February 22, 2018

Dear Senator/Representative:

As you determine your appropriations priorities for Fiscal Year 2019 (FY19), 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 in both 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 third leading cause of death in the United States and lung cancer is the leading cancer killer among both women and men. Twenty-six 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 political riders on these appropriations bills.

The American Lung Association thanks Congress for its bipartisan agreement that raises the budget caps for FY19 and provides more adequate funding for nondefense discretionary (NDD) programs, including key lung health programs.

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,

Harold P. Wimmer
National President and CEO
American Lung Association Appropriations Priorities  
Fiscal Year 2019  
Labor, Health and Human Services, Education and Related Agencies  
Interior, Environment, and Related Agencies  
Agriculture, Food and Drug Administration, and Related Agencies  
Transportation, Housing and Urban Development, and Related Agencies

**FY19 L-HHS Appropriations Priorities**

**Provide $38.1 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, influenza and tuberculosis. The Lung Association supports recent funding increases for precision medicine, and also believes that individual institutes within NIH need robust, sustained federal research funding increases to ensure the pace of research is maintained across NIH.

**Provide $30.0 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.

**Provide $216 million for CDC’s Office of Smoking and Health (OSH)**

The American Lung Association supports $216 million for the Office of Smoking and Health at CDC. OSH is the lead federal agency for tobacco prevention and control and 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 allow the “Tips” campaign to continue running for approximately half a year and will provide funding for states and state quitlines.

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.

**Provide $10 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.

**FY19 Interior-Environment Appropriations Priorities**

**Provide $469 million for EPA’s Clean Air and Climate 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 clean air measures necessary to meet federal standards, but rely on support and assistance from EPA to create effective comprehensive air quality management programs. Funds also 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.

**Provide $318.8 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. Please provide $303 million for State and Local Air Quality Management and $15.8 million for Tribal Air Quality Management.

**Provide $75 million for the Diesel Emissions Reduction Grant Program (DERA)**

Ten million old 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 between $5 and $21 in health benefits for every $1 in retrofitting. Please provide at least $75 million in FY19.

**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.

**FY19 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.

**FY19 Transportation-Housing and Urban Development Appropriations Priorities**

Provide $50.0 million for 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 working 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.

Thank you for your consideration of our Fiscal Year 2019 funding recommendations. Again, we ask for your opposition to all policy riders that would weaken key lung health protections.