

**DECEMBER  
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JANUARY  
2021**

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## SIR ISAAC AND THE WHOLE BIRD

Sir Isaac Newton in 1686 presented his three laws of motion in the *Principia Mathematica Philosophiae Naturalis*. His first law states that “Every object persists in its state of rest or uniform motion in a straight line unless it is compelled to change that state by forces impressed on it.” A cursory review of the print and broadcast media in the U.S. indicates that a considerable amount of polarization exists in how the performance of U.S. presidential administrations is evaluated. As **Trump** bureaucrats exit stage right on January 20, certain media pundits can be expected to continue to extol perceived legislative and regulatory accomplishments by his executive team, which also happened to be roundly derided by opponents. Meanwhile, with the entrance of the **Biden** Administration stage left, it is likely that his supporters in the media will provide high encomia for whatever policies unfold while detractors on the other side of the ideological divide will continue steadfastly to circulate views that are somewhat less than totally enthusiastic.

This form of polarization often is characterized by the political terms *right wing* and *left wing*. Given the many challenges facing this nation, however, perhaps it is not unreasonable to hope for the emergence of bipartisan solutions that reflect the *whole bird* instead of its dual avian appendages. For example, the spheres of physical and mental health at both individual and community levels represent areas that are ripe for seeking meaningful bipartisan consideration. To illustrate, a manuscript published in the issue of the journal *Neuropsychopharmacology* in January 2021 describes the “Adolescent Brain Cognitive Development (ABCD)” study, an investigation currently underway to obtain a better understanding of the development of healthy and disrupted brain and behavioral development.

This research is the largest in the U.S. to date assessing brain development, examining youth from age 9 to 10 for approximately 10 years into young adulthood. Its dataset has a wealth of measured attributes of youths and their environment, including neuroimaging, cognitive, biospecimen, behavioral, youth self-report and parent self-report metrics, and environmental measures. Initial driving questions of the ABCD Study included examination of risk and resiliency factors associated with the development of substance use. The effort since then has expanded beyond this early set of questions by greatly informing an understanding of the contributions of biospecimen-derived (e.g., pubertal hormones, genomic, and epigenetic factors), neural, and environmental factors to the etiology of mental and physical outcomes from middle childhood through early adulthood.

The arrival of the coronavirus in 2020 and subsequent mutations of this disease that have evolved offer compelling evidence once again beyond a shadow of any doubt that while driving through life, humans cannot always count on being in full control at the wheel. National and international attention on the importance of health issues are galvanizing factors that emphasize the importance of focusing on crafting bipartisan solutions for pressing mental and physical health problems. A new Administration in the nation's capital has a superb opportunity to show that it will rise to the occasion of meeting many key challenges that must be addressed.



## 117th CONGRESS IS UNDERWAY

The early days of the opening of the first session of the 117th Congress began in an unprecedented manner. As legislators in both chambers gathered to certify electoral votes cast in the 2020 election, a mob assaulted the U.S. Capitol on January 6, inflicting a major disruption of the proceedings. Once order was restored, officials were able to continue later that same evening to take action they had begun to perform earlier that day. Just as dramatically, almost immediately thereafter, voices emphatically called for removing **President Trump** from office at once for what was perceived as his role in inciting the building's marauders. Steps rapidly were initiated that resulted in an effort to impeach him for the second time in only 13 months.

Prior to the start of the new session of Congress, its immediate predecessor 116th version was characterized by an agreement reached in late December 2020 to provide funding to prevent a federal government shutdown. **President Trump** signed into law the *Consolidation Appropriations Act, 2021* (P.L. 116-260) on the 27th of that month to appropriate more than \$1.4 trillion for fiscal year 2021, along with the inclusion of \$900 billion for pandemic relief that involves funding for vaccine distribution and COVID-19 testing. This legislation cleared the U.S. House of Representatives and Senate on a bipartisan basis one week beforehand. A 2,124-page bill, it covers an extensive range of programs, including many that pertain to the health sphere. Some examples of what the agreement provides are as follows:

\$42,934,000,000 for the *National Institutes of Health*, including \$404,000,000 from the *21st Century Cures Act* (Public Law 114-255), an increase of \$1,250,000,000, or 3%, above fiscal year 2020. The agreement provides a funding increase of no less than 1.5% above fiscal year 2020 to every Institute and Center (IC).

\$7,874,804,000 in total program level funding for the *Centers for Disease Control and Prevention*, which includes \$6,963,296,000 in budget authority and \$856,150,000 in transfers from the Prevention and Public Health (PPH) Fund.

\$338,000,000 for the *Agency for Healthcare Research and Quality*.

\$2,000,000 increase for a total of \$43.3 million for *Area Health Education Centers* for new competitive grants to expand experiential learning opportunities through simulation labs designed to educate and train healthcare professionals serving rural, medically underserved communities, that shall include as an allowable use the purchase of simulation training equipment.

As the result of an election in Georgia on January 5, two Democrats won contests for the U.S. Senate, which means that beginning on Inauguration Day, Vice President **Kamala Harris** will be able to exert a tie breaking vote in that chamber, which means that Democrats will be in control of both Congress and the White House. It can be expected that they will use this opportunity to fulfill their legislative objectives.

### 2021-2022 ASSOCIATION CALENDAR OF EVENTS

**May 13-14, 2021**—Leadership Development Program in Columbus, OH

**October 20-22, 2021**—ASAHP Annual Conference in Long Beach, CA

**October 19-21, 2022**—ASAHP Annual Conference in Long Beach, CA

## HEALTH REFORM DEVELOPMENTS

During the **Obama** and **Trump Administrations**, the *Patient Protection and Affordable Care Act of 2010* has been a centerpiece of health policy initiatives. The U.S. Supreme Court played a decisive role in 2012 by ruling that the law would remain in effect despite an attempt by Republicans to eliminate it over a provision involving an individual mandate that originally was intended as a penalty to be imposed on individuals who decided not to seek insurance coverage. The high court ruled that if the mandate was considered a tax instead of a penalty, then the law would remain intact. When Congress eliminated the tax in 2017 in overall legislation signed into law by **President Trump**, Republican Attorneys General around the nation argued in federal court that ending the tax provided a rationale for scuttling the entire Affordable Care Act (ACA), which no longer can be considered constitutional. The Supreme Court accepted the case and a ruling is expected to be issued later this year.

Meanwhile, total national healthcare spending in 2019 grew 4.6%, which was similar to the 4.7% growth in 2018 and the average annual growth since 2016 of 4.5%, according to a new analysis conducted by the Office of the Actuary at the Centers for Medicare & Medicaid Services (CMS). The share of the economy devoted to health spending was relatively stable in 2019, at 17.7% compared with a 17.6% share in 2018. The 4.6% growth in health care expenditures was faster than the 4.0% overall economic growth as measured by Gross Domestic Product (GDP) in 2019. The growth in total national healthcare expenditures in 2019 reached \$3.8 trillion, or \$11,582 per person, up from 2018 when total national health expenditures were \$3.6 trillion, or \$11,129 per person. Spending for personal health care, which includes health care goods and services, accounted for 84% of total health care spending in 2019 and increased 5.2%, a faster rate than the 4.1% it increased in 2018. The faster growth in personal health care spending was driven largely by growth for hospital care, retail prescription drugs, and physician, and clinical services. The report includes health expenditure data through 2019, but not any of the effects of the coronavirus disease 2019 (COVID-19) pandemic on health care spending.

### Undoing Trump Administration Health Policies

A common practice whenever a new administration led by one political party replaces an administration of the other political party in the nation's capital is to undo policies implemented by the predecessor group. For example, one **Trump administration** regulatory initiative created *Association Health Plans* that do not have to comply with either ACA individual or small-group requirements. In June 2018, the Labor Department finalized a rule to expand the ability of employers, including sole proprietors without common law employees, to join together and offer health coverage through such plans. These short-term limited duration vehicles can be in effect for one year and also be subject to renewal for as many as 36 months while continuing to be exempt from the Affordable Care Act's consumer protections. Other high profile policies that democrats found to be objectionable involved the joint federal-state Medicaid program. Examples are demonstration projects that allow work requirements and block granting of federal Medicaid funds.

### Mechanisms Likely To Be Used By The Biden Administration To Reverse Trump Policies

A 50-50 split between democrats and republicans in the Senate means that tie votes can be broken by Vice President **Kamala Harris**. With democrats in control of the House and a fellow party member occupying the White House, legislative objectives can be achievable through the enactment of laws. A related approach would be to use budget reconciliation procedures to pass some tax and spending measures in areas, such as ACA enhancement, pandemic relief, and climate change. The process begins with a budget resolution. Next, reconciliation legislation is then considered using a fast-track process that can be passed by a simple majority without having to be filibustered in the Senate. Limitations exist since budget reconciliation cannot be used for any and all federal legislation. Instead, bills must contain provisions that affect revenue and spending, with no extraneous items allowed, according to a restriction known as the "Byrd Rule." Named after its principal sponsor, Senator **Robert C. Byrd**, D-WV), the rule provides six definitions of what constitutes extraneous matter. The Byrd rule has been in effect during Senate consideration of 21 reconciliation measures from late 1985 through the present.

## DEVELOPMENTS IN HIGHER EDUCATION

Some welcome news arrived for higher education in the form of an added \$23 billion in relief aid stemming from the \$900 billion coronavirus-relief package that was passed by Congress in December 2020. This amount is in addition to the \$14 billion in direct aid to public and private higher education institutions that was furnished through the *Coronavirus Aid, Relief, and Economic Security (CARES) Act* last March. The assistance is aimed at offsetting new costs that colleges and universities have assumed that are associated with the implementation of online learning and coronavirus prevention measures. Many institutions also have been devastated financially by steep declines in auxiliary revenue derived from tuition as a result of declines in enrollment and also from related sources involving campus housing, dining operations, and campus facility rentals to outside groups.

As the year 2021 opened in January, there are no signs that the pandemic is declining. New mutations are proving to be more transmissible and the number of fatalities and hospitalizations from the disease have attained record levels in many states across the nation in recent weeks. The availability of vaccines is a hopeful sign, but the number of individuals who have been fortunate enough to receive them is paltry in comparison to the size of the overall U.S. population. When the day arrives that student enrollment reaches pre-pandemic levels, it appears reasonable to suppose that students could face higher out-of-pocket costs as institutions raise tuition to fill any revenue gaps. That possibility means that the federal government will be called upon to provide financial assistance to enable students from disadvantaged backgrounds to benefit from participation in higher education offerings.

### **Federal Aid To Higher Education In 2021**

Page two of this issue of the newsletter lists funding made available under the *Consolidation Appropriations Act, 2021 (P.L. 116-260)* for a variety of activities. Some items not listed on that page, which have a bearing on higher education are as follows:

\$754 million for the Health Resources and Services Administration (HRSA) *Title VII Health Professions And Title VIII Nursing Workforce Development Programs*.

\$15 million for the HRSA *Health Careers Opportunity Program (HCOP)*, a federally funded grant that provides students from economically or educationally disadvantaged backgrounds an opportunity to develop the skills needed to compete successfully for, enter, and graduate from health professions schools.

\$51.5 million for the HRSA *Scholarships for Disadvantaged Students Program*, which provides scholarships to full-time, financially needy students from disadvantaged backgrounds, who are enrolled in health professions and nursing programs.

An additional \$35 billion for the *Higher Education Relief Fund* directed towards public institutions and public and private Historically Black Colleges and Universities (HBCUs).

A change in how eligibility for *Pell Grants* is determined means an additional 555,000 students will qualify for Pell Grants each year and 1.7 more million students will qualify to receive the maximum Pell award annually. The subsidy on interest for some federal student loans is being expanded. Approximately \$1.3 billion in capital loans owed to the federal government by HBCUs is being forgiven..

Another important provision will make it easier for students to fill out the *Free Application for Federal Student Aid (FAFSA)* form. After several years of work in Congress to achieve this result, simplification will benefit an estimated 20 million families who fill out these complicated forms every year. Reducing FAFSA from 108 questions to 36 will remove a major barrier to helping more low-income students pursue higher education.

## QUICK STAT (SHORT, TIMELY, AND TOPICAL)

### **COVID-19 Trends Among Individuals Aged 0–24 Years, United States**

According to the January 13, 2021 issue of the CDC's *Morbidity and Mortality Weekly Report*, studies consistently have shown that children, adolescents, and young adults are susceptible to SARS-CoV-2 infections. Children and adolescents have had lower incidence and fewer severe COVID-19 outcomes than adults, but cases among these groups have increased since summer 2020, with weekly incidence higher in each successively increasing age group. Trends among children and adolescents aged 0–17 years paralleled those among adults. Risk for disease introduction and transmission among children in child care centers and elementary schools might be lower than for high schools and institutions of higher education. To enable safer in-person learning, schools and communities should implement fully and adhere strictly to multiple mitigation strategies, especially universal and proper mask wearing, to reduce both school and community COVID-19 incidence to help protect students, teachers, and staff members from the disease.

### **Alcohol Consumption, Cardiac Biomarkers, And Risk Of Atrial Fibrillation**

Atrial fibrillation (AF) is an arrhythmia with a major impact on public health due to its increasing prevalence in aging populations and its association with adverse outcomes, including stroke and heart failure (HF), with more than a doubling of mortality risk. The effect of alcohol on AF risk has remained ambiguous since there is inconsistent evidence on the relation of alcohol intake with incident AF at lower doses. As reported in the January 13, 2021 issue of the *European Heart Journal*, researchers assessed the association between alcohol consumption, biomarkers, and incident AF across the spectrum of alcohol intake in European cohorts. In contrast to other cardiovascular diseases such as HF, even modest habitual alcohol intake of 1.2 drinks/day was associated with an increased risk of AF, which needs to be considered in AF prevention. Compared to drinking no alcohol at all, just one alcoholic drink a day was linked to a 16% increased risk of AF over a median follow-up time of nearly 14 years.

## HEALTH TECHNOLOGY CORNER

### **Targeting Cartilage EGFR Pathway For Osteoarthritis Treatment**

There currently is no cure for osteoarthritis (OA), but a group of scientists believe they have discovered a method through which a simple knee injection could potentially stop the disease's effects. Researchers previously found that mice with cartilage-specific epidermal growth factor receptor (EGFR) deficiency developed accelerated knee OA. To test whether the EGFR pathway can be targeted as a potential OA therapy, investigators constructed two cartilage-specific EGFR overactivation models and showed that they could target a specific protein pathway in mice, place it in overdrive, and halt cartilage degeneration over time. Building on that finding, they were able to demonstrate that treating mice with surgery-induced knee cartilage degeneration through the same pathway could reduce the cartilage damage and knee pain dramatically via the state of the art of nanomedicine. Findings were published in the journal *Science Translational Medicine* on January 13, 2021.

### **Infection Trains The Host For Microbiota-Enhanced Resistance To Pathogens**

The microbiota shields the host against infections in a process known as colonization resistance. How infections themselves shape this fundamental process remains largely unknown. Scientists from five institutes of the National Institutes of Health show in an article published in the January 15, 2021 issue of the journal *Cell* that gut microbiota from previously infected hosts display enhanced resistance to infection. This long-term functional remodeling is associated with altered bile acid metabolism leading to the expansion of taxa that utilize the sulfonic acid taurine that helps the gut recall prior infections and kill invading bacteria, such as *Klebsiella pneumoniae* (*Kpn*). Taurine is found naturally in bile acids in the gut. The poisonous gas hydrogen sulfide is a byproduct of taurine and low levels of it allow pathogens to colonize the gut, but high levels produce enough byproduct to prevent colonization. Supplying exogenous taurine alone is sufficient to induce this alteration in microbiota function and enhance resistance.

## AVAILABLE RESOURCES ACCESSIBLE ELECTRONICALLY

### When Back To School Meets Stay At Home

Students typically flock to higher education institutions amid a recession, but the COVID-19 pandemic has created a host of new financial and health challenges for those who intended to enroll in a program in the fall. A new analysis, *When Back to School Meets Stay at Home*, from the Georgetown Center on Education and the Workforce shows that 75% of households in which at least one member intended to take postsecondary classes responded to the pandemic by changing their plans. Some completely canceled them, while others changed the number of classes they took, enrolled in a different program or institution, or took classes in a different format. Taking classes in a different format was the most common change in fall postsecondary plans, experienced by 39% of households with postsecondary plans. More than one-third of households (37%) with such plans, however, reported that a household member had canceled a plan entirely. Postsecondary plans were most likely to be canceled in households in which individuals intended to take classes in certificate or associate's degree programs. Lower-income households also were more likely to have individuals who canceled their postsecondary plans in response to the pandemic. The analysis can be obtained at <https://medium.com/georgetown-cew/when-back-to-school-meets-stay-at-home-baba00b82625>.

### Equity-Minded Faculty Workloads: What Can And Should Be Done Now

Recent social movements have revealed the systemic ways that racism and sexism remain entrenched in academic cultures. Faculty workload is taken up, assigned, and rewarded in patterns, and these patterns show important yet overlooked areas where inequity manifests in academe. Faculty from historically minority groups are disproportionately called upon to do diversity work and mentoring, while women faculty do more teaching and service. These activities are vital to the functioning of the university, yet are often invisible and unrewarded, leading to lower productivity and decreased retention. The COVID19 pandemic, which disproportionately has affected the lives and careers of women and faculty from historically minority groups, makes calls for equity-minded workload reform critical. A report from the American Council on Education summarizes findings and insights learned from the *Faculty Workload and Rewards Project (FWRP)*, a National Science Foundation ADVANCE-funded action research project. The FWRP worked with 51 departments and academic units to promote equity in how faculty work is taken up, assigned, and rewarded, drawing from theories of behavioral economics and the principles of equity-mindedness. The report then makes recommendations for how academic units can promote workload equity by identifying the following six conditions linked to equitable workloads: Transparency, Clarity, Credit, Norms, Context, and Accountability. The report can be obtained at <https://www.acenet.edu/Documents/Equity-Minded-Faculty-Workloads.pdf>.

### 2021 Federal Health Insurance Exchange Weekly Enrollment

According to a report from the Centers for Medicare & Medicaid Services (CMS), approximately 8.3 million individuals selected or were re-enrolled automatically in plans using the HealthCare.gov platform during the 2021 Open Enrollment period. That's about the same number as last year, although two fewer states are using the federally facilitated platform for 2021 enrollment. While the number of new consumers declined by 3.6%, the number actively renewing coverage increased by 13.2% and the number automatically re-enrolled increased by 4.4%, increasing total plan selections by 7% of all plan selections during the 2020 Open Enrollment Period.. These snapshots provide point-in-time estimates of weekly plan selections, call center activity, and visits to HealthCare.gov or CuidadoDeSalud.gov. The final snapshot reports new plan selections, active plan renewals, and automatic renewals. It does not report the number of consumers who paid premiums to effectuate their enrollment. The report, which shows plan selections in each of the 36 states using HealthCare.gov under the Affordable Care Act for 2021 open enrollment that began on November 1 and ended December 15 can be obtained at <https://www.cms.gov/newsroom/fact-sheets/2021-federal-health-insurance-exchange-weekly-enrollment-snapshot-final-snapshot>.

## PERSONAL RESPONSIBILITY AMID SOCIAL DETERMINANTS

A debate with a lengthy history involves the degree to which individuals should be held responsible and accountable for misfortunes that occur in their lives versus assigning blame to external forces beyond their personal control. For example, if someone is responsible for personal health, then, all else being equal, that individual should be held accountable for it. Given this line of reasoning, it can be argued that responsibility for health has an important role to play in distributing the benefits and burdens of health care (e.g., charging higher health insurance premiums for those engaged in unhealthy behavior or giving lower priority of care to putatively responsible parties), but some caution is advisable. That health is influenced by social, economic, and environmental factors is a matter of consensus, which leads to a counter argument that in light of social determinants of health, individuals typically are not responsible for their health, rendering inappropriate policies that employ a responsibility-for-health criterion. According to an article published in the January 2021 issue of the journal *Bioethics*, this debate implicates a number of overlapping concepts and questions that often are difficult to separate. Also, maintaining that social determinants undermine responsibility for health may be latching on to the wrong target.

This perspective holds that social determinants of health *are* relevant to such policies, but *not* by globally undermining responsibility. Instead, social determinants are sometimes responsibility-undermining, sometimes responsibility-preserving, and often relevant to whether individuals should be held accountable for their health *regardless* of their responsibility. A more nuanced appraisal is called for regarding ways in which the social determinants of health are relevant to such policies. After arguing that responsibility is possible amid the social determinants of health, some important ways in which these determinants are directly relevant to individuals' accountability for their health are surveyed and hurdles are highlighted that any policy holding individuals accountable for their health on the basis of their responsibility must clear. A proposition is advanced that distinguishing responsibility and accountability, and the ways in which social determinants are relevant to each, helps make clear the ways in which the social determinants of health are and are not relevant to policies that employ a responsibility-for-health criterion. Thus, it can be maintained that individuals have an obligation to preserve and promote their health, and that they are often responsible for their success or failure to do so, without committing to the thought that they are thereby *accountable* for their health.

## GENTRIFICATION IMPACTS ON HEALTH

According to a manuscript published in December 2020 in the *Journal of Urban Health*, gentrification can be defined as “the process in which neighborhoods with low SES experience increased investment and an influx of new residents of higher SES.” Differing perspectives of policy makers, urban planners, sociologists, environmental scientists, economists, residents, and others have led to debates as to whether gentrification is ultimately of net benefit or harm. Although it is associated with increased proximity to material resources, such as green space, recreational facilities and new businesses, income and education may remain a barrier to accessing these resources. Changes often accompanying gentrification (i.e., limited affordable healthy housing, food insecurity from the need to pay high rent on limited income, increased stress, and changes in social networks) may affect certain residents negatively.

Gentrification can bring about improved neighborhood conditions, reduced rates of crime, and property value increases. It also equally can foster negative conditions associated with poorer health outcomes, such as disrupted social networks from residential displacement and increases in stress. While neighborhood environment consistently is implicated in health outcomes research, the authors indicate that gentrification rarely is conceptualized as a public health issue. They posit that as gentrification occurs across the U.S., it is important to understand how this process has an impact on health. Moreover, while aging cities reinvest in the revitalization of communities, empirical research examining relationships between gentrification and health can help inform policy decisions.