

August 8, 2011

The Honorable Tom Harkin
Chairman
Subcommittee on Labor, Health & Human
Services, Education & Related Agencies
Appropriations
Room 131 Dirksen SOB
United States Senate
Washington, DC 20510

The Honorable Denny Rehberg
Chairman
Subcommittee on Labor, Health & Human
Services, Education & Related Agencies
Appropriations
Room 2358 Rayburn HOB
U. S. House of Representatives
Washington, DC 20515

The Honorable Richard Shelby
Ranking Member
Subcommittee on Labor, Health & Human
Services, Education & Related Agencies
Appropriations
Room 156 Dirksen SOB
United States Senate
Washington, DC 20510

The Honorable Rosa DeLauro
Ranking Member
Subcommittee on Labor, Health & Human
Services, Education & Related Agencies
Appropriations
Room 1016 Longworth HOB
U. S. House of Representatives
Washington, DC 20515

Dear Chairman Harkin, Chairman Rehberg, Ranking Member Shelby, and Ranking Member DeLauro:

The undersigned organizations would like to express our strong support for the Centers for Disease Control and Prevention (CDC) Environmental Health Laboratory (EHL) and the National Environmental Public Health Tracking (Health Tracking) Program in the FY 2012 Labor, Health and Human Services, Education and Related Agencies Appropriations bill.

Today, chronic disease is responsible for seven out of ten deaths every year. While access to preventive services, healthy eating, regular physical activity, and abstaining from smoking can reduce the incidence of illness, a growing body of scientific evidence is pointing to exposure to chemicals and environmental hazards as a major risk factor for many diseases. The EHL and the Tracking Program are two critical components of our national capacity to measure, study, and address the link between environmental exposures and health outcomes.

Environmental Health Laboratory and Biomonitoring

We respectfully request \$50 million for the EHL in FY 2012, particularly in support of biomonitoring efforts. Biomonitoring is the practice of measuring “pollution in people” by measuring the level of over 300 industrial chemicals and heavy metals in human biospecimens. The data provides critical information about how unsafe chemicals are being absorbed into our bodies, helping public health officials understand how chemical exposures can affect the health of our nation. The Environmental Health Laboratory has, for a number of

years, performed national biomonitoring studies and published the results in CDC's *National Report on Human Exposure to Environmental Chemicals* – the most comprehensive assessment of the U.S. population's exposure to environmental chemicals. With this information, scientists and public health professionals can see national averages and trends for exposure to a host of toxic substances, including substances such as lead and tobacco smoke.

While these national statistics are critical, states have also begun to develop biomonitoring programs to better understand the relationship between environmental toxins and increasing rates of disease in their own populations. Those programs allow states to take into account the specific issues, occupations and geographic areas of concern facing local communities. An FY2009 CDC call for proposals to build the capacity of state biomonitoring programs resulted in an overwhelming response, with 24 proposals representing 33 states and one city being approved for funding. Unfortunately, the limited resources allowed CDC to fund only three states – California, New York, and Washington – and those few programs would be in jeopardy without the modest \$6 million increase we are requesting.

The additional requested funding would permit CDC to maintain funding to existing state programs at current funding levels. Funding is used to help states determine the proportion of their population with chemical exposure levels above those associated with adverse health effects; assess the effectiveness of public health efforts to reduce people's exposures to specific chemicals; determine whether exposure levels are higher among minorities, children, women of childbearing age, or other vulnerable populations; track, over time, trends in levels of exposure in the population; and respond to non-terrorism-related emergencies involving environmental chemicals, among other activities. Without a modest increase, states would be forced to narrow the scope of their work, requiring them to lay off employees and curtail their programs despite years of planning and development since the CDC biomonitoring programs' inception.

We also request that, of the increase, \$1 million be used by the CDC for a quality assurance program that tracks the outcomes and efficacy of the states' work. That would serve as a needed complement to the CDC's Environmental Health Laboratory work with the states, which is used to provide expertise, training and technical assistance to states with biomonitoring programs; develop and simplify laboratory methods for measuring chemicals in people; undertake studies related to the science and practice of biomonitoring and communication of biomonitoring results; conduct human studies that investigate the relationship between exposure to chemicals and adverse health effects, particularly for vulnerable populations; improve the laboratory's capacity to respond to non-terrorism-related chemical emergencies; and conduct measurements of new priority chemicals.

The federal government has a unique role to play in providing technical assistance and direct capacity building assistance to states, as well as continuing the Environmental Health Laboratory's groundbreaking work on techniques for measuring chemicals and research into the link between chemical exposures and human health. An allocation of \$50 million for the CDC's Environmental Health Laboratory to allow adequate funding of the EHL's biomonitoring efforts and would represent an investment in the future health our nation.

National Environmental Public Health Tracking Program

We respectfully request that the Committee restore base funding for Health Tracking and make an incremental investment to grow the national network (\$43 million for FY 2012). CDC's National Environmental Health Tracking Program is a national system that provides data on environmental exposures (such as air quality, drinking water, and biomonitoring data) together with health data (such as hospitalizations, birth defects, cancer, and others). CDC funds states and localities to implement state-based networks that feed into the national network. This approach saves resources and creates flexibility in implementation while ensuring that we are building toward a truly national health tracking network.

Creating and sustaining a truly national Health Tracking program, at an estimated annual cost of \$275 million according to a report from the Pew Commission, has the potential for a tremendous return on investment. According to a report by the Public Health Foundation, an adequately funded Tracking Program would save the federal government \$1.44 in health care costs for every \$1.00 invested. Unfortunately, CDC is currently only able to fund 23 states and one city to build and implement state-based health tracking networks.

For FY 2011, a targeted investment of \$35 million from the Prevention and Public Health Fund (the Fund) was expected to help make incremental new investments in the program to help fund new states and slowly grow the strength of the network. However, cuts to the CDC contained in the Full-Year Continuing Appropriations Act (P.L. 112-10), resulted in the elimination of the base authority for the Health Tracking program. What resulted was a full replacement of the base discretionary budget with resources from the Fund. That is in contrast with the President's proposed FY 2012 budget, which was to rely on only \$9 million being made available from the Fund.

We need the ability to inform researchers, public health practitioners, and decision makers about environmental health hazards in *all* states and communities. In fact, \$43 million in FY 2012 would enable CDC to fund up to seven new grantees (states, cities, or counties) and would help to expand the quality and quantity of health and environmental information available through the network.

The federal government must provide the national leadership and resources to initiate the action required to protect Americans from environmental hazards. It is critical that we have the ability to track the relationship between environmental exposures and the incidence and distribution of disease. Understanding these connections will allow prevention efforts to better protect the public health and save health care dollars over the long term. Toward that end, we respectfully request that you continue to increase investment in CDC's Environmental Health Laboratory and National Environmental Health Tracking Program. We appreciate your consideration of this request.

Sincerely,

Action Now
Alaska Community Action on Toxics

American Lung Association
Association of Reproductive Health Professionals
Association of State and Territorial Health Officials
Autism Society
Beyond Pesticides
Breast Cancer Fund
California Healthy Nail Salon Collaborative
Commonweal
Connecticut Coalition for Environmental Justice
Environment California
Environmental Defense Fund
Environmental Health Strategy Center
Environmental Working Group
HEAL Institute
Healthy Building Network
Health Care Without Harm
Health Child Healthy World
Health Resources in Action
Institute for Agriculture and Trade Policy
Iowa Breast Cancer Edu-action
Indiana Toxics Action
Learning Disabilities Association of America
Minnesota Center for Environmental Advocacy
National Asian Pacific American Women's Forum
National Association of City and County Health Officials
Pesticide Action Network North America
Physicians for Social Responsibility
Preventing Harm Minnesota
Public Health Institute
Trust for America's Health