December 11, 2007

Julie Louise Gerberding, M.D., M.P.H.
Director
Centers for Disease Control and Prevention
1600 Clifton Rd.
Atlanta, GA  30333

Dear Dr. Gerberding:

We write to fulfill our responsibility as the Board of Scientific Counselors (BSC) of the National Center for Health Statistics (NCHS), CDC/HHS. We are charged with reviewing the programs of the NCHS to ensure that they are meeting the Nation’s needs. We also are charged to inform you when, in our judgment, a situation arises that fundamentally threatens the availability of rigorous, unbiased, statistical measures of the nation’s health, and do so with this letter.

Given the many pressing issues confronting you and the Centers for Disease Control and Prevention as well as the Department of Health and Human Services, it is understandable that health statistics might not make the “short list” of matters requiring timely attention. Yet you and the leadership of the Department do appreciate that statistical evidence is the basis on which new policies are designed and current policies are evaluated. They provide the early warning on new health threats, such as obesity. In ways not imagined a decade ago, information provided by NCHS, including vital statistics and health measures more generally, are essential to government activities well beyond the customary borders of health policy. They extend now to issues of Homeland Security. We also look to the continued development of data systems linking surveys, claims reports and administrative records in producing your vision of a new era of health information technology.

We understand that Congress has recommended an increase for NCHS in Fiscal Year 2008. However, based on our program reviews, we are concerned that this increase is not adequate for the NCHS even to continue its current programs, let alone develop the new programs needed to provide the health information essential for planning for the nation’s future needs. The required data are being seriously compromised, and in limited instances even eliminated, by the familiar “death by a thousand cuts” – a freeze one year, a cost increase the next. The attached chart illustrates this reality. When the budget remains flat and the data collection costs increase, the effect is a cut in the statistical programs. As a result sample sizes have been reduced for the National Health Interview Survey (NHIS); there are not sufficient funds to purchase a full year of national vital statistics data; and funds are also limited for projects, such as research on appropriate quality control, evaluation of the NCHS programs’ impact, and development of web-based tools for data dissemination.
The Board of Scientific Counselors appreciates that programs across the government have to share the burden of a tight budget. The Board also acknowledges your past support of the NCHS budget. Yet we would fail in our responsibilities if we did not forcefully state that key health statistical programs cannot be sustained with the current level of funding. The Board recommends that you develop the current budget plans for NCHS with these considerations in mind, so that the nation will continue to have the necessary unbiased rigorous information needed to address current and future needs. It is the Board’s judgment that at present the integrity of this information is threatened.

On behalf of the Board of Scientific Counselors of the National Center for Health Statistics,

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Irma T. Elo
Chair, Board of Scientific Counselors