National Center for Health Statistics

Priorities for the 117th Congress and 2021-2025 Administration

Mission, Scope, and Products

The mission of the National Center for Health Statistics (NCHS) is to provide statistical information that will guide actions and policies to improve the health of the American people. As the Nation's principal health statistics agency, NCHS leads the way with accurate, relevant, and timely data. Founded in 1960, after combining the National Office of Vital Statistics and the National Health Survey, NCHS is the fifth largest in budget among the Office of Management and Budget's 13 principal federal statistical agencies. The NCHS's combined statistics and assessment budget lines account for about $160 million annually. The NCHS is currently authorized through the Public Health Service Act (Section 306). Its work covers a wide spectrum of topics, which allows NCHS to provide publications and data to policy makers, researchers and the public to:

- Document the health status of the population and important subgroups
- Provide mortality surveillance data to monitor emerging health threats
- Identify disparities in health status and use of health care services by race or ethnicity, socioeconomic status, region, and other population characteristics
- Provide changes in life expectancy for the nation by gender, race, and ethnicity
- Provide nutrition monitoring information for the nation
- Provide family growth and maternal and infant health outcomes
- Describe experiences with the health care system
- Monitor trends in health status and health care delivery
- Identify health problems
- Support biomedical and health services research
- Provide information for making changes in public policies and programs
- Evaluate the impact of health policies and programs

Opportunity: More statistics that are objective, timely and local

Policymakers and the American people are confronted with an ever-increasing amount of health data from an expanding number of public and private sources. The NCHS has provided objective, reliable health statistics for 60 years but currently lacks the resources to meet both the challenges of updating their existing national survey and data collection systems and linking them with the exploding availability of data to meet the demand for more timely and location-specific statistics. The NCHS is the trusted entity naturally positioned to put data in context and turn it into actionable information for policymakers and the public so that they better know the state of public health and healthcare in their community and throughout the nation.

Federal interest in evidence-based policymaking is also escalating, most notably with the 2019 enactment of the bipartisan Foundations for Evidence-Based Policymaking Act. The "Evidence Act" focused on the role of the federal statistical agencies, increasing the responsibility of NCHS within the CDC and throughout HHS.

Challenges

- The NCHS budget line has remained flat at $160.4M since FY16.
- NCHS needs to re-engineer its current surveys while keeping these surveys in the field to provide much needed data to the public, but does not have adequate resources to maintain its aging survey structure or develop a more nimble and responsive survey capacity.
- NCHS has demonstrated the benefit of linking data within NCHS, throughout HHS, and with other programs in other Departments such as HUD and the VA. However, these activities are done only when resources are available. Data linkage needs to become a major program activity of NCHS with the same visibility, expectations and support as its surveys and data systems.
- COVID-19 has demonstrated the need for more timely and responsive mortality data at the national, state and local level. The National Vital Statistics System, the oldest cooperative local, state and Federal data system in the nation, is the responsibility of NCHS. NCHS has drastically underfunded state and local systems to provide these data. Several states and all the Territories still have paper-based systems at the source and some states with electronic death registration systems do not have complete coverage or are using decades old technologies. Many medical examiners and coroners do not have automated case management systems and those that do can not share data with the electronic death registration systems and none of these systems can pull data from electronic health records of the decedent. Not only are the data collection systems inadequate but the provision of these data back to those who need to make time sensitive decisions is not made available in easily understood data visualization formats. NCHS's internal mortality systems also need to be updated with the use of AI technologies. For example, although it has automated coding systems, deaths due to COVID-19, drug overdoses, suicides, homicides, motor vehicle deaths, maternal and infant deaths all need to be hand coded, further delaying the availability of the data. Demonstration projects have shown that state and local systems can be very responsive if upgraded.
- NCHS needs to make electronic health records a primary source of measuring morbidity and related health care not just at the national level but at the state and local level. It has shown that this can be done on a small scale with a small budget but it does not have the systems capabilities or the funding to acquire and synthesize the data in an appropriate manner. This was another missed opportunity to provide necessary information at this time of national crisis.
- NCHS data is hard to find and hard to use by policy makers and frontline public health practitioners. There is inadequate use of data visualization and other technologies to make the data more impactful for immediate use.
- NCHS has inadequate internal IT support and needs to bring in highly trained IT staff to allow it to make better informed decisions on technology upgrades and IT contracting.

Priorities

- **Next Generation of Survey and Data Systems.** Some information can be obtained only through direct surveys. To complement and enhance its current surveys, NCHS seeks to:
    - Create an EHR-based platform to generate population estimates and create a single data repository for EHR data that results in less time spent on data processing and more time for analysis and provision of timely and detailed morbidity data
    - Combine the assets of NHIS and NHANES, while addressing response bias and growing requests for more detailed data; and
    - Improve data quality and timeliness within vital statistics by funding states to develop new electronic systems and helping states upgrade their registration systems as well as upgrade internal NCHS systems to support real time reporting and data dissemination for public health action at all levels of government
- **Data integration, linkage, data science.** NCHS plans to expand data linkage and integration. and is currently exploring broader use of synthetic data to ensure confidentiality while expanding access to linked files. NCHS is also considering data science methods such as web-based electronic panel surveys while accounting for their known biases.

- **Upgrading computing technology and capacity.** NCHS is expanding the use of cloud computing while considering NCHS's requirements for confidentiality and security. NCHS also plans to increase secure storage; upgrade data processing speed and quality; and expand its use of machine learning and artificial intelligence.
- **Improve accessibility and usability of data.** NCHS needs to redesign its website to improve data access, usability, and visualizations. Currently the NCHS site is organized by data system, but most of the world thinks by topic area. But it is difficult to find data on the NCHS website by topic area. The remote access system used by NCHS became obsolete. NCHS is working with the rest of the statistical community on remote access technology that can protect confidentiality in data that cannot be released.

Endorsing Organizations

American Statistical Association
Council of Professional Associations on Federal Statistics (COPAFS)
Consortium of Social Science Associations (COSSA)
Population Association of America (PAA)

Supporting materials

- https://www.cdc.gov/nchs/data/misc/legislation2014.pdf