

The Honorable Patty Murray
Chair
United States Senate Committee on
Appropriations

The Honorable Tom Cole
Chair
United States House Committee on
Appropriations

The Honorable Susan M. Collins
Ranking Member
United States Senate Committee on
Appropriations

The Honorable Rosa L. DeLauro
Ranking Member
United States House Committee on
Appropriations

The Honorable Martin T. Heinrich
Chair
United States Senate Appropriations Committee:
Subcommittee on Agriculture, Rural
Development, Food and Drug Administration, and
Related Agencies

The Honorable Andy Harris
Chair
United States House Appropriations Committee:
Subcommittee on Agriculture, Rural
Development, Food and Drug Administration, and
Related Agencies

The Honorable John Hoeven
Ranking Member
United States Senate Appropriations Committee:
Subcommittee on Agriculture, Rural
Development, Food and Drug Administration, and
Related Agencies

The Honorable Sanford D. Bishop
Ranking Member
United States House Appropriations Committee:
Subcommittee on Agriculture, Rural
Development, Food and Drug Administration, and
Related Agencies

Dear Chairs Murray, Cole, Heinrich, and Harris, and Ranking Members Collins, DeLauro, Hoeven, and Bishop,

As you craft the fiscal year (FY) 2025 Agriculture, Rural Development, Food and Drug Administration, and Related Agencies spending bill, the undersigned companies and public health groups respectfully request:

- Providing full funding for the Food and Drug Administration's (FDA) Center for Food Safety and Applied Nutrition (CFSAN);
- Including \$2,000,000 to aid the FDA in assessing progress and working with industry on meeting voluntary sodium reduction targets, and setting a timeline for establishing interim and long-term voluntary targets with accompanying report language;
- Removing old legacy and opposing new policy riders blocking or weakening FDA's work on sodium reduction;
- Providing \$23,162,000 (a \$3,000,000 increase versus FY23) for critical technical assistance to aid schools in meeting the updated school meal nutrition standards, as well as \$1,000,000 specifically for sodium reduction efforts. The FY24 omnibus provided \$18,004,000 in technical assistance, far below the levels programs need to be successful;
- Removing old legacy and opposing new policy riders that block or weaken science-based nutrition standards for school meals; and
- Providing full funding for the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) and opposing any policy riders or language blocking or weakening the nutritional integrity of the WIC food package.

First, CFSAN has remained underfunded for decades in its efforts to ensure the safety and transparency of the 80 percent of our nation's food supply over which it has jurisdiction. Efforts by Congress to boost funding for CFSAN over the past decade have been met with some success, yet even these increases have served only to bring the food program roughly even with the number of staff it had in 1978. Meanwhile, the food industry has evolved dramatically since the 1970s, while Congress has assigned the FDA more and more responsibilities, including broad new mandates over infant formula, dietary supplements, food labeling, and food safety. The FDA has requested an increase of \$30,691,000 for CFSAN budget authority (for total funding of \$435,497,000, a 7.6 percent increase from \$404,806,000 in FY 2024).

Second, we urge you to provide \$2,000,000 to aid the FDA in working with industry and measuring progress on meeting the voluntary sodium reduction targets, and setting a timeline for establishing interim and long-term voluntary targets that would bring overall sodium levels in the food supply down to levels that help consumers meet the Dietary Guidelines for Americans (DGA), as originally intended. The FDA has not yet updated or finalized the 2016 draft guidance on longer-term voluntary targets that would fully meet the DGA. Specifically, we would like the FDA to identify which data sources it will use, and how the FDA will collect and analyze data toward meeting the voluntary targets, and create a timeline for assessments. Ninety percent of Americans consume more sodium than recommended, which puts them at increased risk of cardiovascular disease, the leading cause of death in the United States. Even though the targets are voluntary, meeting longer-term targets could prevent up to 475,000 cases of cardiovascular disease and save \$41 billion in healthcare costs over 20 years,¹ yielding health and economic benefits. Further, the FDA should implement consumer-awareness and education campaigns on sodium reduction to help consumers make better informed choices about what they eat while encouraging companies to provide healthier food options. Lastly, we oppose any policy riders that block, weaken, or delay FDA's work on sodium reduction, and urge Congress to remove Sec 763, such a rider newly added in FY24 appropriations law. While the FDA should report to Congress on their voluntary sodium reduction efforts, the FDA should not be barred from continuing the work while collecting that data.

Each of the signed companies and organizations stand by the FDA in voluntary, industry-led efforts to reduce sodium in our food supply, thus demonstrating that sodium reduction is achievable. With a common benchmark, all companies are encouraged to improve the nutritional value of their products. While not binding, voluntary targets can help support healthier alternatives for consumers while leveling the playing field for companies. These outcomes can be a win-win for consumers and industry.

Third, dedicated funding is needed to help schools meet updated nutrition standards. We were disappointed to see the FY24 omnibus cut funding to \$18,004,000 for Team Nutrition and urge Congress to increase funding to \$23,162,000 and to provide \$1,000,000 specifically for sodium reduction efforts. USDA recently finalized its proposed rule to strengthen nutrition standards consistent with the 2020 Dietary Guidelines for Americans, as Congressionally mandated. The USDA rule contains:

- (1) For the first time, an added sugars standard, with product-based limits for the top sources of added sugars beginning School Year 2025-2026, and to phase-in a limit of added sugars averaged over the week beginning School Year 2027-2028.
- (2) A 10-percent sodium reduction from the current limit for school breakfast, and a 15-percent reduction for school lunch, both implemented in school year 2027-2028. While not perfect and

¹ Pearson-Stuttard J, Kypridemos C, Collins B, et al. Estimating the health and economic effects of the proposed US Food and Drug Administration voluntary sodium reformulation: Microsimulation cost-effectiveness analysis. *PLoS Med.* 2018;15:e1002551. Published 2018 Apr 10. doi:10.1371/journal.pmed.

more work will need to be done to further decrease sodium in school meals, it is imperative that USDA be allowed to continue this work in an incremental, pragmatic way. As such, we strongly urge Congress to remove Sec 770, a policy rider newly added in FY24. Sodium reduction is paramount to protect children's health: nine out of ten children consume too much sodium, putting them at risk of hypertension and cardiovascular disease into adulthood.

- (3) A standard that at least 80 percent of the weekly grains offered in school meals are whole grain-rich.

Further, we must preserve and build on the progress schools and the food industry have made over the past decade to meet science-based nutrition standards and strongly oppose any legacy or new policy riders blocking or weakening implementation of evidence-based nutrition standards in the National School Lunch and School Breakfast Programs that will keep kids healthy and thriving.

Fourth, the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) must be fully funded to sustain benefits and increased participation. This federal nutrition program is a primary defense against nutrition and food insecurity while helping stimulate local economies. WIC has a proven track record of reducing hunger, improving diet quality, and preventing disease. Inadequately funding WIC threatens to harm the food and nutrition security of participants and could reverse hard-won gains in the enrollment of eligible participants. For nearly 30 years, there has been a bipartisan agreement in Congress to provide WIC with resources needed to ensure that every eligible pregnant, post-partum, and breastfeeding parent, infant, or child who seeks WIC services can receive them; we urge Congress to carry forward this agreement and provide WIC with the necessary resources.

Finally, USDA recently issued a final rule to update the WIC food packages. USDA's update has a number of critically needed changes, including making the recent expansions of WIC's fruit and vegetable benefit permanent, expanding cultural food options, providing seafood to a broader range of participant categories, increasing issuance of whole grains, reducing fruit juice, and more. We must protect the science-based process that drives WIC's proven health benefits, and strongly oppose legacy or new policy riders blocking or weakening implementation of the WIC food package update.

Thank you for your consideration of these requests.

Sincerely,

American Academy of Pediatrics
American Heart Association
American Public Health Association
Center for Science in the Public Interest
National WIC Association
Sustainable Food Policy Alliance