

October 1, 2014

The Honorable Harold Rogers,  
Chairman  
House Committee on Appropriations  
The Capitol, Room H-305  
Washington, DC 20515

The Honorable Barbara A. Mikulski,  
Chairman  
Senate Committee on Appropriations  
The Capitol, Room S-128  
Washington, DC 20514

The Honorable Nita M. Lowey,  
Ranking Member  
House Committee on Appropriations,  
Minority  
1016 Longworth House Office Building  
Washington, DC 20515

The Honorable Richard C. Shelby,  
Ranking Member  
Senate Committee on Appropriations,  
Minority  
The Capitol, Room S-146A  
Washington, DC 20514

Dear Chairman Rogers and Mikulski and Ranking Members Lowey and Shelby:

As organizations committed to protecting the public's health, we would like to draw your attention to the critical need for additional funding for FY2015 to fully implement the FDA Food Safety Modernization Act (FSMA), which strengthens and modernizes the U.S. Food and Drug Administration's regulatory, administrative, and information-technology systems that ensure the safety of our food supply.

Foodborne illness remains a major public health threat. The U.S. Centers for Disease Control and Prevention (CDC) estimates that contaminated food causes 48 million foodborne illnesses, 128,000 hospitalizations, and as many as 3,000 deaths nationwide every year. These preventable illnesses inflict untold suffering and drive avoidable health system-related costs of about \$70 billion each year. Everyone is at risk for food poisoning, but young children, pregnant women, older adults, and people with weak immune systems are at particular risk of severe infection and more serious outcomes.

Outbreaks of foodborne illness also negatively affect the farmers and food processors that produce foods within a product category linked to an outbreak. For example, sales of fresh spinach have yet to recover from the 2006 outbreak of *E. coli* linked to this commodity. In addition, foodborne outbreaks are often difficult to track and place serious economic burdens on already overstressed public health department and public health laboratory budgets.

In 2011, Congress wisely enacted FSMA, which fundamentally changes the FDA's approach to food safety, allowing the agency to focus on *preventing* food safety problems before they make people sick, rather than reacting to illnesses after they occur. The law also directs the agency to create a comprehensive food import oversight system which, for the first time, makes importers responsible for the safety of the food products they bring into the United States.

Additional funding provided by your committees since FSMA's enactment is making a difference as FDA continues to finalize the rules and begins to build the systems it needs to implement the new law, but much more work remains to be done. We deeply appreciate the leadership you have shown in addressing important health issues, such as this one, in your leadership role on the Appropriations Committee.

FDA estimates that it needs an additional \$300 million over the next two to three years to fully implement FSMA. As you complete your work on Agriculture Appropriations legislation for FY2015, we strongly urge you to more robustly fund this vital national priority by providing at least \$50 million in additional resources for the FDA's efforts to implement FSMA in the year ahead. Additional funding beyond the amount currently allocated by your Committees would permit FDA to substantially advance key priorities in its domestic FSMA implementation timeline, including necessary investments in the National Integrated Food Safety System, education and technical assistance for industry stakeholders, and modernization and training for its inspection service.

We thank you for your support for FSMA implementation over the past four years. We welcome your on-going commitment to reducing preventable foodborne illnesses through this important public health investment and look forward to your continued support for FDA's food safety efforts.

Sincerely,

The Academy of Nutrition and Dietetics (AND)  
American Academy of Family Physicians (AAFP)  
The American Academy of Pediatrics (AAP)  
American Academy of Sports Dietitians and Nutritionists (AASDN)  
American College of Preventive Medicine (ACPM)  
The American Geriatrics Society (AGS)  
The American Public Health Association (APHA)  
American Society for Parenteral and Enteral Nutrition (ASPEN)  
The Association of Public Health Laboratories (APHL)  
Association of State Public Health Nutritionists (ASPHN)  
Infectious Diseases Society of America (IDSA)  
The National Association of County and City Health Officials (NACCHO)  
The National Indian Health Board (NIHB)  
Pediatric Infectious Disease Society (PIDS)  
The Pew Charitable Trusts  
The Society of Gastroenterology Nurses and Associates (SGNA)