



**Written Testimony  
Joint Legislative Budget Hearing – Health  
Tuesday, February 8, 2022**

Senate Finance Chair Krueger, Assembly Ways and Means Chair Weinstein, and distinguished members of the New York State Senate Finance and Assembly Ways and Means Committees:

The American Lung Association is the oldest voluntary health organization in the United States. For more than 115 years, the Lung Association has been working to save lives by improving lung health and preventing lung disease through education, advocacy, and research. The Lung Association works on behalf of the 37 million Americans living with lung diseases, including over 2.3 million patients with lung disease in New York.

As you continue your work on the Fiscal Year 2022-2023 budget amid a respiratory pandemic that has taken the lives of more than 64,000 New Yorkers, the prioritization of lung health is more critical than ever before. We appreciate the opportunity to submit written testimony today on programs and policies that can improve the lung health of all New Yorkers and save lives.

**ASTHMA PROGRAMS AND COALITION GRANTS**

An estimated 1.5 million adults and over 400,000 children in New York live with Asthma; a chronic disease of the lungs that causes wheezing, breathlessness, chest tightness, and coughing. If not well-controlled, even under normal circumstances, asthma can greatly limit a person's quality of life. In addition, the people of New York continue to face threats from air pollution, tobacco use and barriers to quality, affordable health insurance. Since nearly 1 in 10 New Yorkers have asthma, and according to the CDC, our rates remain higher than the national average; it is critical to continue the work of the NYS funded projects.

To date, funding for the state's Asthma Program has provided the asthma coalitions across New York State with vital resources needed to educate and train thousands of healthcare professionals, patients, community stakeholders and students. These educational initiatives have helped countless patients and their families manage this chronic disease. Additionally, support for home-based asthma services has been provided to patients across the state by nurses and community health workers.

In three years from 2018-2021, funding for the childhood asthma coalitions has been level funded at a shoestring budget of \$930,000 annually. Yet, coalitions in Long Island, New York City, Western New York, and the Hudson Valley have:

- Educated 3,320+ healthcare professionals.

- Provided needed resources to more than 1,200 community stakeholders including educational resources in multiple languages.
- Enrolled more than 3,100 patients in Project BREATH (Bringing Resources for Effective Asthma Treatment through Health Education).
- Conducted nearly 1,000 asthma home visits with professionals trained in implementing home-based asthma services.
- Enrolled more than 1,500 students in Asthma Self-Management Education (ASME) programs.

***The Lung Association respectfully requests the legislature approve an additional \$700,000 for the childhood asthma coalitions so that they can continue to build upon their excellent return on investment for the state, expand current efforts in their current areas of operations, and grow to other parts of the state such as the Capital Region.***

### **TOBACCO CONTROL PROGRAM**

Smoking takes an enormous toll on New Yorkers. According to the [Lung Association's 2022 State of Tobacco Control](#):

- An estimated 22,800 deaths every year are attributed to smoking in New York.
- Nearly 750,000 New Yorkers are living with a serious smoking-related illness.
- Approximately 12% of New York adults are still smoking.
- Lung cancer is the leading cause of cancer death in both men and women in New York.
- While the smoking rate among high school students is down to 2.4%, more than one in four high school students (25.6%) use some form of tobacco product.
- Disparities in smoking rates persist, especially among more vulnerable populations, thanks in part to tobacco industry targeted marketing and advertising in these communities.

The Tobacco Control Program (TCP), administered by the New York State Department of Health Bureau of Tobacco Control (BTC) uses an evidence based, policy-driven, and population-level approach to decrease tobacco initiation by youth, increase quitting among adult smokers, and eliminate exposure to secondhand smoke in New York. Their work takes a multi-pronged approach to address tobacco use in New York by promoting policy change through evidence-based strategies that alter social norms and make tobacco less desirable, less acceptable, and less accessible; promoting the delivery of evidence-based tobacco dependence treatment via broad health systems interventions focusing on the existing health care infrastructure, and; implementing hard-hitting, emotionally evocative media campaigns that support policy change and promote increased quit attempts via evidence-based methods.

Last year the program received a little more than \$39,000,000, far short of the Centers for Disease Control (CDC) recommended level of \$203,000,000.

***The Lung Association respectfully requests funding for the program be increased to \$52,000,000 to ensure that our children don't pick up smoking of tobacco and other tobacco products, resources are provided for those that want to quit, we lower healthcare costs of smoking-related illness, and save lives.***

### **TOBACCO TAX**

Despite the well-documented benefits of tobacco tax increases, New York has not increased most tobacco taxes in over a decade. Tobacco tax increases are a win-win-win; they improve public health, reduce healthcare costs, and generate revenue. ***As such, the Lung Association respectfully requests a cigarette tax increase of at least \$1.00 per pack and the establishment of tax parity with other tobacco products be included in the one house budget proposals and the state's final enacted budget.***

A significant increase in tobacco taxes will have a positive impact on the number of people who smoke, especially youth who are price sensitive. The projected health benefits of increasing the cigarette tax by \$1.00 per pack in New York include:

- Youth under age 18 kept from becoming adult smokers: 22,200.
- Reduction in young adult (18-24 years old) smokers: 4,800.
- Current adult smokers who would quit: 53,900.
- Premature smoking-caused deaths prevented: 20,000.
- 5-Year reduction in the number of smoking-affected pregnancies and births: 5,100.

In addition to the public health benefits, a tobacco tax is essential to help make a dent in the \$9.7 billion New York spends annually on tobacco-related healthcare costs. The projected health care savings of increasing the cigarette tax by \$1.00 per pack in New York include:

- 5-Year health care cost savings from fewer smoking-caused lung cancer cases: \$10.81 million.
- 5-Year Medicaid program savings for the state: \$61.90 million.

### **Electric School Buses**

Electric school buses grant multiple benefits including improved public health and clean air for children and surrounding communities, green jobs, and climate change benefits through decarbonization. Diesel school buses are the predominant fuel type sold today and each diesel school bus sold this year may remain in operation for as many as 15 years, locking in a technology that is bad for air quality, public health, and the climate. The equitable deployment of electric school buses throughout New York State is

essential to improve public health, advance health equity, and further Governor Hochul's ambitious efforts to reduce harmful emissions from the transportation sector.

New York stands to benefit from electrifying school buses in several ways:

- There are over 50,000 buses, about 10% of the U.S. school bus fleet, operated in New York.
- Children that rely on school buses are disproportionately in disadvantaged communities and stand to benefit the most from electrification. Students with disabilities also often have longer school bus rides and, therefore, face more exposure to harmful emissions.
- New York has ambitious climate goals for reducing medium and heavy-duty vehicle emissions, with a goal of achieving 100% zero-emissions by 2045.
- Cleaner air, especially in high-pollution corridors and communities of color.

The harmful public health impacts of our overwhelmingly diesel-based school bus fleet are well-documented. Studies have linked diesel exhaust to lung damage, respiratory illness, cardiovascular disease, and cancer. These lasting negative public health impacts disproportionately affect low-income students, students of color, disabled students, and bus drivers who spend the most time on school buses, amplifying environmental injustices and structural inequalities. Moreover, most school bus depots are housed in disadvantaged communities – especially in New York City – further entrenching the disproportionate impacts of transportation emissions felt in these communities.

With zero tailpipe emissions and 70% lower lifecycle GHG emissions, electric school buses are the future of student transport, helping to mitigate climate change while promising cleaner air and healthier communities. We hope to see the State further prioritize our children, our workers, and our communities by moving forward with its promise of all new zero-emission school buses by 2027 and a fully zero-emission school bus fleet by 2035 by:

***Dedicating at least \$300 million in funding over 5 years to electrify school buses across New York State, with at least 50% of these funds benefitting districts in disadvantaged communities.***

Thank you again for the opportunity to provide written testimony on the Lung Association's budget priorities for Fiscal Year 2022-2023. Through smart investments we can improve the lung health of all New Yorkers especially those living in disadvantaged communities that for decades have carried a disproportionate burden of negative health outcomes.

If you would like more information or have any questions, please don't hesitate to contact me at [trevor.summerfield@lung.org](mailto:trevor.summerfield@lung.org).

Sincerely,

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American Lung Association