



Federal Health Matters

New Access Points Program

In August, HHS Secretary Kathleen Sebelius announced the availability of up to \$250 million in grants that will be awarded by the Health Resources and Services Administration (HRSA) for its New Access Points program. New access points are full-time health service delivery sites that provide comprehensive primary and preventive health care services for medically underserved and vulnerable populations and communities. The goal of these sites is to improve overall health care quality for these populations.

“These funds reflect the administration’s steadfast commitment to improving and expanding access to vital primary health care services,” said Secretary Sebelius. “From our cities to our smallest towns, each health center has an important role to play, ensuring access to services in its community. Together they have a critical impact on the health care status of those most in need across the nation.”

These HRSA-funded health centers will use a variety of authorized settings in order to enable low-income persons to have access to comprehensive, culturally competent, quality primary health care services. Community health centers, migrant health centers, homeless health care centers, school-based health centers, mobile medical vans, and Public Housing Primary Care centers are just some of the types of health center settings that are eligible to receive New Access Points program funding. A facility may receive HRSA funding as long as it is a new and full-time facility and it provides comprehensive primary and preventive care.

“New access points will address the unique and significant barriers

that stand in the way of affordable and accessible primary health care services,” said HRSA Administrator Mary Wakefield, PhD, RN. “Competitive applications will demonstrate a high level of need in the community, present a sound proposal to meet this need, and show that the organization is ready to quickly put their proposal to work.”

Public entities and nonprofit private entities (such as tribal, faith-based, and community-based organizations) that meet health center funding requirements are eligible to compete for the grants. Under the New Access Point program, current operators of health centers (who are proposing an additional facility) as well as new applicants are eligible to receive funding from the HRSA if they do not currently receive section 330 grant funds. The HRSA will define current Health Center Program grantees who apply for New Access Points program funds as “satellite” applicants. Satellite applicants cannot request funding for the expansion of their current health center operation—the funding will only go toward new sites or facilities. All applicants, both new and satellite, may use a single application to request funding for establishing multiple health centers. This application is available at <http://grants.gov>, and the deadline for applying is November 17.

Leap Into Fall

The DoD’s Fall Fitness Challenge—Leap Into Fall—officially began on August 16 and will run until October 31. Sponsored by the DoD’s civilian personnel policy office, the campaign is designed to educate civilian employees about the 4 pillars of well-

ness: fitness, nutrition, prevention, and healthy choices.

Employees are able to compete either as individuals or as part of a team. The goal of the challenge is to register 1.5 million hours of physical activity during the months of August, September, and October 2010. Kathleen Ott, acting deputy undersecretary of defense for the sponsoring office, said “You may think that’s a lot [of hours], but if everyone in the department spends 30 minutes on physical activity 5 times a week, we will easily meet that goal.” She added that the department has about 750,000 civilian employees. All participating individuals and groups are encouraged to log at least 25 hours of physical activity throughout the challenge. Anything that gets participants up and moving qualifies as physical activity, including aerobics, walking, biking, gardening, and golfing.

All employees who are participating in the challenge can keep track of their physical activity by logging into The President’s Challenge Web site (<http://presidentschallenge.org>). Individuals and teams who have met the 25-hour mark will receive certificates of achievement, while the top 3 individuals and the top 3 teams will be recognized on the civilian personnel management office’s Web site.

This campaign serves as an extension of the wellness campaign that the civilian personnel policy office started in January, for which new health information gets posted on its Web site (<http://www.cpms.osd.mil/wellness>) each month. Brochures, posters, and other wellness-related resources can be downloaded from the site and shared with friends and family members to help incorporate healthy practices into their daily routines. Past

topics featured include smoking cessation, nutrition, mental health, and stress. Ott said, "As part of readiness, the department feels strongly that our employees should have at their fingertips the information that helps them live a healthy lifestyle."

Leap Into Fall also supports First Lady Michelle Obama's Let's Move campaign, which was created to help combat childhood obesity by empowering parents and caregivers; providing healthy foods in schools; improving access to healthy, affordable foods; and increasing physical activity. The hope is that by participating in the Leap Into Fall campaign, civilian employees will serve as role models to their children.

New Legislation Approved

In August, the Senate VA Committee approved comprehensive legislation to help veterans find jobs, simplify and improve the post-9/11 GI bill, get accurate and timely compensation for disabled veterans, and make various improvements to VA health care claims and processing. The committee was chaired by Senator Daniel K. Akaka (D-Hawaii), who said the bills "would improve the care and benefits provided to veterans and their family members."

Several bills were passed, including: the Veteran Employment Assistance Act of 2010; the Post-9/11 Veterans Educational Assistance Improvement Act of 2010; the Processing Improvement Act of 2010; the Veterans Telehealth and other Care Improvements Act of 2010; and the Veterans' Compensation Cost-of-Living Adjustment Act of 2010. Additionally, a bill to extend the temporary authority for the performance of medical disability examinations by contract physicians for the VA was approved, as was a bill to improve Group Life Insurance for service

members and veterans and to modify the provision of compensation and pension to surviving spouses of veterans in the months following the death of the veterans.

"We must never forget that the care and benefits veterans have earned is a cost of war, and must be treated as such..." said Akaka. The bills will be reported to the full Senate for consideration.

Researchers Find Link Between Head Trauma and Neurodegenerative Disease

The first pathologic evidence of a link between chronic traumatic encephalomyopathy (CTE), a progressive neurodegenerative disease, and repeated head injuries has been provided by researchers from the VA and the Center for the Study of Traumatic Encephalopathy (CSTE) at Boston University School of Medicine, Massachusetts. CTE can result in large accumulations of tau proteins, and this buildup can destroy cells in regions of the brain responsible for mood, emotions, and executive functioning.

For the study, Dr. Ann McKee and researchers at the CSTE examined the brains and spinal cords of 12 athletes (all of whom were donated by family members to the CSTE Brain Bank at the Edith Norse Rogers Memorial Veterans Hospital, Bedford, Massachusetts). Athletes, especially those who participate in contact sports, such as football, hockey, or boxing, are particularly at risk for sustaining repeated head injuries. After examination, the researchers determined that all 12 athletes showed evidence of CTE.

In addition to CTE, 3 of the athletes had been afflicted by motor neuron disease and had experienced severe and progressive muscle weakness and

deterioration for years prior to their deaths. Two of the athletes had been diagnosed with amyotrophic lateral sclerosis (ALS), better known as Lou Gehrig disease. But these patients' brains and spinal cords showed a unique pattern of tau proteins and deposits of TAR DNA-binding protein (TDP-43). This pattern was different from that found in the most common form of ALS, and suggests that symptoms of CTE are similar to those of ALS when CTE affects the brain and spinal cord.

McKee and her colleagues also are studying whether military troops with traumatic brain injury from exposures on the battlefield, such as blasts, may experience the same type of effects as the 12 athletes. McKee said, "Future work based on these observations offers a significant opportunity to develop treatment to benefit veterans and all Americans well into the future."

The VA has established ALS, which affects about 30,000 people in the United States, as a presumptive compensable illness for all veterans with 90 days or more of continuously active service in the military. Although previous epidemiologic studies have suggested there is a link between repetitive head trauma experienced by athletes and combat veterans and the development of motor neuron diseases such as ALS, this new work is the first to reveal evidence seen in the brain and spinal cord. ●