



March 19, 2009

The Honorable David Obey
Chairman
Appropriations Subcommittee on Labor,
Health and Human Services, Education
and Related Agencies
U.S. House of Representatives
Washington, DC 20515

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

Dear Chairman Obey and Ranking Member Tiahrt:

The National Center for Health Statistics (NCHS) is the nation's principal health statistics agency. Housed within the Centers for Disease Control and Prevention (CDC), it provides critical data on all aspects of our health care system. Despite recent budget increases, funding levels continue to threaten the collection of vital information. To address this problem, the Friends of NCHS recommends a FY 2010 funding level of at least \$137.5 million for the agency, with bolus funding of \$15 million to support states as they modernize the vital statistics system. This funding will put the agency on the path to a base budget of \$175 million by 2013.

NCHS is the canary in the health system coal mine, providing advance warning of health care trends and data that are essential for public health planning and health policymaking. NCHS collects data on chronic disease prevalence, health care disparities, emergency room use, teen pregnancy, infant mortality, causes of death, and rates of insurance to name a few. These data are used by the Census Bureau in evaluating its data and informing its population estimates and projections; by the food and business community in developing nutrition fortification policies and marketing strategies; by state and local governments and public health officials; by federal policymakers; and by demographers, epidemiologists, health services researchers, and other scientists. The health data collected by NCHS are an essential part of the nation's statistical and public health infrastructure, as demonstrated by the breadth of organizations participating in the Friends of NCHS.

Despite recent funding increases secured through your leadership, NCHS continues to feel the effects of long-term underinvestment, forcing the agency to undermine, eliminate, or further postpone the collection of such vital information to the point where key data users now question whether NCHS itself is in good health. Specifically:

- Starting April 2009, NCHS will purchase from states through the National Vital Statistics System only “core items” of demographic birth and death data. Nearly all data items that are routinely used to monitor maternal and infant health, such as use of prenatal care, smoking during pregnancy, medical risk factors, and educational attainment of parents, would be considered “enhanced data items” and would not be collected from all states. As a result, our ability to monitor and track select *Healthy People 2010* objectives—including those related to Maternal and Child Health, Tobacco Use, and Occupational Safety and Health—will be compromised.
- The sample size for the National Health Interview Survey (NHIS), which has monitored trends in illness, disability, and health insurance coverage for over 50 years, has been cut in half. Such cuts jeopardize data on health insurance coverage at a time when policymakers need these data to formulate and evaluate health system changes. These cuts will also have significant adverse effects on our ability to understand the health status of minority groups and health disparities at a time when our society becomes increasingly diverse.
- The Nursing Home Survey, which was last conducted in 2004, has been postponed indefinitely. Further delays in the collection of these essential data will prolong our understanding of the provision and financing of long-term care as more and more aging and disabled Americans seek care in these sites of service.
- The National Hospital Discharge Survey, which has been conducted annually since 1965, will not be fielded in 2009 due to these budget constraints. Doing so will mean no new data on the characteristics of inpatients discharged from U.S. hospitals, e.g., average length of stay and rates of surgical and non-surgical procedures by age, race, and gender. In addition, work has been suspended indefinitely on the survey redesign, which would provide a wider range of data to reflect changes in health care delivery.

Without a budget increase in FY 2010, NCHS may be forced to implement other cuts, including:

- Deeper cuts to the NHIS sample, or taking the survey out of the field altogether.
- Reducing by half its National Health and Nutrition Examination Survey (NHANES) sample, eliminating the practice of oversampling of minority populations, or taking NHANES out of the field. Doing so would severely limit or eliminate the only national source of information on a range of health measures, including obesity, diabetes, and heart disease, among others.
- Postponing the Home Health and Hospice Survey, further limiting our understanding of long-term and end-of-life care.

As you prepare the FY 2010 Labor-HHS-Education Appropriations measure, we respectfully ask that you consider providing NCHS with **\$137.5 million** as a down payment toward a base funding level of \$175 million in 2013. NCHS needs this funding to restore these and other data collection efforts and to revise, pretest, and plan data collection activities for future calendar years.

In addition, we respectfully request that you provide NCHS **\$15 million in bolus funding** to support the states and territories as they implement the 2003 birth certificates and electronic systems to collect these data. Future supplemental funding will be required to implement the 2003 death certificates in all states and complete the automation of data collection. Today only about half of the states and territories use the 2003 birth or death certificates to collect “enhanced” vital statistics. Fewer states collect both, and even fewer do so electronically (see attached list). The Friends greatly appreciate that through your leadership early versions of the American Recovery and Reinvestment Act in the House and Senate included \$40 million for this infrastructure development; we were disappointed that it had to be eliminated from the final package.

At a time when you, your congressional colleagues, and members of the new administration are considering major health reform, NCHS’s data will provide the data you need to improve health and health care. The Friends thank you for your ongoing support of NCHS and look forward to helping you further strengthen the agency.

The Friends of the NCHS is a coalition of over 200 organizations that want to ensure the agency’s continued vital role in monitoring our nation’s health. For more information on the Friends of NCHS, contact David Helms with the Coalition for Health Services Research at 202.292.6700 or e-mail at david.helms@academyhealth.org.

Sincerely,

Advocates for Better Children's Diets
Alliance for Academic Internal Medicine
American Association for Health Education
American Association for the Study of Liver Diseases
American Academy of Pediatrics
American Association for Dental Research
American Association for Respiratory Care
American Association of Colleges of Nursing
American Association of Colleges of Pharmacy
American College of Clinical Pharmacy
American College of Preventive Medicine
American Dental Education Association
American Dietetic Association
American Gastroenterological Association
American Heart Association
American Osteopathic Association
American Psychiatric Association
American Psychological Association
American Public Health Association
American Society for Nutrition
American Statistical Association
American Thoracic Society
Aplastic Anemia & MDS International Foundation
Asian & Pacific Islander American Health Forum

Association of American Medical Colleges
Association of Population Centers
Association of Public Health Laboratories
Association of Schools of Public Health
Association of State and Territorial Dental Directors
Association of State and Territorial Health Officials
Association of State & Territorial Public Health Nutrition Directors
Association of Women's Health, Obstetric & Neonatal Nurses
Cincinnati Children's Hospital Medical Center
Coalition for Health Services Research
Council of Professional Associations on Federal Statistics
Consortium of Social Science Associations
Cystic Fibrosis Foundation
Emergency Medicine Network
Fidelity National Financial
General Mills Bell Institute of Health & Nutrition
Institute for the Advancement of Social Work Research
Johns Hopkins Bloomberg School of Public Health
March of Dimes
Marion County Health Department, Indianapolis, Indiana
Marketing Research Association
Maryland Department of Health and Mental Hygiene
National Association for Public Health Statistics and Information Systems
National Business Coalition on Health
National Campaign to Prevent Teen and Unplanned Pregnancy
National Coalition for LGBT Health
National Coalition of STD Directors
National Health Council
National Hispanic Medical Association
National Osteoporosis Foundation
Oklahoma State Department of Health
Population Association of America
Research!America
Service Employees International Union
Southeast Michigan Census Council
State and Territorial Injury Prevention Directors Association
University of Florida College of Public Health and Health Professions
University of North Texas Health Science Center School of Public Health
Well Spouse Association