

Harold P. Wimmer
National President and
CEO

February 28, 2019

Dear Senator/Representative:

As you determine your appropriations priorities for Fiscal Year 2020 (FY20), the American Lung Association asks that your requests include programs that will promote lung health and work to reduce lung disease. The American Lung Association also asks for your leadership in opposing all policy riders that would weaken key lung health protections, including those in the Clean Air Act and the Tobacco Control Act. Policy riders have no place in appropriations bills and the Lung Association strongly opposes attempts to include them, especially riders that would make it harder to protect Americans from air pollution and children from tobacco products.

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. Lung disease is the fourth leading cause of death in the United States and lung cancer is the leading cancer killer among both women and men. Twenty-five million people, including six million children, suffer from asthma. The nation is making progress to combat this toll, but this advancement can only continue with sustained investment and strong laws that are not weakened by policy riders.

The American Lung Association thanks Congress for its previous efforts to raise the budget caps. Once again, Congress must come to a bipartisan agreement to increase the caps for FY20 to avoid catastrophic funding cuts for key lung health programs and other lifesaving nondefense discretionary programs. The nation must increase our investments in public health protections, not slash funding for them.

The American Lung Association is grateful for your support. Please contact Laura Kate Bender (Laura.Bender@Lung.org or 202-715-3457) for any questions about our Interior-Environment bill requests or Erika Sward (Erika.Sward@Lung.org or 202-715-3451) for questions about any of the other bill requests.

Thank you for your consideration of our recommendations.

Sincerely,



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National President and CEO

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American Lung Association Appropriations Priorities

Fiscal Year 2020

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FY20 L-HHS Appropriations Priorities

Provide \$41.6 Billion for the National Institutes of Health (NIH)

Research supported by NIH has been instrumental in the fight to identify the causes of and effective treatments for lung diseases. The American Lung Association supports increased funding for NIH research on the prevention, diagnosis, treatment and cures for tobacco use and all lung diseases including lung cancer, asthma, COPD, pulmonary fibrosis, influenza and tuberculosis. The Lung Association supports robust funding increases for the individual institutes within NIH, recognizing the need for research funding increases to ensure the pace of research is maintained across NIH.

We specifically request an additional \$25 million for the National Heart, Lung and Blood Institute to combat COPD. The Lung Association also strongly supports increased funding for lung cancer research in addition to our support for the Cancer Moonshot and the All of Us Program.

Provide \$7.8 billion for the Centers for Disease Control and Prevention (CDC)

CDC is faced with unprecedented challenges and responsibilities ranging from combating the tobacco epidemic to protecting the public from the health impacts of climate change to addressing diseases such as asthma, COPD and lung cancer. The American Lung Association strongly supports the CDC Coalition's ask of \$7.8 billion for CDC for FY20.

Provide \$310 million for CDC's Office of Smoking and Health (OSH)

Surgeon General Jerome Adams has declared an epidemic of e-cigarette use among youth after high school e-cigarette use increased by 78 percent in one year. The American Lung Association supports \$310 million for the Office of Smoking and Health at CDC. OSH is the lead federal agency for tobacco prevention and control. It works closely with state and local governments to ensure best practices for preventing youth use of tobacco products and promoting evidence-based methods to help smokers quit.

Smoking is the leading cause of preventable death in the United States and costs the U.S. over \$332 billion in healthcare costs and lost productivity. As such, support for tobacco cessation and prevention activities is among the most effective and cost-effective investments in disease prevention.

The Office on Smoking and Health also created the "Tips from Former Smokers" Campaign, which has prompted 500,000 Americans to successfully quit smoking and even more smokers making quit attempts on their own or with the assistance of their physicians. This increased appropriation request level will also allow the "Tips" campaign to continue running for approximately half a year and will provide funding for states and state quitlines.



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Provide \$15 million for CDC's Climate and Health Program

CDC's Climate and Health Program is the only HHS program devoted to identifying the risks and developing 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 states and two city health departments 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, both to expand the number of funded projects and to evaluate best practices and lessons learned from the current programs.

Provide \$34.0 million for the Centers for Disease Control and Prevention's (CDC's) National Asthma Control Program (NACP)

It is estimated that 25.6 million Americans currently have asthma, of whom 6.1 million are children. 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. At present, 24 states and Puerto Rico receive funding. Additional funding in FY20 would allow additional states to compete for funding.

Provide \$3 million for a New CDC Program on COPD

COPD is the fourth leading cause of death. Almost 15.7 million Americans (6.4%) reported that they have been diagnosed with COPD, although CDC estimates that there are an additional 12-15 million more Americans with undiagnosed COPD. Despite this, there is no dedicated program at CDC. COPD funding at CDC is needed to initiate and expand COPD surveillance, analysis and prevention services. The Lung Association requests \$3 million for CDC's National Center for Chronic Disease Prevention and Health to implement steps outlined in the COPD National Action Plan that was developed by the Department of Health and Human Services.

FY20 Interior-Environment Appropriations Priorities

Provide \$469 million for EPA's Clean Air program

EPA's work to protect people from the impacts of air pollution saves lives and improves health, especially for populations most at risk, including those with asthma and other lung diseases; children; older adults; people living in low-income communities; people who work, exercise or play outdoors; and people with heart disease and diabetes. Funds under this program are used in part to assist states, tribes, and local air pollution control agencies in the administration of programs and standards to protect the air we breathe. States have the primary responsibility for developing



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clean air measures necessary to meet federal standards, but rely on support and assistance from EPA to create effective comprehensive air quality management programs. This program also includes testing and oversight to ensure vehicles don't add unlawful amounts of pollution into the air, and efforts to reduce carbon pollution, methane, and other climate pollutants to protect public health from the impacts of climate change. Please provide \$341 million for Environmental Program and Management and \$128 million for Science and Technology. Within this program area, the Lung Association specifically requests \$115.9 million for the Climate Protection Program; \$171 million for Federal Support for Air Quality Management; and \$103.6 million for Federal Vehicle Fuels Standards and Certifications Programs.

Provide \$324.5 million for Categorical Grants: State and Local Air Quality Management and Tribal Air Quality Management

State, local and tribal air pollution agencies need more funding, not less, to ensure proper protection of the public through implementation of the Clean Air Act. These agencies are on the front lines of vital efforts to improve air quality and protect public health, yet they are perennially underfunded. This must change in order to secure the benefits promised by Clean Air Act protections. The additional funding would allow local agencies to add and upgrade air monitors and improve engagement with the public to protect their health. Please provide \$310 million for State and Local Air Quality Management and \$14.5 million for Tribal Air Quality Management.

Provide \$100 million for the Diesel Emissions Reduction Grant Program (DERA)

Millions of old, dirty diesel engines are in use today that pollute communities and threaten workers. Immense opportunities remain to reduce diesel emissions through the DERA program. The Committee's continued investments in this program have yielded up to \$13 in health benefits for every \$1 spent, according to a 2016 EPA report. Please provide at least \$100 million in FY20.

Provide \$8 million for the Categorical Grant: Radon and \$3.3 million for EPA's Radon Program

Radon is the second leading cause of lung cancer in the United States. EPA's radon program, in concert with EPA's State Indoor Radon Grants, are the only nationwide tools that help prevent exposure to it. States and tribes depend on these programs to educate the public and fight this deadly carcinogen. In 2003, the National Academy of Sciences estimated that radon kills 21,000 people each year. Please provide \$8 million for the categorical grants to radon and \$3.3 million for EPA's radon program, which includes \$3.1 million for Environmental Program and Management and \$158,000 for Science and Technology.

Provide \$111.3 million for EPA's Compliance Monitoring & \$268.1 million for Enforcement. EPA's air quality standards mean nothing if they are not enforced. Continued investment in EPA's monitoring and enforcement work is critical to keeping the cop on the beat when it comes to protecting the public from dangerous air pollution. EPA must have the ability and funding needed to reduce non-compliance, as well



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as enforce penalties for violations. EPA must also be prepared to respond to civil enforcement actions authorized by the Clean Air Act.

Provide \$15 million for new programs to protect Americans from wildfire smoke

Wildfire smoke is an urgent and increasing threat to health, and EPA needs additional resources to protect the public from this source of deadly air pollution. The Lung Association requests a total of \$15 million in funding to address these impacts, including \$5 million to establish Wildfire Smoke Health Centers in Collaboration with US Forest Service Missoula Fire Sciences Laboratory; \$7 million for targeted research on wildfire smoke exposure and policy; and \$3 million for EPA to coordinate interagency science, management and communication strategies for addressing wildfires.

FY20 Agriculture-FDA Appropriations Priorities

Appropriate the \$712 million in authorized user fees for the Center for Tobacco Products

FDA's activities to protect our nation's youth and the public health from tobacco products is entirely paid for by user fees. The American Lung Association strongly supports full appropriation of these authorized user fees, and strongly opposes any riders that would weaken or take away FDA's authority over cigars, or any riders that would grandfather in all e-cigarettes or cigars. The Lung Association also strongly supports FDA's "The Real Cost" Campaign, which according to a 2017 study, has prevented approximately 350,000 of our nation's youth from starting to smoke.

FY20 Transportation-Housing and Urban Development Appropriations Priorities

Provide \$100.0 million for Healthy Homes Activities in the Department of Housing and Urban Development's Office of Lead Hazard and Healthy Homes

The Department of Housing and Urban Development's (HUD) Office of Lead Hazard and Healthy Homes plays a vital role in improving the lung health of public and other types of housing under HUD. Currently, public housing authorities are continuing to implement the smokefree housing rule that will protect the two million public housing authority residents, including 760,000 children, from the dangers of secondhand smoke in their homes. Improving air quality by eliminating toxins like secondhand smoke and mold will improve the lung health of all public housing residents. Public housing authorities are also actively work to fight the second leading cause of lung cancer in homes—radon.



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FY20 Department of Defense Appropriations Priorities

Provide \$20.0 million for Lung Cancer Research in the Congressionally Directed Medical Research Programs

The peer-reviewed lung cancer research program is an important part of the federal lung cancer research portfolio. For a variety of service-connected reasons, lung cancer continues to pose a notable threat to military personnel. The peer-reviewed lung cancer research program is facilitating both ongoing and emerging activities that advance scientific understanding of lung cancer in meaningful ways and lead to improvements in health and wellness.

Thank you for your consideration of our Fiscal Year 2020 funding recommendations. Again, we ask for your opposition to all policy riders that would weaken key lung health protections.

