## + AMERICAN LUNG ASSOCIATION

Harold P. Wimmer National President and CEO March 2, 2017

### Dear Senator/Representative:

As Congress works to finalize the Fiscal Year 2017 appropriations bills, the American Lung Association 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, including 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-four million people, including more than 6 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 Lung Association also asks for your support for continued investments in public health in order to reduce the burden of lung disease in the U.S. Below are our top Fiscal Year 2017 funding priorities.

### FY17 L-HHS Appropriations Priorities

Provide \$34.5 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 and tuberculosis. The Lung Association supports the "cancer moonshot" and the precision medicine funding included in the President's FY17 budget, but also believes that individual institutes within NIH need robust, sustained federal research funding increases.

#### **Advocacy Office:**

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#### Corporate Office:

## Provide at least \$30.596 million for the Centers for Disease Control and Prevention's (CDC's) National Asthma Control Program (NACP)

It is estimated that 24 million Americans currently have asthma, of whom more than 6 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. However, at present 25 states including Puerto Rico receive funding.

### Provide \$220 million for CDC's Office of Smoking and Health (OSH)

The American Lung Association supports \$220 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 hundreds of thousands of smokers to call 1-800-QUIT-NOW or visit smokefree.gov for assistance in quitting – with even more smokers making quit attempts on their own or with the assistance of their physicians. Smoking is the leading cause of preventable death in the United States and costs the U.S. over \$289 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.

### **FY17 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 \$281 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 \$268 million for State and Local Air Quality Management and \$13 million for Tribal Air Quality Management.

Thank you for your consideration of our Fiscal Year 2017 funding recommendations. Again, we ask for your opposition to all policy riders that would weaken key lung health protections.

Sincerely,

Harold P. Wimmer

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National President and CEO