The Friends of NCHS is a coalition of public health associations, patient organizations, scientific societies, and research institutions who rely on the information produced by the National Center for Health Statistics (NCHS) within the Centers for Disease Control and Prevention (CDC). In order to support NCHS’s continued work to monitor the health of the American people and to allow the agency to make much-needed investments in the next generation of its surveys and products, the Friends of NCHS recommend an appropriation of at least $189 million for the agency in fiscal year (FY) 2021. Our recommendation reflects an increase to NCHS’s base budget of $14.6 million from its FY 2020 appropriation, as well as the formalization of an ongoing $14 million transfer from Surveillance, Epidemiology, and Informatics as proposed in the President’s FY 2021 Budget Request. We urge the Subcommittee to reject the Administration’s proposed $5.4 million cut to the agency, which would have a devastating impact on NCHS’s ability to continue to provide timely, unbiased, and accurate data on Americans’ health.

The coalition greatly appreciates the Subcommittee’s longstanding support of NCHS and the data it produces on all aspects of our health care system. We also thank the Subcommittee for the prominent inclusion of NCHS within the $50 million Public Health Data Surveillance/IT Systems Modernization initiative in the FY 2021 appropriations agreement. As the CDC’s leadership determines how to allocate this new funding, we ask that the Subcommittee exercise its oversight authority over this initiative to ensure that NCHS receives sufficient funding to invest in innovation as directed by the Explanatory Statement.

Investing in the agency now will allow NCHS to put its expertise to transformative use to create a true twenty-first century statistical agency and reaffirm NCHS’s status as the world’s gold-standard producer of health statistics. With additional funding, NCHS could capitalize on advances in survey methodology, big data, and computing by:

- Building platforms that better integrate electronic health records (EHRs) into NCHS’s data production by standardizing data from the major EHR vendors.
- Determining how best to achieve efficiencies among its hallmark population health surveys (the National Health Interview Survey and the National Health and Nutrition Examination Survey), making them less costly to taxpayers and less burdensome on participants.
- Supporting states as they modernize their vital records registration systems by ensuring they have the flexibility to collect information on new and rapidly-changing causes of death, such as emerging infectious diseases, deaths due to natural disasters, and drug overdoses, as well as collecting geocoded information to better measure the spread of disease in real time.
- Linking and integrating data reporting systems to receive and process information more efficiently, reduce burden on local data providers, and analyze and release statistics faster.
- Upgrading its computing technology and capacity to protect the confidentiality and security of NCHS’s data while improving speed and quality.
- Expanding its use of machine learning and artificial intelligence to spot trends in Americans’ health earlier. These technologies could allow NCHS to automate the coding of deaths of high public health interest such as drug overdose deaths, emerging infectious diseases, deaths due to natural disasters, and infant and maternal deaths, which are currently coded manually.

For more information, visit www.friendsofnchs.org or email Julia Milton, Chair (jmilton@cossa.org).
• Improving external users’ access to public and restricted NCHS data by enhancing data visualization and usability and piloting the use of remote access to restricted NCHS data files.

Even under a tightly constrained budget, NCHS has pioneered innovative new techniques to get the most value out of every taxpayer dollar. Over the past several years, NCHS has closed the gap between data collection and publication for leading causes of death, resumed official estimates of maternal mortality after over a decade, implemented literal text analysis to identify the drugs most frequently involved in overdose deaths, and executed a redesign of the Health Interview Survey to reduce the burden on respondents. Yet, these achievements only serve to highlight how far additional investment in NCHS would go towards helping the agency rise to the challenges it faces.

We thank you again for your continued support of NCHS’s essential data and statistics and encourage to you make sustained investments in how we measure our nation’s health. We urge you to support a funding level of at least $189 million for NCHS in FY 2021.

Friends of NCHS
1,000 Days
Academic Pediatric Association
Academy of Nutrition and Dietetics
AcademyHealth
Advocates for Better Children's Diets
American Academy of Pediatrics
American Anthropological Association
American Association for Clinical Chemistry
American Association for Dental Research
American Association of Colleges of Nursing
American Association of Colleges of Pharmacy
American Association on Health and Disability
American College of Clinical Pharmacy
American College of Obstetricians and Gynecologists
American Educational Research Association
American Heart Association
American Osteopathic Association
American Pediatric Society
American Psychological Association
American Public Health Association
American Society for Nutrition
American Society on Aging
American Sociological Association
American Statistical Association
Asian & Pacific Islander American Health Forum
Association of Maternal & Child Health Programs
Association of Medical School Pediatric Department Chairs
Association of Population Centers
Association of Public Data Users
Association of Schools and Programs of Public Health
California Center for Population Research at UCLA
Children’s Environmental Health Network
Commissioned Officers Association of the U.S. Public Health Service
Council of Professional Associations on Federal Statistics
Council of State and Territorial Epidemiologists
Data Coalition