

Data: Elemental to Health

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April 3, 2020

The Honorable Rosa DeLauro
Chair
U.S. House of Representatives
Appropriations Subcommittee on Labor,
Health and Human Services, Education
and Related Agencies
Washington, DC 20515

The Honorable Tom Cole
Ranking Member
U.S. House of Representatives
Appropriations Subcommittee on Labor,
Health and Human Services, Education
and Related Agencies
Washington, DC 20515

Dear Chair DeLauro and Ranking Member Cole,

As you develop appropriations legislation for fiscal year (FY) 2021, the 72 undersigned organizations representing patients and consumers, public health professionals, health information technology (IT) developers, health care providers, and scientists urge you to appropriate \$100 million in FY 2021 for Public Health Data/IT Systems Modernization within the Centers for Disease Control and Prevention (CDC). This represents a \$50 million increase over FY 2020, a \$70 million increase over the president's FY 2021 request and would be implemented alongside the \$500 million in emergency funding allocated as part of the recent COVID-19 stimulus package. This funding would allow CDC, state, local, tribal, and territorial health departments to move from sluggish, manual, paper-based data collection to seamless, automated IT systems and to recruit and retain skilled data scientists to use them. More, better, faster data yielded by secure, interoperable, integrated systems will allow public health professionals and policymakers to make better decisions and get ahead of chronic, emerging, and urgent threats.

The importance of public health surveillance—the interactive system of governmental public health agencies at the federal, state, local, tribal, and territorial levels working with health care providers and to detect, report, respond to, and prevent illness and death—has been highlighted in the ongoing COVID-19 epidemic. Unfortunately, there have been many challenges around the COVID-19 response due to the nation's public health data systems that are antiquated, rely on obsolete surveillance methods, and are in dire need of security upgrades. Lack of interoperability, electronic automation reporting consistency, and data standards leads to errors in quality, timeliness, and communication. Investments in public health data systems will facilitate accelerated, secure, and seamless detection to improve prevention and response efforts.

In addition, public health professionals are faced with rapid advances in data science and evolving cybersecurity threats, and many do not yet have the necessary 21st century skills to understand and securely integrate health data. Developing a new generation of skilled public health data scientists will require new curricula, professional development, post-graduate fellowships, and on-the-job training.

The development of 21st century data systems and the public health workforce needed to operate and maintain these systems have been woefully underfunded to date. The public health community was excited that the FY 2020 funding bill appropriated \$50 million in new funds to CDC. This initial funding will be used to:

- Support assessments of the state of public health workforce and data and health information systems to identify opportunities for modernization and reduce barriers to data sharing;
- Augment workforce development and capacity;
- Support specific enhancements in public health data and health information systems and processes that complement but do not duplicate existing efforts; and
- Facilitate the use of shared services across public health.

We encourage you to continue to prioritize public health data modernization at CDC and public health departments. Technology is rapidly evolving and public health must keep pace with technological advancements by continually upgrading data systems and ensure information is secure through the latest technology. Public health data systems have fallen behind over the past decade because crosscutting resources have not been available, and we must not allow this initial investment to become obsolete. We must build upon the improvements made and continue to provide adequate resources for public health to implement advanced technologies and train the next generation of data scientists. A robust, sustained commitment to transform today's public health surveillance will ultimately improve American's health.

If you have questions, please contact Erin Morton at emorton@dc-crd.com.

Sincerely,

Academy for Radiology & Biomedical Imaging Research
 Academy of Nutrition and Dietetics
 Alpha-1 Foundation
 America's Blood Centers
 American Association on Health and Disability
 American Brain Coalition
 American College of Obstetricians and Gynecologists
 American College of Preventative Medicine
 American Heart Association
 American Medical Informatics Association
 American Mosquito Control Association
 American Organization of Nursing Leadership
 American Public Health Association
 American Society of Nephrology
 American Society of Tropical Medicine & Hygiene
 Association for Professionals in Infection Control and Epidemiology
 Association of Asian Pacific Community Health Organizations
 Association of Maternal & Child Health Programs
 Association of Public Data Users
 Association of Public Health Laboratories
 Association of Schools and Programs of Public Health
 Association of State and Territorial Health Officials
 Association of University Centers on Disabilities
 Birth Defects Research and Prevention
 Caring Ambassadors Program, Inc

Center for Science in the Public Interest
College of Healthcare Information Management Executives
Commissioned Officers Association of the U.S. Public Health Service, Inc.
Consortium of Social Science Associations
Council of State and Territorial Epidemiologists
Epilepsy Foundation
Green & Healthy Homes Initiative
Healthcare Information and Management Systems Society
Hep B United
Hepatitis B Foundation
Hepatitis Education Project
HLN Consulting, LLC
Infectious Diseases Society of America
Institute of Health Informatics, University of Minnesota
Intermountain Healthcare
Inter-university Consortium for Political and Social Research
ISF
Lakeshore Foundation
Leidos
Liver Health Connection
March of Dimes
Michael J. Fox Foundation
MQ Foundation
NAPHSIS
NASTAD
National Association of County and City Health Officials
National Birth Defects Prevention Network
National Blood Clot Alliance
National Coalition of STD Directors
National Environmental Health Association
National Healthy Start Association
National Multiple Sclerosis Society
National Network of Public Health Institutes
National Safety Council
National Viral Hepatitis Roundtable
New York State Public Health Association
Peggy Lillis Foundation
Philadelphia Department of Public Health
Prevent Blindness
Ruvos
SAP
Spina Bifida Association
The Immunization Partnership
The Society for Healthcare Epidemiology of America
The Task Force for Global Health
Trust for America's Health
Washington State Department of Health