Testimony of Harold P. Wimmer

President and CEO, American Lung Association

U.S. House of Representatives Committee on Appropriations

Subcommittee on Labor, Health and Human Services, Education, and Related Agencies (LHHS)
Re: Fiscal Year (FY) 2024 Appropriations for Key Lung and Respiratory Health Research and Public Health Programs Within the U.S. Department of Health and Human Services

March 23, 2023

Summary of FY 2024 Requests

\$11.6 billion for the Centers for Disease Control and Prevention (CDC)

- National Center for Chronic Disease Prevention & Health Promotion (NCCDPHP)

 Provide \$3.75 billion for NCCDPHP
 - o Provide \$310 million for CDC's Office on Smoking and Health (OSH)
 - Provide \$6 million for CDC's Chronic Disease Education and Awareness Program
- National Immunization Program at CDC's National Center for Immunization and Respiratory Diseases (NCIRD)

Provide \$1.26 billion for NCIRD

• National Center for Environmental Health (NCEH)

Provide \$322 million for NCEH

- o Provide \$110 million for CDC's Climate and Health Program
- $\circ \quad \textbf{Provide \$40 million for CDC's National Asthma Control Program (NACP)}$

\$51 billion for the National Institutes of Health (NIH)

\$5 million for the Office of Climate Change and Health Equity (OCCHE) in the Office of the Secretary

As the public health emergency comes to an end, the continued need for a robust and well-funded public health infrastructure remains clear. The American Lung Association (ALA) has consistently supported federal investments in our nation's public health and biomedical research activities by requesting significant funding for the Centers for Disease Control and Prevention (CDC). In order for the nation to continue to combat ongoing challenges to public health and to prevent future health emergencies of communicable and non-communicable disease, we ask that CDC funding be increased to at least \$11.6 billion for FY 2024. This funding must be in addition to any remaining emergency funds for the pandemic response.

The recent pandemic has also highlighted the importance of preventing and managing chronic lung conditions. Individuals living with certain lung diseases and people who smoke are among the most at risk for severe illness and death from COVID-19. The ALA recognizes the tremendous challenges Congress has faced in responding to the pandemic and appreciates all that it has done thus far. Continued investment in CDC programs that help people quit smoking; promote asthma control; support prevention and treatment of lung and other chronic diseases, including chronic obstructive pulmonary disorder (COPD) and lung cancer; and prepare for the health impacts created by a warming climate are vital. The ALA strongly supports substantial federal investments in key health programs at CDC and NIH. For FY 2024, ALA encourages Congress to take a balanced approach in its increases for these vital agencies and urges Congress to make significant investments in both public health and biomedical research.

Provide \$11.6 billion for the Centers for Disease Control and Prevention (CDC): CDC continues to be faced with unique challenges and responsibilities, including preventing future public health emergencies, combating the youth e-cigarette epidemic, protecting the public from the health impacts of climate change, and managing and preventing chronic diseases such as asthma, COPD and lung cancer. Consequently, the ALA strongly supports the CDC Coalition's request of \$11.6 billion for CDC for FY 2024 and asks for sustained, robust and predictable funding moving forward annually for both cross-cutting initiatives, such as workforce and data modernization, and for the individual programs outlined below.

Provide \$310 million for CDC's Office of Smoking and Health (OSH): OSH is the lead federal agency for tobacco prevention and control. The ALA is appreciative of the \$5 million increase in FY23 funding and asks for an additional \$63.5 million for FY24. OSH is the lead federal agency for tobacco prevention and control. One in four high school students continues to

use at least one tobacco product. Smoking is the leading cause of preventable death and disease in the United States and costs the U.S. over \$600 billion in healthcare costs and lost productivity annually. Support for tobacco cessation (quitting) and prevention activities is among the most effective and cost-effective investments in disease prevention. OSH works with state and local governments to prevent youth tobacco use and to promote evidence-based methods to help people who smoke quit; for example, OSH's "Tips from Former Smokers" media campaign has successfully prompted one million Americans to quit smoking. Additional funding will be used to continue to address vaping, to enhance the "Tips" campaign so that it can be run year-round, to invest in youth prevention efforts and to work to eliminate health disparities among racial, ethnic, sexual, rural and socio-economic groups.

Provide \$6 million for CDC's Chronic Disease Education and Awareness (CDEA)

Program: Far too many individuals in the United States have or are at risk of potentially devastating chronic diseases without knowing, such as COPD which is the sixth leading cause of death and disability in the United States. Unfortunately, there are a myriad of chronic conditions like COPD that do not have stand-alone programs at CDC. Given these gaps, ALA greatly appreciated the creation and funding of the CDEA competitive grant program at CDC in FY21 and the subsequent increases in FY22 and FY23. In FY24, ALA asks for this program to receive \$6 million to continue the momentum and allow CDC to expand its work with stakeholders to respond to chronic diseases that do not have stand-alone programs.

Provide \$110 million for CDC's Climate and Health Program: CDC's Climate and Health Program is devoted entirely to identifying risks and developing effective responses to the health impacts of a changing climate, which include worsening air pollution; diseases that emerge in new areas; stronger and longer heat waves; and more frequent and severe droughts and wildfires.

Communities across the country are already dealing with these challenges and it falls on health professionals to respond to the health impacts, like increases in asthma attacks, heat stroke, instances of tick-related illnesses and respiratory responses to mold. The Climate Ready States and Cities Initiative (CRSCI) housed within the program is a valuable tool for states, localities, Tribes and territories, but it has received insufficient funding. The ALA supports a funding level of \$110 million, which would allow CDC to fund every state and territory with adequate resources to provide education and adaptation efforts to respond to the impacts that are already occurring.

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. We thank Congress for the increase in funding of \$3.5 million in FY23. This program has been highly effective: asthma mortality rates have decreased overall despite the rate of asthma increasing. We thank Congress for the increase in funding of \$3.5 million in FY23. 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 FY24 will allow CDC to increase the number of funded states during the five-year new competitive award process this year, and also increase surveillance in states, including where pediatric asthma data are not available – as well as protect people with asthma from wildfire smoke.

Provide \$1.26 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 ALA asks for \$1.26 billion for NCIRD to bolster the nation's immunization infrastructure, to address any gaps in routine immunizations that may have emerged because of the pandemic, and to expand education efforts around vaccine hesitancy. The ALA also strongly supports the creation of the National Coronavirus and Other Respiratory Viruses Division within NCIRD.

Provide \$51 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 and lung cancer. The ALA 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 ALA 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.

Provide \$5 million for the Office of Climate Change and Health Equity: The Office of Climate Change and Health Equity (OCCHE) within HHS was formed in 2021 to serve as a department-wide hub for examining how the agency can best coordinate responses to the growing health threats posed by a changing climate. Efforts under OCCHE help to train the health workforce to better respond to the health impacts and disparities that a changing climate brings, as well as ready their systems and facilities to be resilient against climate impacts. In FY24, ALA supports \$5 million in funding for the OCCHE to ensure health care facilities can

With robust and sustained investment in health and continued focus on those who bear the greatest health burdens, the FY 24 investments will help to reduce inequity and save lives. Thank you for your consideration of our recommendations.

assess and prepare communities for extreme weather and climate impacts.