November 30, 2020

Dear President-Elect Biden:

We, the founders and supporters of the *Data: Elemental to Health* campaign—a multiyear effort to modernize our nation's public health data infrastructure—congratulate you on being elected President of the United States. Your election has come at a pivotal moment in the ongoing COVID-19 pandemic and our nation is in need of strong leadership to control the virus and save American lives. In your immediate steps to end this crisis, it is imperative that you consider the need for better, faster, and more complete public health data while also building stronger public health data infrastructure that can to respond to future threats.

First, we ask for your support of the Centers for Disease Control and Prevention (CDC). CDC, the nation's leading public health agency, is charged with protecting the health of Americans. CDC is at the forefront of both solving the current COVID-19 crisis and preparing our public health system to respond to future threats. The only way to ensure the U.S. emerges from the ongoing pandemic is to appoint expert leaders to CDC and empower them to implement an evidence-based response to this crisis. Unfortunately, over the past few months, CDC's role in the response has been marginalized and its scientific expertise questioned. We encourage you to immediately restore the reputation of CDC, both domestically and abroad, and install leadership with the expertise to guide our nation through the pandemic.

COVID-19 has exposed deadly gaps in our nation's public health data infrastructure. Now, more than ever, it is critical for CDC to have strong leadership and a national public health surveillance system infrastructure that detects and facilitates the immediate response to and containment of emerging health threats. There are five key pillars necessary to transform the nation's public health surveillance system to deliver rapid real-time information. Each of these pillars plays a key role in moving the United States from an outdated and burdensome system to a 21<sup>st</sup> Century public health data system that provides accurate, instantaneous and complete data.

The *Data: Elemental to Health* campaign aims to secure federal funding for these pillars at the CDC and state, local, tribal, and territorial health departments. To build coordinated and expanded public health surveillance capacity, the public health data infrastructure requires a seamless and interoperable framework that automatically draws information from the health care system and reports it to public health agencies. Thus, we urge you to support and preserve all goals of the public health Data Modernization Initiative (DMI) at the CDC.

The five core data systems (the pillars) of the U.S. public health surveillance enterprise that require modernization now to protect the health security of all Americans are as follows:

- The National Notifiable Disease Surveillance System (NNDSS) collects vital individual case investigation data at state, local, tribal, and territorial public health agencies from hospitals, physicians, laboratories, and other sources, then sends these data to CDC to create a national understanding of disease burden. This information is used to respond to public health outbreaks and is the first line of health security defense.
- 2. *Electronic case reporting (eCR)* is the automatic, seamless submission of disease reports directly from electronic health records at clinical care organizations to state, local, tribal, and territorial

public health departments. eCR dramatically improves disease/condition reporting and reduces physician burden in fulfilling their legal responsibility to report, which leads to early implementation of public health interventions and limits further spread of infectious agents.

- 3. **Syndromic surveillance** provides near real-time data on every hospital emergency department visit for hourly detection and continuous monitoring of community health incidents such as the impact of natural disasters (including hurricanes), pandemics, and opioid overdoses. It gives public health professionals the ability to monitor the pulse of the community and identify health threats as they emerge.
- 4. *Electronic Vital Records System* is a national system of 57 vital records jurisdictions that provide secure electronic collection of birth and death data from hospitals, funeral homes, physicians, and medical examiners. It allows for timely and accurate reporting of birth outcomes and causes of death, which serve to monitor and respond to public health crises as they arise in communities, including reducing preventable deaths and infant and maternal mortality rates.
- 5. Laboratory Information Systems are the backbone of how laboratory data is collected, managed, and shared to inform public health decision-making. The Laboratory Response Network (LRN) is comprised of specialized laboratories that can respond to biological/chemical threats and other public health emergencies with advanced testing capabilities. Electronic Laboratory Reporting (ELR) is the seamless reporting of results from private and public laboratories to disease detectives and investigators in state, local, tribal, and territorial public health departments.

Congress has provided \$550 million in foundational funding for the Data Modernization Initiative (DMI) between Fiscal Year 2020 appropriations and funding through the Coronavirus Aid, Relief, and Economic Security (CARES) Act. Already, we have seen CDC move quickly to invest this money in their infrastructure to help in our immediate response and serve us in the long term. <u>CDC has begun targeting investments across three priority areas</u>: data sharing across the ecosystem; enhancing CDC services and systems for ongoing data modernization; and new standards and approaches for public health reporting. By investing in these three areas, CDC is working toward a system that can be scaled nationwide and adapted as needs and technology evolve.

The initial \$550 million in funding for DMI was a critical investment, but will not be enough to modernize and maintain our public health surveillance system. The House of Representatives passed funding legislation that included an additional \$450 million for DMI, a second essential piece of the foundational investment for the program. We continue to urge Congressional leadership to include these resources in the final FY 2021 appropriations legislation and to continue sustained investments through regular appropriations. States and localities will not be able to adopt fully upgraded public health data systems with a one-time injection of federal funds. For the current system to truly evolve, the federal government must commit to long-term funding to complete essential system upgrades both federally and at the state and local levels and annual sustained funding to support ongoing maintenance as technology improves. The *Data Elemental to Health* campaign advocates for robust, sustained funding for the DMI well into the future. We request that your administration prioritize data modernization in the FY 2022 budget and beyond, starting with \$100 million in funding in FY 2022.

COVID-19 has made it clear that our antiquated public health data systems are not up to the task. We need an integrated, high-speed, networked health system—from laboratories to health care facilities to

public health authorities—with fast and reliable data in order to protect Americans from health threats. Modernization is not just network upgrades; it is a commitment to building a world-class data workforce and data systems that are ready for the next public health emergency. Significant investments must be made to build real-time, automated, electronic, enterprise public health data systems to help bring an end to the pandemic and protect our nation's long-term health.

We look forward to working with your administration and the CDC to end the ongoing crisis and to make overdue updates to our nation's public health data infrastructure. We respectfully request a meeting with a member of your transition team to discuss public health data modernization. Meghan Riley (mriley@dc-crd.com) is available to schedule a meeting.

Sincerely,

Association of Public Health Laboratories Association of State and Territorial Health Officials Council of State and Territorial Epidemiologists Healthcare Information and Management Systems Society (HIMSS) National Association for Public Health Statistics and Information Systems National Association of County and City Health Officials