



# NATIONAL COMMITTEE ON VITAL AND HEALTH STATISTICS

March 1, 2009

Charles E. Johnson  
Acting Secretary  
U.S. Department of Health and Human Services  
Hubert H. Humphrey Building  
200 Independence Avenue, S.W.  
Washington, DC 20201

Dear Acting Secretary Johnson:

The American Recovery and Reinvestment Act of 2009 (ARRA) and President Obama's Health Reform plan recognize the critical importance of health care to our national well-being and the economy, placing increased emphasis on wellness, prevention and the need to better understand the health status of the population. The ARRA substantially increases our investments on health IT, comparative effectiveness and prevention and wellness initiatives.

To maximize the return on these investments in improving the population's health and increasing the value and efficiency of health care provision, it is essential that we have the capacity to measure their impacts in terms of quality, safety, efficiency, equity, accessibility and longevity. Adequate monitoring is crucial to assure accountability, as well as to guide future steps to enhance health and health care.

The National Committee on Vital and Health Statistics (NCVHS) has had longstanding concerns about the deteriorating capacity of the nation's health statistics enterprise. The resources to collect the necessary information to assess the performance and guide improvements in our health care system have not kept pace with the rising costs of producing basic information, let alone support the collection of sufficient information to fully assess and direct improvements in health care.

NCVHS recommends that adequate funding and resources be made available to assure a robust vital statistics and population health information infrastructure that can provide rigorous, unbiased, statistical metrics of the nation's health and health care.

In particular, the Committee recommends that funding be allocated from the ARRA to the following two areas:



- E-Vitals. An electronic vital records data collection processing and analysis system is at the core of a fully functional Nationwide Health Information Network (NHIN). The National Vital Statistics System (NVSS) is the oldest and most successful example of inter-governmental data sharing in public health. Each year, close to 7 million births and deaths are collected by 57 jurisdictions across the nation and provided to the National Center for Health Statistics. Investing now in electronic birth and death record systems to support the implementation of modern information systems and make them interoperable with electronic health records in hospitals and clinics that are part of NHIN will be an important way to achieve the ARRA's goals of a more efficient and more powerful health information infrastructure. Vital and health statistics projects are 'shovel-ready', and federal contracts already exist with states and other entities that can be used to ensure a speedy implementation start-up.
- Population-based surveys. One of the most critical ways to assess the health of our population and the effectiveness of the health care provided is through the national health surveys conducted by the National Center for Health Statistics, Agency for Healthcare Quality and Research and others. Over the past five years, we have seen a reduction in capacity to achieve these important efforts. It is not sufficient merely to reestablish our previous capacity for population-based surveys. We believe that effective monitoring requires an expansion of these efforts so that adequate information on vulnerable populations and states and localities will be available for:
  - Evaluating the impact of health reform and the role of health IT on communities, health disparities and the uninsured (e.g., through the National Health Interview Survey)
  - Baseline and monitoring data for comparative effectiveness (e.g., through the National Health Care Surveys and improved vital records data)
  - Monitoring impact of EHR adoption on the overall health of the nation and achieving health goals (e.g., through the National Health Interview Survey, National Health and Nutrition Examination Survey, the National Survey on Ambulatory Care, and Medical Expenditures Panel Survey)

Without the additional funding from the ARRA, the nation risks further deterioration of the national vital statistics system, which has been the backbone of public health data for decades, and having inadequate population-based information.

While funding from the ARRA is essential, it should be seen as a down payment to creating the capacity to effectively monitor health and health care in the nation. NCVHS recommends that stable adequate long-term funding for vital statistics and population-based information collection needs to be assured.

We believe these recommendations are important to building the core infrastructure for promoting and assessing progress in health reform.

Sincerely,

/s/

Harry L. Reynolds, Jr.  
Chairman, National Committee  
On Vital and Health Statistics

cc:

James Scanlon, ASPE