthy and Safe Community Environments (p. 16)	
<i>Health care systems, insurers and clinicians can</i> increase the use of certified electronic health records to identify populations at risk and develop policies and programs.	Healthy and Safe Community Environments (p. 17)	
<i>The federal government will</i> improve monitoring capacity for quality and performance of recommended clinical preventive	Clinical and Community Preventive Services (p. 20)	

services.		
<i>The federal government will encourage adoption of certified electronic health record technology that meets Meaningful Use criteria, particularly those that use clinical decision supports and registry functionality, send reminders to patients for preventive and follow-up care, provide patients with timely access to their health information (e.g., lab results, discharge instructions), identify resources available to patients, and incorporate privacy and security functions (e.g., encrypting health information to keep it secure, generating audit logs to record actions).</i>	Clinical and Community Preventive Services (p. 20)	
<i>State, tribal, local and territorial governments can create interoperable systems to exchange clinical, public health and community data, streamline eligibility requirements, and expedite enrollment processes to facilitate access to clinical preventive services and other social services.</i>	Clinical and Community Preventive Services (p. 20)	
<i>Health care systems, insurers and clinicians can adopt and use certified electronic health records and personal health records.</i>	Clinical and Community Preventive Services (p. 21)	
<i>The federal government will increase the availability of de-identified national health data to better address the needs of underrepresented population groups.</i>	Elimination of Health Disparities (p. 26)	
<i>State, tribal, local and territorial governments can improve privacy-protected health data collection for underserved populations to help improve programs and policies for these populations.</i>	Elimination of Health Disparities (p. 27)	
<i>The federal government will encourage clinicians and health care facilities to record smoking status (for patients age 13 or older) and to report on the core clinical quality measure for smoking cessation counseling, in accordance with the Medicare and Medicaid Electronic Health Records Incentive</i>	Tobacco-Free Living (p.29)	

Program.		
<i>State, tribal, local and territorial governments can enhance data collection systems to better identify and address mental and emotional health needs.</i>	Mental and Emotional Well-Being (p.49)	

Community Health Assessments		
Action	Section of Natl. Prev. Strategy	Relevant ACA Provision(s)
<i>State, tribal, local and territorial governments can conduct comprehensive community health needs assessments and develop state and community health improvement plans.</i>	Healthy and Safe Community Environments (p. 16)	
<i>Health care systems, insurers, and clinicians can partner with state, tribal, local, and territorial governments, business leaders, and community-based organizations to conduct comprehensive community health needs assessments and develop community health improvement plans.</i>	Healthy and Safe Community Environments (p. 17)	
<i>State, tribal, local and territorial governments can use data to identify populations at greatest risk and work with communities to implement policies and programs that address highest priority needs.</i>	Elimination of Health Disparities (p. 27)	
<i>Community, non-profit, and faith-based organizations can bring together professionals from a range of sectors (e.g., transportation, health, environment, labor, education, and housing) with community representatives to ensure that community health needs are identified and that needs and barriers are addressed.</i>	Elimination of Health Disparities (p. 27)	

Health Care Workforce		
Action	Section of Natl. Prev. Strategy	Relevant ACA Provision(s)
<i>Health care systems, insurers and clinicians can support integration of prevention and public health skills into</i>	Healthy and Safe Community Environments (p. 17)	

health care professional training and cross train health care practitioners to implement prevention strategies.		
<i>State, tribal, local and territorial governments can expand the use of community health workers and home visiting programs.</i>	Clinical and Community Preventive Services (p. 20)	
<i>Community, non-profit, and faith-based organizations can Support community health workers, patient navigators, patient support groups, and health coaches.</i>	Clinical and Community Preventive Services (p. 21)	
<i>The federal government will support health center delivery sites in medically underserved areas and place primary care providers in communities with shortages.</i>	Elimination of Health Disparities (p. 27)	

Other ACA Program/Policy Changes		
Action	Section of Natl. Prev. Strategy	Relevant ACA Provision(s)
<i>The federal government will implement the menu labeling provisions of the Affordable Care Act to help provide consistent facts about food choices in chain restaurants.</i>	Healthy Eating (p. 35)	
<i>The federal government will support breastfeeding, including implementing the breastfeeding provisions in the Affordable Care Act.</i>	Healthy Eating (p. 35)	
<i>Businesses and employers can adopt lactation policies that provide space and break time for breastfeeding employees (in accordance with the Affordable Care Act) and offer lactation management services and support (e.g., breastfeeding peer support programs).</i>	Healthy Eating (p. 36)	
<i>The federal government will support states, tribes, and communities to implement evidence-based sexual health education.</i>	Reproductive and Sexual Health (p. 45)	
<i>Schools, colleges, and universities can support medically</i>	Reproductive and Sexual	

accurate, developmentally appropriate, and evidence-based sexual health education.	Health (p.46)	
<i>Community, non-profit, and faith-based organizations can promote teen pregnancy prevention and positive youth development, support the development of strong communication skills among parents, and provide supervised after-school activities.</i>	Reproductive and Sexual Health (p.46)	
<i>Health care systems, insurers, and clinicians can educate parents on normal child development and conduct early childhood interventions to enhance mental and emotional well-being and provide support (e.g., home visits for pregnant women and new parents).</i>	Mental and Emotional Well-Being (p.50)	
<i>Early learning centers, schools, colleges and universities can ensure students have access to comprehensive health services, including mental health and counseling services.</i>	Mental and Emotional Well-Being (p.50)	