May 7, 2018

The Honorable Tom Cole
Chair
House Appropriations Committee
Subcommittee on Labor, Health and Human Services and Education
Washington, DC 20515

The Honorable Rosa DeLauro
Ranking Member
House Appropriations Committee
Subcommittee on Labor, Health and Human Services and Education
Washington, DC 20515

Dear Chairman Cole and Ranking Member DeLauro,

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 public health and the health care system through data cooperatives and surveys that serve as a gold standard for data collection around the world. As you prepare the Fiscal Year (FY) 2019 Labor, Health and Human Services and Education Appropriations bill, the undersigned members of the Friends of NCHS urge you to protect NCHS’s budget from further cuts and provide the agency with $175 million in budget authority in FY 2019, $15 million more than FY 2018.

NCHS collects data on chronic disease prevalence, health 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 informing its population estimates and projections; by the U.S. Department of Agriculture in developing nutrition policies that guide multibillion dollar federal food assistance programs; by state and local governments and public health officials; by federal policymakers; and by demographers, epidemiologists, health services researchers, and other scientists. In the last year, critical research findings, including the number of deaths attributable to the opioid epidemic, decreased life expectancy in the U.S., and the percentage of children affected by head injuries, including concussions, were informed by NCHS data. NCHS health data are an essential part of the nation’s statistical and public health infrastructure.

We greatly appreciate Congress’s longstanding leadership in securing steady and sustained funding increases for NCHS, including efforts to modernize the National Vital Statistics System—moving from paper-based to electronic filing of birth and death statistics—with a $5 million increase in FY 2016. Because of your efforts, NCHS has funded states and territories to speed the release of birth and death statistics, including infant mortality and prescription drug overdose deaths. In fact, the percentage of mortality records reported within 10 days has increased from 14 percent in 2012 to almost 50 percent in 2016.

Nevertheless, since 2011, NCHS has been essentially flat funded, greatly diminishing the agency’s purchasing power. Current base funding remains below FY 2010 levels, adjusted for inflation, and the agency does not expect to ever recover the roughly $25 million in supplemental Prevention and Public Health Fund dollars it lost in 2013. NCHS also faces increasing costs on the horizon.
associated with state and vendor contracts and other infrastructure challenges related to survey redesign and systems improvements that will require additional resources far beyond current levels. Any cuts below the agency’s FY 2018 level, however seemingly minor, would have a demonstrably negative effect on the agency’s programs, survey data, and staff.

For example, if NCHS’s budget is reduced below its FY 2018 funding level, NCHS will need to consider eliminating or radically altering one of its two seminal surveys: the National Health Interview Survey (NHIS)—the principal data source for studying demographic, socioeconomic, and behavioral differences in health and mortality outcomes since 1957—or the National Health and Nutrition Examination Survey (NHANES), which has assessed the health and nutritional status of adults and children in the United States since the early 1960s. Despite making marginal adjustments to accommodate years of budget cuts, including reducing sample size and delaying necessary survey innovations, the agency cannot responsibly sustain these surveys if its funding level dips below the amount it received in FY 2018, $160 million.

Your leadership has helped NCHS rebuild after many years of underinvestment and stabilized the collection of essential health data. Cuts to NCHS’s budget now will only undermine progress made over the last decade. We urge you to protect NCHS’s budget from further cuts and to use additional resources the subcommittee will have in its FY 2019 allocation to provide the agency $175 million in FY 2019. We thank you for your ongoing support and look forward to helping you further strengthen the agency. For more information about this request, please contact Mary Jo Hoeksema, Chair, Friends of NCHS, at maryjo@popassoc.org.

Sincerely,

American College of Clinical Pharmacy (ACCP)
American Educational Research Association
American Society on Aging
Consortium of Social Science Associations
Society for Maternal-Fetal Medicine
Council of Professional Associations on Federal Statistics
NAPHSIS
Federation of Associations in Behavioral and Brain Sciences
AcademyHealth
Princeton University, Office of Population Research
CUNY Institute for Demographic Research
University of Michigan, Inter-University Consortium for Political and Social Research
American Society for Nutrition
American Association of Colleges of Nursing
American Statistical Association
American Heart Association
University of Washington, Center for Studies in Demography & Ecology
University of Michigan, Population Studies Center, Institute for Social Research
Power to Decide
Association of Public Data Users (APDU)
Commissioned Officers Association of the U.S. Public Health Service, Inc. (COA)
Council of State and Territorial Epidemiologists
American Association for Clinical Chemistry
American College of Obstetricians and Gynecologists
American Association for Dental Research
American Academy of Pediatrics
Center for Demographic and Social Analysis, University of California, Irvine
National LGBT Cancer Network
American College of Preventive Medicine
American Society for Clinical Pathology
Association of Schools and Programs of Public Health
American Association on Health and Disability
Association of Public Health Laboratories
Lakeshore Foundation
Safe States Alliance
American Society for Nutrition
Population Association of America
Association of Population Centers
March of Dimes
American Sociological Association
American Psychological Association
American Public Health Association
Association of Medical School Pediatric Department Chairs
Society for Pediatric Research
Academic Pediatric Association
American Pediatric Society
Pediatric Policy Council
American Academy of Pediatrics
Association of Maternal & Child Health Programs
1,000 Days
Academy of Nutrition and Dietetics
American College of Obstetricians and Gynecologists
California Center for Population Research at UCLA
University of Colorado at Boulder, CU Population Program