

April 30, 2025

The Honorable Shelley Moore Capito Chair Subcommittee on Labor, Health and Human Services, Education, and Related Agencies Committee on Appropriations United States Senate Washington, DC 20510 The Honorable Tammy Baldwin
Ranking Member
Subcommittee on Labor, Health and Human
Services, Education, and Related Agencies
Committee on Appropriations
United States Senate
Washington, DC 20510

Dear Chair Capito and Ranking Member Baldwin:

As your Subcommittee moves forward with the FY 2026 Senate Labor, Health and Human Services, Education and Related Agencies Appropriations bill, we urge you to recognize the important role that the Centers for Disease Control and Prevention (CDC) plays in protecting Americans from a wide array of health threats and to provide \$310 million for its Office on Smoking and Health (OSH). We are deeply concerned by the recent mass layoffs at the Department of Health and Human Services (HHS), including the elimination of CDC OSH. At a time when there is renewed focus on preventing chronic disease and protecting children's health, it is essential that Congress provide CDC with resources to reduce the death and disease caused by tobacco use as well as other risks to public health.

As you know, the CDC helps Americans live longer, healthier lives by collecting health data, providing funding and support to state and local health programs, conducting public education campaigns, and developing best practices. The agency works to reduce chronic diseases, which are some of the leading causes of death in the U.S. and are a significant driver of health care costs. Its programs to reduce tobacco use help to prevent youth nicotine addiction and aid tobacco users who want to quit, saving lives and money.

Tobacco use has long been the leading preventable cause of death in the United States. Each year, our nation loses nearly 500,000 Americans to tobacco use and spends \$241 billion treating tobacco-related disease, with more than 60 percent of these costs paid for by government programs like Medicare and Medicaid. Nearly one in three heart disease deaths and cancer deaths and nearly eight in 10 chronic obstructive pulmonary disease (COPD) deaths are caused by tobacco use. Tobacco use almost always begins during adolescence, and most adults who smoke want to quit, but overcoming an addiction to nicotine is difficult and often requires multiple quit attempts.

Youth use of e-cigarettes is a serious public health concern. CDC and the Food and Drug Administration's (FDA) most recent National Youth Tobacco Survey showed that more than 1.6 million youth, including 7.8 percent of high schoolers, reported using e-cigarettes last year. Alarmingly, 42.1 percent of high school e-cigarette users reported use on 20 days or more a month, including nearly 30 percent who reported daily use, a sign that youth are becoming addicted. According to the CDC, e-cigarettes expose users to nicotine and other potentially harmful substances and are not safe. A more robust public health response is needed to prevent e-cigarettes and other new tobacco products from placing a new generation at risk for nicotine addiction and tobacco use.

While smoking rates overall have declined, more than 26 million people in the U.S. currently smoke, and more than 16 million Americans are living with a tobacco-caused disease. Progress in reducing smoking has been uneven. For example, smoking rates are higher in the South and Midwest than other parts of the country and higher among people with lower levels of income than those with higher incomes. There is a need to enhance tobacco prevention and cessation programs where the need is greatest so that every person has an opportunity to avoid nicotine addiction and the health consequences of tobacco use.

The elimination of CDC's Office on Smoking and Health would have a profoundly negative impact on our nation's efforts to reduce the death and disease caused by tobacco. Backsliding on efforts to prevent kids from using tobacco products or to help adult tobacco users to quit will cost additional lives and increase healthcare expenditures. If CDC OSH funding is eliminated, all its programs may end, including vital funding to states and its highly successful national media campaign.

- OSH has provided grants to all 50 states and territories to support tobacco prevention and cessation programs. Comprehensive state and local tobacco control programs are effective at preventing youth tobacco use and helping adults to quit, but they are typically underfunded. Funding from CDC helps states and territories to enhance their programs. Thirteen states (Alabama, Connecticut, Georgia, Kansas, Michigan, Missouri, Nevada, New Hampshire, Rhode Island, Tennessee, Texas, Vermont, and West Virginia) would lose at least 30% of their funding for tobacco control programs if CDC funding is eliminated.
- OSH has run a highly successful national media campaign called Tips from Former Smokers
  (Tips). The campaign features stories of people living with a tobacco-caused disease and shares
  information about where to receive tobacco cessation services. CDC estimates that more than
  16.4 million people attempted to quit and approximately one million people quit for good from
  2012 through 2018 because of the Tips campaign. Over this time period, Tips has prevented an
  estimated 129,100 smoking-related deaths and saved an estimated \$7.3 billion in health care
  costs.
- OSH has provided funding to state quitlines, which provide telephone-based counseling services and, in most states, tobacco cessation medications to help people who would like to quit. Tobacco users who use state quitlines are two to three times more likely to quit than those who try to quit on their own. Five states and two territorial quitline programs (Connecticut, Guam, New Jersey, Puerto Rico, Tennessee, Virginia, and West Virginia) relied on CDC for at least 75% of their funding in FY 2024. These quitlines would likely be unable to continue operating without the funding they receive from CDC. Eliminating funding would likewise have a significant impact on other state quitlines, including forcing them to reduce and limit the services they provide, which would reduce the number of tobacco users who quit.

CDC's focus on public education, surveillance, and state, local, and national programs to reduce tobacco use is uniquely important. Resources for OSH are especially critical, as they will allow CDC to enhance efforts to reduce youth and young adult tobacco use, including e-cigarette use; expand the Tips media campaign so that it runs more weeks each year; and strengthen efforts to reduce tobacco use where smoking rates and tobacco-caused disease are greatest.

Investments in tobacco prevention and cessation will protect kids, save lives, and reduce the cost of treating tobacco-caused disease. We urge you to reject the Administration's elimination of CDC OSH and appropriate funds for CDC to continue its work to reduce tobacco use. With \$310 million, CDC will be able to address the challenges posed by e-cigarettes and continue to make progress reducing the death and disease caused by other tobacco products, especially those most at risk for tobacco-caused disease.

Sincerely,

100 Black Men of America, Inc.

Academy of General Dentistry

African American Tobacco Control Leadership
Council

American Academy of Family Physicians

American Academy of Otolaryngology - Head and Neck Surgery

American Academy of Pediatrics

American Association for Cancer Research

American Association for Dental, Oral, and Craniofacial Research

American Association for Respiratory Care

American Cancer Society Cancer Action
Network

American College Health Association

American College of Cardiology

American College of Chest Physicians (CHEST)

American College of Physicians

American College of Preventive Medicine

American Dental Association

American Dental Education Association

American Heart Association

American Indian Cancer Foundation

American Lung Association

American School Health Association

American Society of Addiction Medicine

**American Thoracic Society** 

Americans for Nonsmokers' Rights

Asian Pacific Partners for Empowerment, Advocacy and Leadership (APPEAL)

Association for Clinical Oncology (ASCO)

Association for the Treatment of Tobacco Use & Dependence

**Association of Black Cardiologists** 

Association of Black Women Physicians

Association of State and Territorial Health
Officials

Asthma and Allergy Foundation of America

Big Cities Health Coalition

BlackDoctor.org

Breathe Southern California

**CADCA** 

Campaign for Tobacco-Free Kids

**CATCH Global Foundation** 

Catholic Health Association of the United States National Hispanic Council on Aging (NHCOA) **COPD** Foundation National Hispanic Health Foundation **Counter Tools** National Hispanic Medical Association (NHMA) **Dana-Farber Cancer Institute** National League for Nursing Emphysema Foundation of America National LGBTQI+ Cancer Network Families USA National Medical Association Family, Career and Community Leaders of National Network of Public Health Institutes America, Inc. North American Quitline Consortium First Focus Campaign for Children **Oncology Nursing Society** GLMA: Health Professionals Advancing LGBTQ+ Parents Against Vaping Equality Prevent Cancer Foundation IntelliQuit Preventive Cardiovascular Nurses Association Jack and Jill of America, Inc. Respiratory Health Association Leadership Council for Healthy Communities Right 2 Breathe **LUNGevity Foundation** Save A Girl Save A World NAACP Society for Cardiovascular Angiography and National Association of Elementary School Interventions **Principals** Society for Public Health Education National Association of Hispanic Nurses Society for Research on Nicotine & Tobacco National Association of Pediatric Nurse **Swedish Hospital Practitioners** The Center for Black Health & Equity National Association of School Nurses The National Alliance to Advance Adolescent National Association of Secondary School Health/Got Transition **Principals** The Society of State Leaders of Health and National Association of Social Workers **Physical Education** National Coalition for Cancer Survivorship The Society of Thoracic Surgeons National Coalition for LGBTQ Health Tobacco Free Michigan National Comprehensive Cancer Network **Trinity Health** (NCCN) Trust for America's Health National Council of Asian Pacific Islander **UW-Center for Tobacco Research and Physicians** Intervention National Council of Negro Women, Inc.