

April 4, 2022

#### Dear Senator/Representative:

On behalf of 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. I write to you today with our requests for fiscal year 2023.

Over the now two years of responding to the COVID-19 pandemic, the need for significant and sustained investments in our nation's public health infrastructure, especially at the Centers for Disease Control and Prevention (CDC), has become clearer than ever. The American Lung Association is a long-time champion of the work CDC does to protect health and save lives. We continue to advocate for sustained, robust and predictable funding for the agency and ask that funding be increased to at least \$11 billion for fiscal year 2023. This funding should be in addition to, not in lieu of, emergency funds to respond to the going pandemic.

The Lung Association recognizes the challenges that the pandemic created and appreciates the work Congress has done to respond to them. To emerge from those challenges stronger than before, continued investment in CDC programs is vital, including those that help smokers quit; promote asthma control; support prevention and treatment of lung and other chronic diseases, including chronic obstructive pulmonary disease (COPD) and lung cancer; and prepare for the health impacts created by a warming climate. Further, additional funding for research and development at the National Institutes of Health (NIH) is essential to understanding how to prevent and treat lung disease, including COVID-19 and the long-lasting symptoms that plague many survivors.

Finally, investments in Environmental Protection Agency (EPA) programs to clean up air pollution and mitigate climate change are critical. The ability to reduce emissions, expand air quality monitoring, and prevent the worst health impacts of climate-related disasters depends on the agency's access to resources.

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 tobacco products.

The American Lung Association thanks Congress for its previous support for key lung health programs and its efforts to address this devastating pandemic. Please contact Liz Scott (<u>Liz.Scott@Lung.org</u> or 202-481-7668) for any questions about our Interior-Environment bill requests or Erika Sward (<u>Erika.Sward@Lung.org or 202-715-3451</u>) for questions about any of the other requests.

Thank you for your consideration of our recommendations.

Sincerely,

Harold P. Wimmer

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National President and CEO

#### **FY23 L-HHS Appropriations Priorities**

The American Lung Association strongly supports substantial federal investments in key public health and biomedical research activities. For FY23, the Lung Association encourages Congress to take a balanced approach in its increases for these agencies and urges the Congress to make strong investments in public health programs at the Centers for Disease Control and Prevention.

## Provide \$11 billion for the Centers for Disease Control and Prevention (CDC)

CDC is faced with unprecedented challenges and responsibilities, including conquering the current pandemic, preventing future public health emergencies, combating the tobacco epidemic, protecting the public from the health impacts of climate change, and preventing and managing diseases such as asthma, COPD and lung cancer. The nation is relying on CDC more than ever before. Consequently, the American Lung Association strongly supports the CDC Coalition's request of \$11 billion for CDC for FY23.

## National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP)

#### Provide \$3.75 billion in funding for NCCDPHP

As the pandemic has demonstrated, chronic diseases and infectious diseases are inextricably linked. Chronic diseases represent 7 of the 10 leading causes of death, and account for 90% of the nation's \$3.8 trillion in annual health care costs. The burden of chronic disease is growing faster than our ability to ease it, putting an increasing strain on the healthcare system, health care costs, our productivity, educational outcomes, military readiness, and well-being. The COVID-19 pandemic has only exacerbated these challenges, and the underfunding of NCCDPHP has made the nation more vulnerable to the pandemic.

### Provide \$6 million in Funding for CDC's Chronic Disease Education and Awareness Program

Far too many individuals in the United States have or are at risk of potentially devasting chronic diseases without knowing. COPD is one of the leading causes of death and disability in the United States. Approximately 16 million people in the United States have COPD, and millions more remain undiagnosed. Given this significant gap in knowledge, the American Lung Association greatly appreciates the creation and funding of the Chronic Disease Education and Awareness competitive grant program at CDC in FY21 and the increase in FY22. In FY23, the Lung Association asks for this program to receive \$6 million to continue the momentum and enable CDC to expand its work with stakeholders to respond to chronic diseases, such as COPD, that do not have stand-alone programs.

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

One in four high school students continue to use at least one tobacco product. The American Lung Association is grateful for the \$4 million increase in funding for OSH in FY22 and asks for an additional \$68.5 million for FY23. 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 guit.

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 a million 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 run year-round, provide funding for states and state quit lines, allow CDC to invest in youth prevention efforts and to work to eliminate health inequities among racial, rural and socio-economic groups.

#### **Provide \$110 million for CDC's Climate and Health Program**

Climate change is already impacting the lives of millions of Americans and the impacts are expected to grow. CDC's Climate and Health Program is the only government program investing in preparing communities to anticipate 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; and more frequent and severe droughts and wildfires, and provides guidance to states in adaptation. The program includes the Climate Ready States and Cities Initiative (CRSCI) that utilizes a five-step Building Resilience Against Climate Effects (BRACE) program to protect communities. The CRSCI program is a valuable tool for states, localities, Tribes and territories, but it has received insufficient funding. Just recently, funding for a number of states was actually cut.

A funding level of \$110 million would allow CDC to extend the program to all states and territories to anticipate climate challenges and assist in state health adaptation plans.

#### Provide \$40 million for CDC's National Asthma Control Program (NACP)

It is estimated that 24.8 million Americans currently have asthma, of whom 5.5 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: asthma mortality rates have decreased despite the rate of asthma increasing. We thank Congress the increase in funding of \$500,000 in FY22. At present, 23 states, Puerto Rico, and Houston, TX, receive funding, and additional entities are funded to collect detailed surveillance data so that public health interventions are more focused and effective. Additional funding of \$40 million in FY23 would allow additional states to be funded, and for the NACP to continue its efforts to develop public health interventions aimed at protecting people with asthma from wildfire smoke.

## Provide \$1.13 billion for the National Immunization Program at CDC's National Center for Immunization and Respiratory Diseases (NCIRD)

The success of the nation's vaccination programs has enabled many individuals to forget about the impact of many vaccine-preventable diseases, such as polio, that once wreaked havoc. The COVID-19 pandemic, however, has provided a stark reminder of the need and significance of vaccines and a robust national vaccination program. The National Immunization Program must receive strong and sustained funding. The Lung Association asks for funding to enhance COVID-19 vaccination, bolster our immunization infrastructure and address any gaps in routine immunizations that may have emerged as a result of the pandemic.

#### **Provide \$49 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 also 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. Lastly, the Lung Association urges increased funding for lung cancer research in addition to the Cancer Moonshot and the All of Us Program.

#### FY22 Interior-Environment Appropriations Priorities

#### Provide \$573.2 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 pre-existing conditions like lung disease; children; pregnant people; older adults; people with low-income; people of color; and people who work, exercise or play outdoors. 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. This program also includes testing and oversight to ensure vehicles are emitting lawful 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 \$434.1 million for Environmental Programs and Management and \$139.1 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 \$110.2 million for Federal Vehicle Fuels Standards and Certifications Programs.

## Provide \$531 million for Categorical Grants: State and Local Air Quality Management (\$500 million) and Tribal Air Quality Management (\$33 million)

State, local and Tribal air pollution agencies have been chronically underfunded for years, with real health consequences. These grant dollars help fund air quality monitoring work, which informs the public of risks to their health and identifies areas in need of cleanup. With an <a href="mailto:aging monitoring system">aging monitoring system</a> and increasing competing priorities, state, local and Tribal air agencies are in urgent need of additional resources.

Our funding ask for FY23 better reflects the actual amounts needed by state, local and Tribal air agencies to fulfill their standard procedures and responsibilities as well as meet the additional investments needed to meet environmental justice commitments.

# Provide \$150 million for the Diesel Emissions Reduction Grant Program (DERA) Millions of old, dirty diesel engines are in use today that pollute communities, threaten workers and cause lung cancer. The Committee's continued investments in this program have yielded up to \$30 in health benefits for every \$1 spent, according to a 2019 EPA report, but immense opportunities remain to reduce diesel emissions through the DERA program.

Additionally, we urge the Committee to continue supporting the rapid transition to zero-emission, electric school buses through the Clean School Bus Program provided by the Infrastructure Investment and Jobs Act. Millions of children ride a bus to school every day, exposing them to pollution from dirty diesel engines. Investing in the transition to electric school buses will provide a safer, healthier environment for children, who are among those most at risk of health harm from breathing in pollution.

## Provide \$16 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. We recommend that within the EPA Radon Program, \$3.1 million be appropriated for Environmental Program and Management and \$158,000 for Science and Technology

## Provide \$132.4 million for EPA's Compliance Monitoring, \$272.7 million for Enforcement and \$132.3 million for Environmental Justice

Compliance with EPA's air quality standards must be enforced if they are to truly achieve the intended health benefits. Investment in EPA's monitoring and enforcement work is critical to ensure accountability 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 as enforce penalties for violations. EPA must also be prepared to respond to civil enforcement actions authorized by the Clean Air Act. Additionally, we know that air pollution does not impact everyone equally. The Administration has tasked EPA with prioritizing righting environmental

injustices. To do so effectively, EPA needs dedicated funding for environmental justice. Please provide \$132.4 million for compliance monitoring, \$272.7 million for enforcement and \$132.3 dedicated for enforcing environmental justice commitments.

Provide \$15 million for New Programs to Protect Americans from Wildfire Smoke Wildfires are no longer a rare occurrence, making wildfire smoke an urgent and increasing threat to health. EPA needs additional resources to protect the public from this source of dangerous air pollution. We appreciate the funding that was included in the FY22 omnibus bill. To build on that, 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.

#### FY23 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 and ability to protect the public health.

# FY23 Transportation-Housing and Urban Development Appropriations Priorities

Provide \$606 million for Office of Lead Hazard and Healthy Homes and designate \$100 million for the Healthy Homes Initiative

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. 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—radon.

#### **FY23 Department of Defense Appropriations Priorities**

Provide \$60 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 FY23 funding recommendations. Again, we ask for your opposition to all policy riders that would weaken key lung health protections.