


OFFICE OF THE
ASSISTANT SECRETARY FOR HEALTH

LEADING AMERICA TO HEALTHIER LIVES

PUSHING THE ENVELOPE OF PUBLIC HEALTH

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ASSISTANT SECRETARY FOR HEALTH AND SENIOR ADVISOR



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OASH: THE ROADMAP FOR A HEALTHIER NATION

<p>HEALTH TRANSFORMATION</p> <p>Catalyze a health promoting culture</p>	<p>HEALTH INNOVATION</p> <p>Foster novel approaches and solutions</p>
<p>HEALTH RESPONSE</p> <p>Respond to emerging health challenges</p>	<p>HEALTH OPPORTUNITY</p> <p>Advance health opportunities for all</p>
<p>LEADING AMERICA TO HEALTHIER LIVES</p>	




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- ▶ **Provide Trusted Data and Information**
to serve HHS, the federal government, states and localities, and the general public
- ▶ **Convene Partners**
federal agencies, state and local, professional societies, NGOs, academia, civil society, commercial partners, patient advocates
- ▶ **Develop Novel Initiatives**
identify gaps, build teams, set a common agenda, support infrastructure, transition to Operational Divisions
- ▶ **Organize and Lead National Initiatives**



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OASH: ORGANIZING AND LEADING

HHS INITIATIVES

- ▶ Combatting Opioids and SUD
- ▶ Healthy People 2030
- ▶ Physical Activity Guidelines for America
- ▶ U.S. Dietary Guidelines (with USDA)
- ▶ National Vaccine Plan
- ▶ National HIV / AIDS Plan
- ▶ National Viral Hepatitis Plan
- ▶ National Action Plan for STIs
- ▶ Pain Management Best Practices and HHS Guide to Opioid Tapering
- ▶ Enhancing HPV Vaccination
- ▶ Revised "Common Rule"
- ▶ U.S. Strategy for Sickle Cell Disease

PRESIDENTIAL INITIATIVES

- ▶ Ending the HIV Epidemic in America
- ▶ National Youth Sports Strategy

NEW INITIATIVES

- ▶ Improving Maternal Health
- ▶ National Strategy for Tick-Borne Diseases

SURGEON GENERAL

- ▶ Report on Smoking Cessation
- ▶ Community Health and Prosperity
- ▶ Oral Health
- ▶ Advisories: Naloxone, THC, E-Cigs



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WHY NOW?: RIGHT DATA, RIGHT TOOLS, RIGHT LEADERSHIP

■ Epidemiology

- Most new HIV infections are clustered in a limited number of counties and specific demographics

■ Antiretroviral Therapy

- Highly effective, saves lives, prevents sexual transmission; increasingly simple and safe

■ Pre-exposure Prophylaxis (PrEP)

- FDA-approved and highly effective drug to prevent HIV infections

■ Proven Models of Care and Prevention

- 25 years' experience engaging and retaining patients in effective care

There is a real risk of HIV exploding again in the U.S.

due to several factors including injection drug use and diagnostic complacency among healthcare providers



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EARLY DIAGNOSIS IS ESSENTIAL TO END THE HIV EPIDEMIC

- **1 in 2** people with HIV have the virus at least 3 years before diagnosis
- **1 in 4** people with HIV have the virus at least 7 years before diagnosis
- **1 in 5** people with HIV are diagnosed with advanced disease (AIDS)
- **7 in 10** people with HIV saw a healthcare provider in the 12 months prior to diagnosis and failed to be diagnosed

80% of new HIV infections are transmitted from people who don't know they have HIV or are not retained in treatment

Daily et al., *MMWR Weekly Report*, 2017; Skarbinski et al., *JAMA*, 2015; Gopalappa et al., *Med Decision Making*, 2017



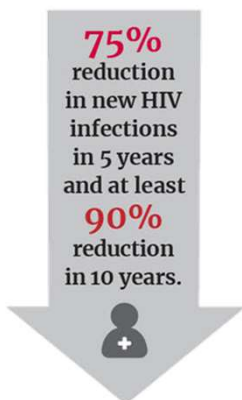
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ENDING THE HIV EPIDEMIC: A PLAN FOR AMERICA

GOAL



ACHIEVING THE GOALS



DIAGNOSE

All people with HIV as early as possible after infection



TREAT

People with HIV rapidly and effectively to reach sustained viral suppression



PREVENT

New HIV transmissions by using proven interventions, including pre-exposure prophylaxis (PrEP) and syringe services programs (SSPs)



RESPOND

Quickly to potential HIV outbreaks to get needed prevention and treatment services to people who need them



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NO COST PrEP FOR UNINSURED

May 2019

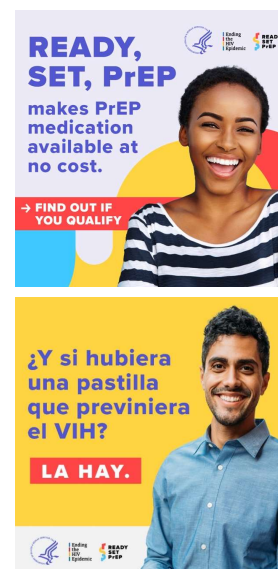
- ▶ Agreement between the Trump administration and Gilead Sciences, Inc., for the company to donate PrEP medications for up to 200,000 uninsured individuals each year for up to 11 years.

December 2019

- ▶ Program officially launched and opened for enrollment. USG bears all ancillary costs.

March 2020

- ▶ CVS, RITE AID, Walgreens, and Health Mart will distribute PrEP at no-cost to qualified patients in over 22,000 U.S. pharmacy locations and through mail order, and provide no cost patient counseling and adherence support.



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PRESIDENT'S BUDGET WILL SUPPORT THE HIV INITIATIVE

(NEW DISCRETIONARY INVESTMENTS FY 2021)

ACTIVITY		FY 2020 Enacted	FY 2021 POTUS Budget
CDC	▶ Transition activities from planning to implementation		
	▶ Scale up jurisdictional programs to provide additional testing, linkage to treatment, and prevention services, including PrEP	\$140 M	\$371 M
	▶ Augmentation of public health staff in local jurisdictions		
HRSA	▶ Community Health Centers - increase access to HIV prevention services, including PrEP, outreach, and care coordination	70 M	\$137 M
	▶ Ryan White HIV/AIDS Program - treat the infection rapidly and effectively after diagnosis, suppress the virus, and prevent transmission	\$50 M	\$165 M
IHS	▶ Enhanced support for prevention, diagnosis, and links to treatment	\$0*	\$27 M
NIH	▶ Centers for AIDS Research (CFARs) - evaluate prevention and treatment across the 57 target jurisdictions and share best practices on HIV prevention and treatment interventions	\$6 M \$25 M*	\$16 M
		\$ 291 M	\$ 716 M

* \$25 M POTUS request for IHS was not funded, but NIH received a \$25 M boost in HIV/AIDS research funds.

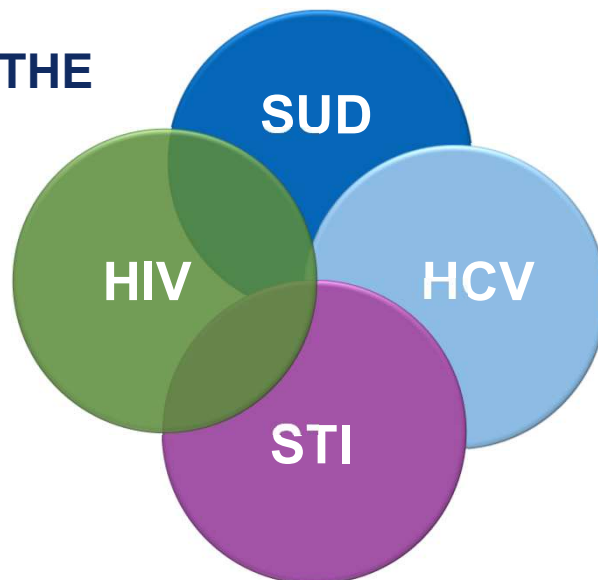


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ENGAGING THE SYNDEMIC

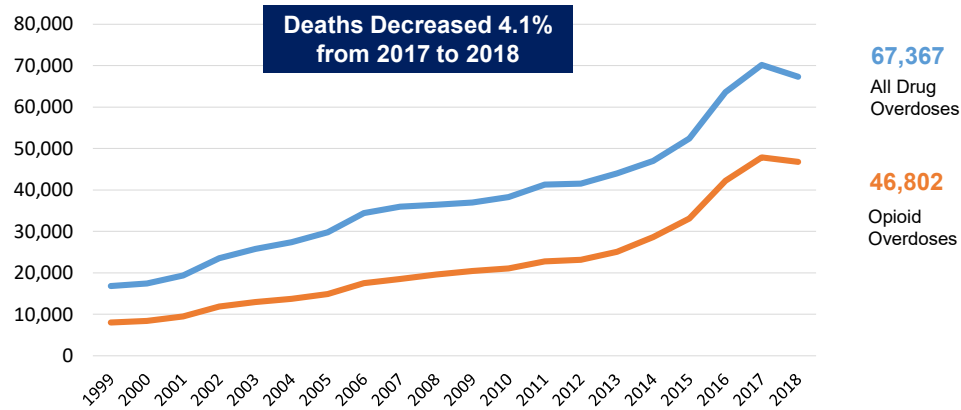


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U.S. DRUG OVERDOSE DEATHS: 1999-2018



Source: NCHS, National Vital Statistics System, Mortality, Published January 2020



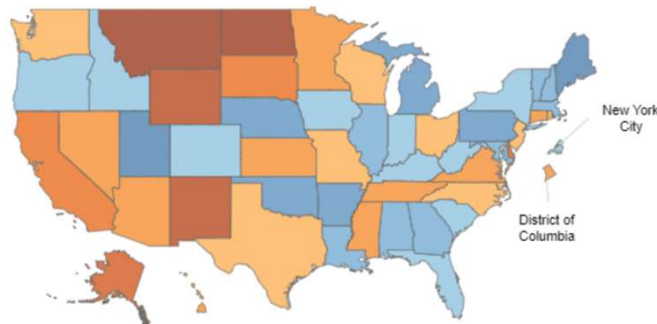
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CHANGE IN 12 MONTH OVERDOSE DEATHS ENDING JULY 2019 NCHS, REPORTED FEBRUARY 2020

- **California**, up 13.4%
- **New Mexico**, up 20.7%
- **Delaware**, up 18.7%
- **Tennessee**, up 9.0%
- **Arizona**, up 9.8%



- **New Hampshire**, down 9.8%
- **Michigan**, down 13.3%
- **Illinois**, down 8.1%
- **Pennsylvania**, down 10.4%
- **Oklahoma**, down 13.3%



Source: CDC National Vital Statistics System, retrieved February 12, 2020



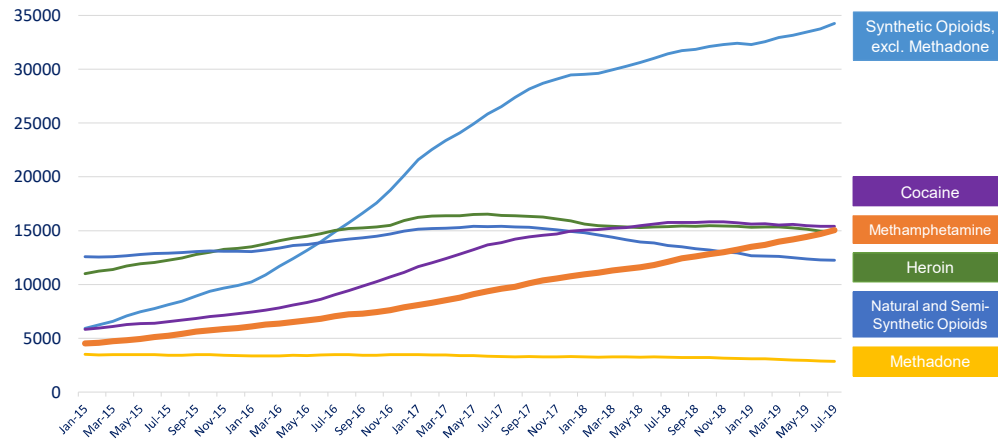
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THE 4th WAVE OF AMERICA'S OVERDOSE EPIDEMIC

12 MONTH OVERDOSE DEATHS ENDING JULY 2019, REPORTED FEBRUARY 2020



Source: CDC National Vital Statistics System, retrieved February 12, 2020



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September 4, 2019



**HHS Announces
\$1.8 billion in
grants to states
and communities to
combat substance
use disorders**

**\$9B total grants since
2016 from HHS**



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2020 PRIORITIES

- ▶ Directly address the resurgence of methamphetamines
- ▶ Support regions with rising mortality
- ▶ Obtain actionable, real-time data to effect public health interventions
- ▶ Improve, demonstrate, and expand integration of federal, state, local, non-governmental efforts at the community level (HEALing Communities)
- ▶ Specific policy initiatives:
 - Expand comprehensive syringe services programs
 - Enhance emergency room MAT treatment and warm hand-offs following overdose
 - Improve MAT during transitions into, and out of, the criminal justice system
 - Expand comprehensive treatment and recovery services, especially for women, children, and families



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DEVELOPING A SUSTAINABLE MODEL

Transition from a “crisis framework” into an integrated, sustainable, predictable, and resilient public health system for preventing and treating substance use and other behavioral health disorders.

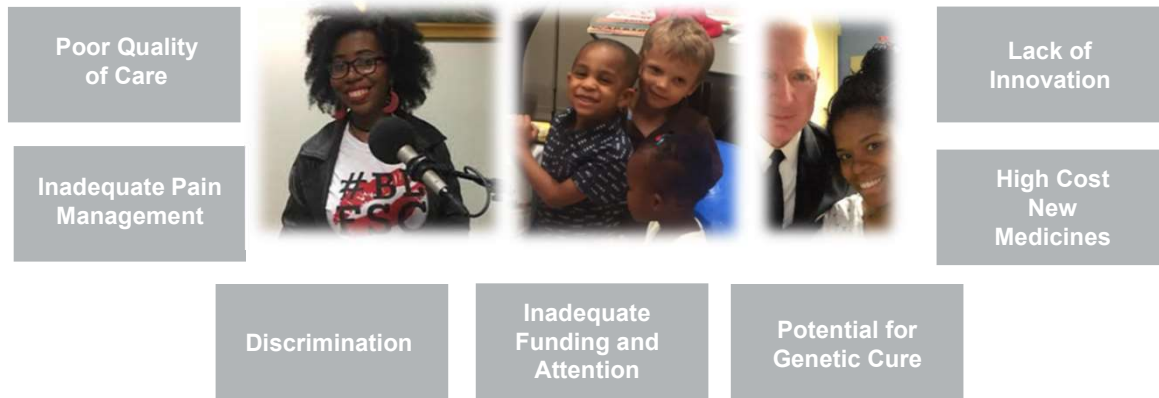


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PEOPLE LIVING WITH SICKLE CELL DISEASE



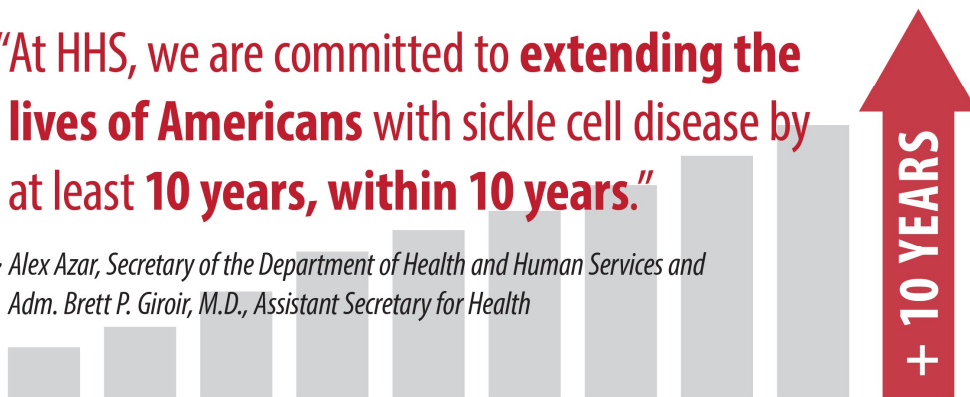
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"At HHS, we are committed to extending the lives of Americans with sickle cell disease by at least 10 years, within 10 years."

*~ Alex Azar, Secretary of the Department of Health and Human Services and
Adm. Brett P. Giroir, M.D., Assistant Secretary for Health*



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THE WHITE HOUSE
WASHINGTON

"We will always stand strong with those battling this condition and remain committed to improving the quality of life of those living with SCD."

2018

STATEMENTS & RELEASES

Presidential Message on National Sickle Cell Disease Awareness Month

HEALTHCARE | Issued on: August 31, 2018

First Presidential Message on SCD Since 1983

2019

STATEMENTS & RELEASES

Presidential Message on National Sickle Cell Disease Awareness Month

HEALTHCARE | Issued on: September 1, 2019




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The National Academies of
SCIENCES • ENGINEERING • MEDICINE

**Committee on Addressing Sickle Cell Disease:
A Strategic Plan and Blueprint for Action**

The National Academies will provide recommendations related to the barriers that exist in healthcare for SCD patients, limitations or possible opportunities to develop SCD specific registries and/or surveillance systems, new research innovations, and the importance of patient advocacy and community engagement groups.

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GLOBAL BURDEN OF SCD

>100 million people

have Sickle Cell Trait worldwide

1-3 million people

have Sickle Cell Trait in the United States

300,000 babies

are born with SCD each year in Africa

- **75%** of all global births with SCD
- Mortality up to **80%** before age 5
- **5%-16%** of under 5 mortality in Africa
- 30% increase in number by 2050

WHO HAS RECOGNIZED SCD AS A GLOBAL PUBLIC HEALTH CONCERN SINCE 2005



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HISTORIC OPPORTUNITY TO SAVE LIVES

“...large-scale universal screening [combined with basic public health interventions: penicillin prophylaxis and vaccination] **could save the lives of up to 9,806,000** newborns with SCA globally [by 2050], 85% of whom will be born in sub-Saharan Africa.”



Republic of the Congo

Piel FB, et.al. (2013) Global Burden of Sickle Cell Anaemia in Children under Five, 2010–2050: Modelling Based on Demographics, Excess Mortality, and Interventions. PLOS Medicine 10(7): e1001484. <https://doi.org/10.1371/journal.pmed.1001484>



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First Convening of the Global Coalition for Sickle Cell Disease



Purpose: Develop and implement national programs in Sub Saharan Africa to reduce childhood mortality in SCD from 80% to <5%

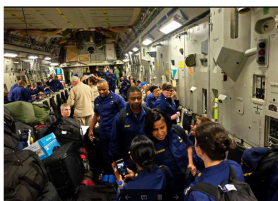


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U.S. PUBLIC HEALTH SERVICE COMMISSIONED CORPS



“the Commissioned Corps...
a mobile, duty-bound group of
health officers willing to go
anywhere, at any time, to meet
the nation's most urgent public
health needs.”

Craig Collins

*The PHS Commissioned Corps
Two Centuries and Counting*



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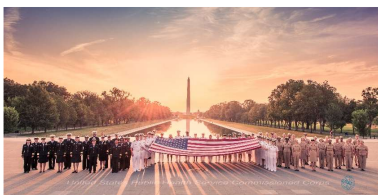
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USPHS COMMISSIONED CORPS ABREVIATED HISTORY



- 1798** Act for the Relief of Sick and Disabled Seamen
- 1871** First Supervising Surgeon (later Surgeon General)
Dr. John Maynard Woodworth
- 1889** Legislation created the Commissioned Corps
- 1912** Public Health Service (with broadened powers)



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>6100 OFFICERS IN 11 HEALTH PROFESSIONAL CATEGORIES



- Medical
- Dental
- Nursing
- Pharmacy
- Veterinarian
- Environmental Health
- Engineer
- Therapist
- Scientist
- Dietitian
- Health Services

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VISION FOR A 21st CENTURY COMMISSIONED CORPS

ALWAYS READY

A highly-trained, always-ready, fully-deployable national asset to preserve public health and national security during national or global public health emergencies

MEET CRITICAL AGENCY NEEDS

A provider of direct healthcare, public health leadership, and scientific expertise when specifically needed to fulfill U.S. Government requirements

CHANGE THE MAP

A fundamental instrument of national response for non-emergent, yet critical, public health challenges within the United States and territories

INNOVATION ENGINE

An innovation engine for public health technologies, communications, systems, and systems of systems



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Ebola Monrovia



2017 Hurricanes



U.S. Southern Border



COVID - 19



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Travis AFB

Travis AFB

Omaha, NE

Secretary's Operation Center

Commissioned Corps Officers are at the forefront of the COVID-19 response serving in multiple roles: leadership, operations, screening, quarantine, case management, and human services

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Travis AFB



"In Officio Salutis"

In the Service of Health

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