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Centers for Disease Control and Prevention
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**RE: Evaluation Reporting Template for National and State Tobacco Control Program (OMB Control No. 0920-1390, Exp. 3/31/2026)—Extension—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC)
Docket No. CDC-2025-0486**

Dear Dr. Zirger:

The undersigned public health and medical organizations write to express the importance of not only evaluating CDC's National and State Tobacco Control Program (NTCP), but the importance of the program itself. We are deeply concerned about recent changes to the Department of Health and Human Services (HHS) that effectively eliminated CDC's Office on Smoking and Health (OSH), which works to protect the public's health from the harmful effects of tobacco use.

Tobacco use is the leading preventable cause of death, disease, and disability in the United States, killing more than 490,000 Americans each year and costing the U.S. more than \$241 billion annually in health care expenses, of which more than 60 percent are paid for by government programs like Medicare and Medicaid.¹⁻³ Given the ongoing threat posed by commercial tobacco and nicotine products and the critical role the NTCP plays in prevention and cessation efforts across the country, it is essential that CDC continue to collect data and evidence to inform its efforts and ensure that the work is evidence-based and having an impact on reducing commercial tobacco and nicotine product use. Evaluation has always been a core part of the NTCP program and is one of the factors that has contributed to the NTCP's success. Evaluation of the program is needed to ensure that the NTCP is working to prevent all Americans from using tobacco and nicotine products and providing tobacco users with cessation services.

Tobacco prevention and cessation is essential to meeting the Administration's goal to reduce chronic disease. Therefore, it is deeply troubling that the Administration effectively eliminated the lead federal agency for comprehensive tobacco prevention and control, CDC OSH, and the NTCP, which helps states and communities implement tobacco prevention programs. This action would move us in the opposite direction, potentially reversing years of progress and placing additional strain on families, our health system, and taxpayers.

Most state tobacco control programs are significantly underfunded compared to recommended funding levels. CDC OSH is the only federal agency that provides funding, approximately \$69 million annually, and technical assistance to state and territorial health departments for tobacco control efforts. The NTCP supports all 50 states, Washington, D.C., 8 U.S. territories, and 28 tribal organizations. It is the only nationwide investment for comprehensive tobacco control efforts. States and territories use the funds to reduce tobacco-related death and disease by

working to prevent kids from using tobacco, reduce secondhand smoke exposure, help people quit smoking, and reduce tobacco use in the communities most impacted by tobacco. Without the NTCP, thirteen states would lose 30 percent or more of their tobacco control program budget.

The evidence is clear: comprehensive tobacco control programs strengthen the health of populations in communities across the United States. They are effective and generate health care cost savings that far outweigh the cost of these programs.^{4,5} These efforts have helped save millions of lives. It is important to note that for every \$1 spent on strong tobacco control programs, states can achieve \$55 return on investment, mostly in averted health care costs to treat smoking-related illness.⁶ Eliminating funding for state and territorial tobacco control programs would negatively impact the health of our communities in the entire country and undo the progress made to date in reducing disease and death from tobacco products - one of the greatest public health victories of our time.⁶

Implementation of this new evaluation mechanism will require CDC to have staff who can administer and oversee the NTCP and provide the much-needed technical assistance to the states to carry out the work to achieve the program's objectives and goals, including advice, assistance, or training to prepare for and manage program development, implementation, maintenance, and evaluation.⁸ NTCP recipients receive support through OSH's subject matter experts, such as scientists, evaluators and health communication specialists through monthly calls facilitated by their public health advisor, monthly NTCP webinars, media network webinars, surveillance and evaluation webinars, or administrative calls based on the needs of the recipient.⁸ In addition, communities of practice exist for which topics are selected to advance the program knowledge and skills necessary for managing and leading comprehensive tobacco control programs. In providing technical assistance, recipients are provided with tools, resources such as best practices user guides, and access to experts in the field.⁸ The elimination of OSH has resulted in the loss of all this technical assistance and the staff who maintained the program and its great work, and provided the states with valuable information for tobacco control efforts. It is imperative that CDC rebuild the staff capacity that has been devastated and is essential to carry out this program.

Again, evaluation of the National and State Tobacco Control Program is necessary to ensure that the program is meeting its intended goals to reduce tobacco-related disease and death as effectively as possible. However, the program itself is a critical investment in the health and well-being of our communities. By continuing to fund the NTCP, CDC can ensure sustained progress in reducing tobacco use, preventing chronic disease, and saving billions in healthcare costs nationwide. We urge CDC to maintain robust support for these proven, cost-effective programs, safeguarding the health of all Americans and securing a healthier, tobacco-free future for generations to come.

Respectfully submitted,

American Academy of Pediatrics
American Cancer Society Cancer Action Network
American Heart Association
American Lung Association
Campaign for Tobacco-Free Kids
Truth Initiative

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