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FY 2016

American Lung Association
U.S. Senate

Committee on Appropriations
Subcommittee on Labor, Health and Human Services, and Education
Department of Health and Human Services

Centers for Disease Control and Prevention (CDC)

Increase overall CDC funding to \$7.8 billion

Office on Smoking and Health – \$220 million

National Asthma Control Program – \$30.596 million

Climate and Health program – \$18.613 million

Environment and Health Tracking Network – \$35 million

Tuberculosis Programs – \$243 million

CDC influenza planning and response – \$187.558 million

NIOSH – \$522.3 million

Prevention and Public Health Fund – Please Protect the Fund

National Institutes of Health (NIH)

Increase overall NIH funding to at least \$32 billion

National Heart, Lung and Blood Institute – \$3.188 billion

National Cancer Institute – \$5.265 billion

National Institute of Allergy and Infectious Diseases – \$4.635 billion

National Institute of Environmental Health Sciences – \$709.955 million

National Institute of Nursing Research – \$149.917 million

National Institute on Minority Health & Health Disparities – \$286.272 million

Fogarty International Center – \$72.097 million

The American Lung Association is pleased to present our recommendations for Fiscal Year 2016 (FY16) to the Labor, Health and Human Services, and Education Appropriations Subcommittee. The public health and research programs funded by this committee will prevent lung disease and improve and extend the lives of millions of Americans. Founded in 1904 to fight tuberculosis, the American Lung Association is the oldest voluntary health organization in the United States. The American Lung Association is the leading organization working to save lives by improving lung health and preventing lung disease through education, advocacy and research.

A Sustained Investment is Necessary

Mr. Chairman, investments in prevention and wellness pay near- and long-term dividends for the health of the American people. In order to save healthcare costs in the long-term, investments must be made in proven public health interventions including tobacco control, asthma programs and tuberculosis programs. Our nation must also continue its historic investments in biomedical research for better cures, treatments, diagnostics and detections for lung diseases.

Lung Disease

Each year, more than 400,000 Americans die of lung disease. It is America's number three killer, responsible for one in every six deaths. More than 33 million Americans suffer from a chronic lung disease and it costs the economy an estimated \$173 billion each year. Lung diseases include: lung cancer, asthma, chronic obstructive pulmonary disease (COPD), tuberculosis, pneumonia, influenza, sleep disordered breathing, pediatric lung disorders, occupational lung disease and sarcoidosis.

Improving Public Health and Maintaining Our Investment in Medical Research

The American Lung Association strongly supports increasing overall Centers for Disease Control and Prevention (CDC) funding to \$7.8 billion in order for CDC to carry out its prevention mission and to assure an adequate translation of new research into effective state and local programs.

The U.S. must also **maintain its commitment to medical research**. While our focus is on lung disease research, we support increasing the investment in research across the entire NIH with particular emphasis on the National Cancer Institute, the National Heart, Lung and Blood Institute, the National Institute of Allergy and Infectious Diseases, the National Institute of Environmental Health Sciences, the National Institute of Nursing Research, the National Institute on Minority Health & Health Disparities and the Fogarty International Center.

The Prevention and Public Health Fund

The American Lung Association strongly supports the Prevention and Public Health Fund established in the Affordable Care Act and asks the Committee to **oppose any attempts to divert or use the Fund for any purposes other than what it was originally intended**. The Prevention Fund provides funding to critical public health initiatives, like community programs that help people quit smoking, support groups for lung cancer patients, and classes that teach people how to avoid asthma attacks. Money from the Prevention Fund has also been used to pay for the CDC's media campaign "Tips from Former Smokers." The Tips campaign has resulted in hundreds of thousands of Americans quitting smoking and has been demonstrated to have an incredible return on investment. A commonly accepted threshold for cost-effective public health interventions is \$50,000. The 2012 Tips campaign spent \$480 per smoker who quit and \$393 per year of life saved.

Tobacco Use

Tobacco use is the leading preventable cause of death in the United States, killing close to half a million people every year. Over 46 million adults and 3.6 million youth in the U.S. smoke. Annual health care and lost productivity costs total \$289 billion in the U.S. each year.

Given the magnitude of the tobacco-caused disease burden and how much of it can be prevented, the CDC Office on Smoking and Health (OSH) should be much larger and better funded. Public health interventions, including but not limited to the Tips campaign, have been scientifically proven to reduce tobacco use, the leading cause of preventable death in the United States. **The American Lung Association urges that \$220 million be appropriated to OSH for FY16.**

Lung Cancer

More than 402,000 Americans alive today have ever been diagnosed with lung cancer. During 2015, approximately 221,000 new cases of lung cancer will be diagnosed, and over 158,000 Americans will die from lung cancer. Survival

rates for lung cancer tend to be much lower than those of leading cancers. African Americans are more likely to develop and die from lung cancer than persons of any other racial group.

Lung cancer receives far too little attention and focus. Given the magnitude of lung cancer and the enormity of the death toll, the American Lung Association strongly recommends that the NIH and other federal research programs commit additional resources to lung cancer so that there can be better cures, treatments and early detection for lung cancer. Recognizing that personalized therapies may offer the best hope to people with lung cancer, the Lung Association supports the \$215 million precision medicine proposal included in the President's FY16 budget. **We support a funding level of \$5.265 billion for the National Cancer Institute and urge more attention and focus on lung cancer.**

Asthma

Asthma is highly prevalent and expensive. More than 25 million Americans currently have asthma, of whom close to 7 million are children. Asthma prevalence rates are over 45 percent higher among African Americans than whites. Asthma costs our healthcare system over \$50.1 billion annually and indirect costs from lost productivity add another \$5.9 billion, for a total of \$56 billion dollars annually.

The American Lung Association **asks this Committee to appropriate \$30.596 million to the CDC's National Asthma Control Program (NACP) in Fiscal Year 2016.** The NACP tracks asthma prevalence, promotes asthma control and prevention and builds capacity in state programs. This program has been highly effective: the rate of asthma has increased, yet asthma mortality and morbidity rates have decreased. However, at present only 23 states receive funding – leaving a nationwide public health void that can lead to unnecessary asthma-related attacks and healthcare costs.

In addition, we recommend that the National Heart, Lung and Blood Institute receive \$3.188 billion and the National Institute of Allergy and Infectious Diseases receive \$4.635 billion, and that both agencies continue their investments in asthma research in pursuit of treatments and cures.

Chronic Obstructive Pulmonary Disease (COPD)

COPD is the third leading cause of death in the U.S. It has been estimated that 11.5 million patients have been diagnosed with some form of COPD and as many as 24 million adults may suffer from its consequences. In 2012, 139,958 people in the U.S. died of COPD. The annual cost to the nation for COPD in 2010 was projected to be \$49.9 billion. **We strongly support funding the National Heart, Lung and Blood Institute and its lifesaving lung disease research program at \$3.188 billion.** The American Lung Association also asks the Committee to continue its support of the National Heart, Lung and Blood Institute working with the CDC and other appropriate agencies to act on its national action plan to address COPD, which should include public awareness and surveillance activities.

Influenza

Public health experts warn that 209,000 Americans could die and 865,000 would be hospitalized if a moderate flu epidemic hits the U.S. To prepare for a potential pandemic, **the American Lung Association supports funding the federal CDC Influenza efforts at \$187.558 million.**

Tuberculosis (TB)

There are an estimated 10 million to 15 million Americans who carry latent TB infection, and it is estimated that 10 percent of these individuals will develop active TB disease. In 2014, there were 9,412 cases of active TB reported in the U.S. While declining overall TB rates are good news, the emergence and spread of multi-drug resistant TB and totally-drug resistant TB also poses a significant public health threat. **We request that Congress increase funding for tuberculosis programs at CDC to \$243 million for FY 2016.**

Impact of Climate Change on Lung Health

Climate change is one of the greatest threats to public health. CDC's Climate and Health Program is the only HHS program devoted to identifying the risks and develop effective responses to the health impacts of climate change, including worsening air pollution; diseases that emerge in new areas; stronger and longer heat waves; more frequent and

severe droughts, and provides guidance to states in adaptation. Pilot projects in 16 state and two city health departments states use CDC's Building Resilience Against Climate Effects (BRACE) framework to develop and implement health adaptation plans and address gaps in critical public health functions and services. As climate-related challenges intensify, CDC must have increased resources to support states and cities in meeting the challenge. The Lung Association supports the President's Budget Request of **\$18.613 million for the Center for Disease Control and Prevention's Climate and Health Program.**

Additional Priorities

We strongly encourage improved disease surveillance and health tracking to better understand diseases like asthma. **We support an appropriations level of \$35 million for the Environment and Health Outcome Tracking Network.** This program supports investments in communities to identify and improve policies and environmental factors influencing health and reduce the burden of chronic diseases.

Conclusion

Mr. Chairman, lung disease is a continuing, growing problem in the United States. It is America's number three killer, responsible for one in six deaths. Progress against lung disease is not keeping pace with progress against other major causes of death and more must be done. The level of support this committee approves for lung disease programs should reflect the urgency illustrated by the impact of lung disease.