



### **Statement for the Record**

Kenneth Mendez, President and CEO  
Asthma and Allergy Foundation of America (AAFA)

Submitted to the Senate Subcommittee on Labor, Health and Human Services, Education,  
and Related Agencies  
Committee on Appropriations

### **Regarding FY 2026 Appropriations for the Centers for Disease Control and Prevention June 13, 2025**

Chair Baldwin, Ranking Member Capito, and Members of the Subcommittee:

The Asthma and Allergy Foundation of America (AAFA) appreciates the opportunity to submit this statement for the record in support of continued funding for the Centers for Disease Control and Prevention's (CDC) **National Asthma Control Program (NACP)** in the FY 2026 Labor, Health and Human Services, Education, and Related Agencies appropriations bill.

AAFA is the leading patient organization for people with asthma and allergies and the oldest asthma and allergy patient group in the world. We are dedicated to improving the quality of life for people with allergic diseases and asthma through education, support, advocacy and research.

Asthma is one of the most common and costly diseases in the U.S., affecting over 28 million Americans, including about 5 million children. The total economic cost of asthma in the United States was about \$82 billion per year from 2008 to 2013, or \$113 billion in CPI-adjusted dollars in 2025. Without prevention, costs will rise—especially for emergency care and hospitalizations.

The National Asthma Control Program is the only federal program solely dedicated to asthma prevention and surveillance. Since its inception, NACP has partnered with state health departments to reduce asthma deaths, hospitalizations, and emergency department visits, while improving asthma surveillance and supporting community-based interventions. This program has demonstrated a strong return on investment—**saving \$71 for every \$1 spent**—by reducing preventable emergency care costs and enabling families to manage asthma more effectively.



Despite its proven effectiveness, the entire NACP staff was temporarily eliminated on April 1, 2025 due to administrative reductions in force (RIFs). This decision abruptly halted federal leadership and support for asthma prevention at the state and local level and undermines decades of bipartisan work to improve chronic disease outcomes. However, NACP staff were reinstated on June 11, 2025. The reinstatement of NACP staff highlights the importance and effectiveness of this program in managing chronic disease like asthma. However, the FY 2026 President's Budget still proposes eliminating this small, \$33.5M program the NACP entirely.

**The NACP is not a redundant or duplicative program—it fills a unique and irreplaceable role in our nation's public health infrastructure.** No other federal program provides asthma-specific surveillance, technical assistance, or capacity-building to states and communities. Eliminating the NACP leaves a dangerous gap in our chronic disease prevention strategy at a time when asthma remains the most common chronic disease in children. Many state asthma programs rely entirely on the NACP for funding and will cease to exist if the program is eliminated.

Congress has the authority and responsibility to protect public health programs like the NACP. **We urge the Subcommittee to fund the NACP at a \$40M in FY26** and to reject any proposals that reduce or eliminate CDC's capacity to support chronic disease prevention—particularly asthma.

Without federal support, communities across the country will lose essential asthma education and surveillance infrastructure, putting millions of Americans—particularly children, low-income families, and veterans—at greater risk. The proposal to eliminate NACP contradicts the Administration's stated priority to reduce chronic illness and improve health outcomes.

The asthma community stands ready to partner with Congress to ensure that CDC's asthma prevention efforts are not only preserved but strengthened. We respectfully request the Subcommittee's leadership in protecting this vital program in FY 2026.

Thank you for your consideration.