

**American Lung Association
FY21 Recommendations to the
U.S. Senate Committee on Appropriations
Subcommittee on Labor, Health and Human Services, Education and
Related Agencies
May 21, 2020**

**Testimony Submitted by Harold P. Wimmer
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Centers for Disease Control and Prevention (CDC)

Increase CDC funding to \$8.3 billion
Office on Smoking and Health – \$310 million
National Asthma Control Program – \$34 million
Climate and Health Program – \$15 million
Tuberculosis Programs – \$243 million
New Chronic Disease Line - \$3 million
Prevention and Public Health Fund – Please Protect the Fund

National Institutes of Health (NIH)

Increase NIH funding to at least \$44.7 billion

The American Lung Association is pleased to submit its recommendations for Fiscal Year 2021 (FY21) to the Labor, Health and Human Services, and Education Appropriations Subcommittee.

The American Lung Association was founded in 1904 to fight tuberculosis and is one of the oldest voluntary health organizations in the United States. Since the beginning, the Lung Association has been on the front lines advocating for laws that protect the air we breathe and our lungs. Accordingly, the Lung Association is the leading organization working to save lives by improving lung health and preventing lung disease through education, advocacy and research. As the result of funding from this Committee, public health and research programs will help to prevent lung disease, improve health and, by extension, save the lives of millions of Americans.

Strengthening and Rebuilding Public Health Infrastructure

The COVID-19 pandemic has underscored the need for more robust investments in our nation's public health infrastructure and supporting programs that respond to public health emergencies. Several ideas have been discussed, including a revision of the FY 2021 discretionary budget caps in general, an exemption of certain public health programs from the caps, and the creation of a health defense program designed to address emerging crises that would not be confined to the caps. The American Lung Association urges the committee to consider these and other approaches to build and strengthen the capacity of our national public health system.

The COVID-19 pandemic has also highlighted the importance of preventing and managing chronic lung conditions. Individuals living with lung disease are among the most at risk of serious health complications as a result of COVID-19. The Lung Association recognizes the tremendous challenge the Committee faces in responding to COVID-19 and urges the Committee to continue to invest in CDC programs that help smokers quit, promote asthma control and support prevention and treatment of other lung diseases, including COPD and lung cancer.

Improving Public Health and Maintaining Our Investment in Medical Research

The American Lung Association strongly supports an increase in funding to \$44.7 billion for the National Institute of Health (NIH). We need sustained investments in NIH so that the promise of biomedical research can be achieved. 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.

Lung Disease

Lung disease is the third highest killer in America, taking the lives of almost 414,000 Americans each year. It has been estimated that more than 36 million Americans suffer from a chronic lung disease and lung disease costs the economy \$129 billion each year.

The Prevention and Public Health Fund

The Lung Association strongly supports the Prevention and Public Health Fund that was established in the Affordable Care Act. We ask 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 the Centers for Disease Control and Prevention (CDC) and its critical public health initiatives. The Prevention Fund also supports CDC's media campaign "Tips from Former Smokers."

Lung Cancer

Lung cancer is the number one cancer killer of both women and men. It is estimated that 228,820 new cases of lung cancer will be diagnosed in 2020, and more than 135,000 Americans will die from the disease in 2020. Survival rates for lung cancer tend to be lower than those of other leading cancers due to the lack of early detection and diagnosis. African Americans are more likely to die from lung cancer than persons of any other racial group. We ask the Committee to increase funding for the National Institutes of Health to \$44.7 billion in fiscal year 2021 and to include increased funding for lung cancer research as well as support for the Cancer Moonshot and the All of Us Program.

Tobacco Use

The use of tobacco is the number one preventable cause of death in the United States. More than 37 million American adults smoke and approximately half a million people die of tobacco-related disease each year. Annual healthcare and lost productivity cost more than \$300 billion in the U.S. each year. Each day, about 1,600 kids under 18 years of age try their first cigarette and close to 200 kids become new, regular daily smokers. Additionally, e-cigarette use continues to increase among our nation's youth, and now 1 in 3 high school students use at least one tobacco product.

The CDC Office on Smoking and Health (OSH) must continue to receive robust funding to help combat the tobacco-caused diseases that are burdening the nation. Public health interventions have been scientifically proven to reduce tobacco use, the leading cause of preventable death in the United States. **The American Lung Association urges that \$310 million be appropriated to OSH for FY21.**

The American Lung Association respectfully requests the Committee's support for the Office of Smoking and Health and the "Tips from Former Smokers" Campaign. Over the past five years, 500,000 Americans have successfully quit smoking because of "Tips" and millions more have made quit attempts. The "Tips" campaign has been an incredible return on investment that continues to generate positive outcomes. An accepted threshold for cost-effective public health interventions is approximately \$50,000. The 2012 Tips campaign spent \$480 per smoker who quit and \$393 per year of life saved.

Asthma

Over 24 million Americans have asthma, including 5.5 million children. It is a highly prevalent and costly disease. The nation is making progress to combat asthma, but this advancement can only continue with sustained investment. Asthma costs the U.S. an estimated \$82 billion in health care costs, lost productivity and mortality. Almost half of children in the U.S. miss one or more days of school due to asthma symptoms.

The American Lung Association **asks that you appropriate \$34 million to CDC's National Asthma Control Program (NACP) in FY2021.** 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. Currently, only 24 states and Puerto Rico receive funding – leaving a nationwide public health void that can lead to unnecessary asthma-related attacks and healthcare costs. Increased funding could help develop asthma programs in the remaining 26 states and the District of Columbia as well as allow for better surveillance, management and treatment of asthma. Currently, the CDC does not have comprehensive surveillance data for asthma nationwide, which makes it difficult to compare statistics across states, cities and territories. An increase in funding would provide CDC with resources to conduct better monitoring of asthma and identify states, regions and communities with the greatest burden of disease.

Additionally, we recognize the importance of robust and sustained increases for the National Heart, Lung and Blood Institute, the National Institute of Allergy and Infectious Diseases and the National Institute for Environmental Health Sciences. With increased support, these agencies will be able to continue their investments in asthma research in pursuit of treatments and cures.

Chronic Disease Education and Awareness

COPD is the fourth leading cause of death in the U.S. More than 18 million U.S. adults had evidence of impaired lung function, indicating an under diagnosis of COPD. In 2016, 151,078 people in the U.S. died of COPD, representing one COPD death every 3.5 minutes. The American Lung Association also asks the Committee to continue its support of the National Heart, Lung and Blood Institute working with CDC and other appropriate agencies to act on its national action plan to address COPD, which should include public awareness and surveillance

activities. **The American Lung Association requests sustained and robust funding for the National Heart, Lung and Blood Institute as well as funding for CDC to implement the National COPD Action Plan.**

In FY20, the House created a new line for chronic disease education and awareness within CDC's National Center for Chronic Disease Prevention and Health Promotion. This additional line will allow CDC to respond to chronic diseases – including COPD – that do not have stand-alone programs. The American Lung Association is requesting an initial investment of \$5 million in funding for this program.

Impact of Climate Change on Lung Health

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; and 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. **The Lung Association supports \$15 million for the Centers for Disease Control and Prevention's Climate and Health Program.**

Tuberculosis (TB)

TB, an airborne infectious disease, is a leading global infectious killer, causing 1.3 million deaths annually. In the U.S., every state reports cases of TB annually, with California, Texas, Hawaii and Alaska having the highest burdens. TB outbreaks continue to occur across the country in schools, workplaces and prisons, costing the U.S. over \$460 million annually. Drug-resistant TB poses a particular challenge to TB control due to the high costs of treatment and intensive health care resources required. Treatment costs for multidrug-resistant (MDR) TB range from \$100,000 to \$300,000 per case and can be over \$1 million for treatment of extensively drug resistant (XDR) TB, which can outstrip state and local public health department budgets. **We request that Congress increase funding for tuberculosis programs at CDC to \$243 million for FY 2021.**

Conclusion

Lung disease remains a growing problem in the United States and is leading the nation as the third highest killer. The COVID-19 pandemic demonstrates the critical need to invest in public health programs so that they can respond to new and emerging diseases while continuing to direct resources towards chronic lung disease. The level of support this Committee approves for lung disease programs should be reflective of the urgency and magnitude of impact that lung disease has had on Americans.

The American Lung Association respectfully requests that the Committee supports funding requests and strongly encourages you to oppose all policy riders on appropriations bills. Policy riders can weaken key lung health protections, including those in the Affordable Care Act, the Clean Air Act and the Tobacco Control Act. The Lung Association is appreciative of your support, and we thank you for your consideration of our recommendations.