

Board of Scientific Counselors  
National Center for Health Statistics  
Coordinating Center for Health Information and Service  
Centers for Disease Control and Prevention

September 18-19, 2008

Minutes

NCHS

3311 Toledo Rd.

Hyattsville, MD 20782

All attendees are listed in Attachment 1.

Thursday, Sept 18, 11:00 AM:

Welcome: Dr. Irma Elo, BSC Chair welcomed new BSC members and Drs. Tanja Popovic and Steve Solomon from the Coordinating Center for Health Information and Service (CCHIS). Dr. Elo proposed--and the BSC agreed by acclamation--to form two subcommittees. One would look at the Vital Statistics System--where it is now and how to move it forward for next 10-20 years. BSC member Dr. Steve Schwartz volunteered to chair the committee, Kathy Wallman will participate as ex-officio member; other members are Drs. Holly Hedegaard and Jim Lepkowski. Target date for group to report is the June 2009 National Association for Public Health Statistics and Information Systems (NAPHSIS) meeting. The second committee would look at core NCHS mission and what is needed over the next 20 years and what NCHS is doing to get there. BSC member Dr. Mike O'Grady volunteered to chair this group, consisting of Drs. Graham Kalton, Ron Angel and Lynn Blewett, with Dr. Elo serving as ex-officio member. Dr. Elo stated that she would be replying to NAPHSIS letter, by stating that the BSC shares their concerns about the NCHS budget. She'll draft a response and circulate for comments before sending.

Dr. Ed Sondik, Director NCHS, updated the committee on NCHS activities since the last meeting. (See PowerPoint.)

NCVHS Update: Dr. Bill Scanlon, liaison from the National Committee on Vital and Health Statistics (NCVHS) reported on NCVHS activities. Harry Reynolds is the new chair of NCVHS. NCVHS will take stock of where they are and where to proceed. The theme of discussion at the NCVHS meeting was Health IT--what do we want from medical records and what will it take to get there, and the balance between privacy and access. Dr. Scanlon noted overlap of interests between the BSC and NCVHS--including their concern about funding of the vital statistics system.

NHANES DNA: Dr. Madans presented an update on the status of discussions regarding the NHANES DNA data availability. (See PowerPoint.) Dr. Popovic announced that on Sept 17, funding was approved for the Atlanta Research Data Center (RDC). Dr. Popovic emphasized the importance of releasing the DNA data. Discussion followed about risk vs. benefits of data release. Dr. Ken Prewitt asked about possibility of stripping race/ethnicity information when providing access to the DNA data. The BSC members expressed great concern about importance of protecting confidentiality and the consensus of the BSC was that the data be made available only through a very controlled arrangement through the RDC. BSC members also said it wasn't a good idea to change the NHANES consent documents (as a way to try to make it easier to release DNA data).

Long Term Care Program Presentation: Dr. Lauren Harris-Kojetin, Chief of the Long-Term Care Statistics Branch (LTCSB) presented an overview of her program which is the next program to be reviewed. (See PowerPoint.)

Comments by the BSC Liaisons to LTCSB Review: Dr. Graham Kalton asked to what extent we should consider un-registered homes providing long-term care as a part of this review/program? He would also

like to know more about users and uses of data to help determine what the periodicity of these surveys should be. If analysts are using surveys to make comparisons from one period of time to another, should the same facilities remain in the sample? We should find out why "chains" have lower response rates in NCHS surveys, and then develop strategies to increase participation based on what we find out. We should investigate other modes of data collection, such as the web. Linkages among the health care surveys will be valuable and a follow-up over time would provide a longitudinal dimension. There's a risk of being dependent on getting funds from collaborators.

Dr. Mike O'Grady raised the issue of public vs. private good: industry could pay for some items that they in particular care about. Could the program use a contractor for a clinician instead of hiring clinician on staff? Dr. Scanlon raised the question about what we want to know about long term care and how will these surveys help us find out. There are 2 very different types of long term care user populations-- disabled temporarily vs. people incapacitated permanently. We should think about possible ways to develop interactions between these surveys and the National Institute on Aging (NIA) surveys.

BSC Website: Dr. Virginia Cain demonstrated the improvements that have been made to the BSC website. [http://www.cdc.gov/nchs/about/bsc/bsc\\_index.htm](http://www.cdc.gov/nchs/about/bsc/bsc_index.htm)

National Health Interview Survey (NHIS) Program Review Report: Dr. Robert Hummer, chair of the NHIS review panel, presented the results of the review ([http://www.cdc.gov/nchs/about/bsc/bsc\\_reviews.htm#NHIS](http://www.cdc.gov/nchs/about/bsc/bsc_reviews.htm#NHIS)). The review committee all agreed that the data from NHIS are vital and commended the program for the quality of the science, the commitment to objectivity and to the "greater good". He said NHIS was the "gold standard" for large in-person household surveys.

Program response: Dr. Jane Gentleman, Director of the Division of Health Interview Statistics thanked the review panel for the review and report. She concurred with many of the comments and recommendations in the report. Census costs are going up too much; sample cuts don't save much: \$23M for whole sample and \$18M for half of the sample; more state data and more methods research are desirable.

Comments by the BSC Liaisons to the NHIS Review: Dr. Tom Koepsell commented that the panel had done an excellent job. He began with few comments on the process of the review: 1) it is important to get comments from staff before site visit--that worked well; 2) the background material prepared by DHIS staff was excellent; 3) it is good to have 2 liaisons from BSC working with the panel since one wasn't always available; 4) he recommended that early drafts of the committee report go to the liaisons to ensure that the review is on track. Dr. Koepsell then moved on to address the content of the review: 1) strategic planning process should help determine how precise survey results have to be, which will determine how big the sample size really needs to be; 2) the review raised many issues such as what changes should be considered in the way the data are collected? Is there any way to combine some phone and in-person interviews? Should NCHS continue to contract with the Census Bureau for data collection? Ideally NCHS would have resources to devote to answering these questions. If outsiders make these decisions, there are likely to be conflicts of interest; it is good that NCHS's ORM is involved in looking at methodological issues.

Dr. Lynn Blewett stated that all the recommendations were good. Her concern centered on what are the priorities among the recommendations? For example, is strategic planning most important? How to balance the need to be policy relevant and also work on methodological improvements? Both require different skill sets. State-level data are critical. A Wisconsin survey, similar to the NHIS, may be funded by the Robert Wood Johnson Foundation. NHIS should look into partnering with the Wisconsin survey team. NHIS needs more resources. Strategic planning and NHIS/NHANES redesign must go hand-in-hand.

Discussion: Dr. Elo commented on the extensive overlap with NHIS and NHANES issues. She suggested that when a redesign is considered for merging the surveys members of both review panels should be involved in the discussion. Dr. Popovic said CDC can make the NHIS data more visible in CDC

briefings before Congress. Dr. Prewitt told Dr. Popovic how important the NHIS data are. Dr. Lepkowski emphasized the need to shift from external unstable support but remain connected to users and that the report should state that. The pricing algorithm should be clarified, e.g. how are costs determined for collaborators? If the NHIS and NHANES are integrated, the number of vendors able to carry out the survey will be limited. Currently 20% of interviews are done by phone and research is needed on how well this works, but there may be cost savings to combining phone and face-to-face interviews (while still using addresses for sample frame). The DHIS should consider value of the Behavioral Risk Factors Survey as a part of the NHIS strategic plan. Dr. O'Grady stated that since there was not enough money for everything, the program needed to prioritize. In his view the NHIS priorities should be 1) strategic planning and 2) methods research which is critical even if policy makers don't realize it, e.g. race/ethnicity issues. NCHS does not have money for state estimates and it's not realistic. He reiterated the need to determine the funding algorithm and questioned whether collaborators paid incremental costs only. He encouraged DHIS to think about who are their key stakeholders and to beware possible conflict of interest but still include outside people in discussions. Census is better at marketing their numbers on health insurance than NCHS. He cautioned DHIS to be realistic; NCHS doesn't have money for biomarkers. In sum, DHIS really needs strategic planning and priority setting. Dr. Prewitt raised the point that when doing strategic thinking, NCHS does need to consider state and congressional district stakeholders. The BSC discussed the pros and cons of the NHIS becoming a Census Bureau Title 13 survey. NHIS is now conducted under Title 15. Title 13 would have the advantage of allowing NCHS to use the Census Bureau's Master Address File. Under Title 13, however, even though an NHIS public use microdata file would be created and disseminated, there would be limitations on access by NCHS data users to the microdata generated from the survey. The BSC raised the question of what is the dollar cost of duplicate listing. There's no logic for keeping address files protected; NCHS shouldn't give up on access issue. The BSC asked that the report flesh out the issues of Title 13; work on logic between address file vs. access issues. Dr. Kalton stressed that the report should make it very clear that if master address file would be available, it'd be incredibly valuable across government surveys. Dr. Elo emphasized the importance of putting state identifiers on file. Dr. Kalton suggested that states could consider buying in if they want to add sample for their state.

Redesign Update: Dr. Jennifer Madans, NCHS Associate Director for Science, discussed the NCHS plans to consider an integrated health survey that would include a large survey component and a physical examination component. The topic is broader even than NHIS and NHANES. There is a confluence of events regarding the NHANES and NHIS contracts in 2013 that make it a good time to consider the possibility of a merged survey. Several issues need to be considered in thinking about a merge: 1) technical sample design issues; 2) content issues--no real core content on NHANES; 3) how much overlap should there be in content of the two surveys. Dr. Kalton suggested looking at Canada surveys for help with design--where different groups of people move in and out of the surveys. The BSC suggested including a couple of people from the NHIS NHANES review panels for ongoing look at these redesign issues.

Agenda Items for next meeting: The following ideas were suggested for the next BSC meeting in January: 1) NHANES review report; 2) update on redesign issues, 3) an update on vital statistics working group; 4) a update from DNA meeting on November 5, 2008; 5) a report on the CDC BSC chairs meeting Dr. O'Grady will attend in Atlanta at end of October; 6) a report on Healthiest Nation Workshop September 16-17, 2008; 7) an update by Dr. Sondik on the impact of election results on NCHS; 8) an update on BSC website.

The meeting was adjourned at 1:30 P.M.

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Irma T. Elo, Ph.D.  
Chair, NCHS BSC

Attachment 1

<b>Attendance at BSC meeting: September 18, 2008</b>	
<b>Board Members</b>	<b>Other Attendees</b>
Irma Elo, Chair Virginia Cain, DFO Ronald Angel Lynn Blewett Llewellyn Cornelius Holly Hedegaard Graham Kalton Thomas Koepsell James Lepkowski Michael O'Grady Kenneth Prewitt Steve Schwartz Bill Scanlon Katherine Wallman	Ed Sondik Jennifer Madans Margo Schwab Heather McAdoo Cliff Johnson Alvan Zarate Catherine Simile Sandy Smith Linda Bilheimer Paul Coates Eve Powell-Griner Bob Anderson Len Horning Brenda LaRochelle Debbie Jackson Stephen Blumberg Meena Khare Pauline Mendola Jim Craver Charlie Rothwell Peter Meyer Rashida Dorsey Susan Schober Melonie Heron Nicole Cooper Lisa Dwyer Alan Simon Carol DeFrances Adrienne Jones Paul Beatty Jill Ashman Anne Mann Fred Decker Nancy Sonnenfeld Iris Shimizu Nathaniel Schenker Ellen Kr Brenda Wolfrey

**Attendance at BSC meeting: September 19, 2008**

Board Members	Other Attendees
<p>Irma Elo, Chair Virginia Cain, DFO Ronald Angel Lynn Blewett Llewellyn Cornelius Holly Hedegaard Graham Kalton Thomas Koepsell James Lepkowski Michael O'Grady Kenneth Prewitt Steve Schwartz</p>	<p>Ed Sondik Linda Bilheimer Eve Powell-Griner Marcie Cynamon Dogan Eroglu Jane Gentleman Monroe Sirken Iris Shimizu Stephen Blumberg Catherine Simile Manfred Stommel Jennifer Parker Cliff Johnson Paul Coates Pauline Mendola Chris Cox Kim Lochner Gloria Wheatcroft Lisa Mirel Michael Martinez Debbie Blackwell Pei-Lu Chin Missy Jamison Susan Jack Lois Fingerhut Van Parsons Sam Notzon Julia Holmes Jane Sisk Chris Moriarity Anne Stratton Medell Ford Brenda LaRochelle Susan Schober Sandy Smith Myron Katzoff Nathaniel Schenker Larry Cox Meena Khare Margo Schwab</p>