

September 3, 2015

The Honorable Tom Cole, Chairman  
Labor, Health and Human Services, Education  
and Related Agencies Subcommittee  
Committee on Appropriations  
U.S. House of Representatives  
2358B Rayburn House Office Building  
Washington, DC 20515-6024

The Honorable Rosa DeLauro, Ranking Member  
Labor, Health and Human Services, Education and  
Related Agencies Subcommittee  
Committee on Appropriations  
U.S. House of Representatives  
1001 Longworth House Office Building  
Washington, DC 20515-6157

The Honorable Roy Blunt, Chairman  
Labor, Health and Human Services, Education  
and Related Agencies Subcommittee  
Committee on Appropriations  
U.S. Senate  
131 Dirksen Senate Office Building  
Washington, DC 20510

The Honorable Patty Murray, Ranking Member  
Labor, Health and Human Services, Education and  
Related Agencies Subcommittee  
Committee on Appropriations  
U.S. Senate  
156 Dirksen Senate Office Building  
Washington, DC 20510

Dear Chairmen and Ranking Members:

We, the undersigned public and environmental health organizations, write to you to express our concern and disappointment regarding proposed fiscal year 2016 appropriations for public health and prevention activities at the Centers for Disease Control and Prevention (CDC) National Center for Environmental Health (NCEH). Our nation's investments in studying, understanding, and improving environmental health have been severely cut in recent years, particularly as it pertains to funding levels for NCEH. From fiscal year (FY) 2009 to 2012, NCEH funding was cut by approximately 25 percent. While the 2014 and 2015 omnibus laws were able to restore some funding, even at those levels NCEH still cannot meet the environmental health challenges of today.

Simply put, current funding for NCEH is inadequate. Today, we only fund half of states to work on environmental health data tracking or to plan and implement asthma control strategies for our most vulnerable children. Only six grantees (covering nine states) are funded to measure and study potentially dangerous chemicals in our population (biomonitoring). Today, over 500,000 children are exposed to unacceptably high levels of lead. Additionally, our states and cities are ill prepared to fully assess, let alone mitigate, the health burdens of longer and hotter heat waves, wildfires, and infectious disease outbreaks.

Despite welcomed increases in funding in the House bill for the asthma program, the cuts proposed under both the House and Senate Labor, Health and Human Services, Education, and Related Agencies FY 2016 spending bills would have even further negative consequences for our nation's health.

For example, a 50 percent cut to the Environmental Public Health Tracking Network (as envisioned by the Senate bill) would instantly eliminate more than 240 state and local jobs for epidemiologists, at a time when the Council of State and Territorial Epidemiologists (CSTE) reports that half of all states have inadequate epidemiological capacity to detect and track disease. Two newly funded states – Kentucky and Michigan – would be unable to launch their data tracking portals.

Eliminating the safe water budget line would halt CDC's work with state, tribal, local, and territorial health departments and endanger the 45 million Americans who use water sources that are not protected by the Environmental Protection Agency (EPA) under the Safe Drinking Water Act. All CDC work on water-related poisonings and support for health departments to prevent and investigate waterborne illness in recreational water sources would be terminated.

CDC's Climate and Health Program is providing critical resources to state and local health departments in nearly every region of the country to prepare for and protect their communities against the serious adverse health impacts of a changing climate including extreme heat and cold, severe storms, floods, droughts, pollen, increases in asthma, and the spread of infectious and vector-borne diseases – such as Lyme disease and dengue fever – into new areas. Preparing for new threats and developing resiliency plans will save lives and reduce future health care costs. Eliminating this program, as proposed by the House and Senate bills, would terminate funding to 16 state and two local health departments (covering 50 percent of the U.S. population). The entire nation stands to benefit from the research and best practices developed under this program.

The elimination of the CDC's Built Environment and Health program, as proposed by the House bill, would jettison the only federal program focused on the impact of our nation's transportation systems and community design on health, safety and air quality. With minimal funding, CDC staff has provided funding or technical assistance to more than one-quarter of the 300 health impact assessments conducted in the country, including award-winning work in Nashville that has significantly increased investments transportation projects that reduce injuries, exposure to pollutants and increase physical activity—saving lives and dollars.

We strongly urge you to reconsider the cuts you have proposed for NCEH. We acknowledge the historically low and inadequate subcommittee allocation for health research and other critical public health, education, and workforce training programs in this bill. We hope lawmakers will work together to enact sequestration relief, increase the Labor-HHS subcommittee allocation, and restore the NCEH budget to its FY 2015 level in the final FY 2016 appropriations legislation without diverting funding from other important CDC programs.

Our growing population and the health challenges we face as a nation will require a serious and significant investment in core environmental health activities at our nation's leading public health agency if we are to focus on prevention that will keep Americans healthy, happy, and

working. We thank you for considering this recommendation and hope to continue to work with you and your staff as deliberations over FY 2016 appropriations continue.

Sincerely,

Alliance of Nurses for Healthy Environments  
American College of Clinical Pharmacy  
American Congress of Obstetricians and Gynecologists  
American Lung Association  
American Public Health Association  
Association of Environmental Health Academic Programs  
Association of Public Health Laboratories  
Asthma and Allergy Foundation of America  
Breast Cancer Fund  
Children's Environmental Health Network  
Council of State and Territorial Epidemiologists  
Green & Healthy Homes Initiative  
National Association of County and City Health Officials  
National Center for Healthy Housing  
National Council for Science and the Environment  
National Environmental Health Association  
National Network of Public Health Institutes  
Natural Resources Defense Council  
Safe Routes to School National Partnership  
Society for Public Health Education  
Trust for America's Health