August 31, 2021

The Honorable Patty Murray  
Chair  
Subcommittee on Labor, Health and Human Services, Education and Related Agencies  
Committee on Appropriations  
U.S. Senate

The Honorable Roy Blunt  
Ranking Member
Subcommittee on Labor, Health and Human Services, Education and Related Agencies  
Committee on Appropriations  
U.S. Senate

Dear Chair Murray and Ranking Member Blunt,

Thank you for your leadership and support for our nation’s public health infrastructure and workforce during the ongoing COVID-19 pandemic, and in particular, your support for public health data modernization both in regular appropriations and emergency funding bills. As you work to finalize the Senate Labor, Health and Human Services, Education and Related Agencies appropriations legislation for Fiscal Year (FY) 2022 our organizations ask that you continue to make public health a priority and provide significant increased investment in CDC’s public health data modernizations efforts as well as public health infrastructure overall.

The Data Modernization Initiative (DMI) at the Centers for Disease Control and Prevention (CDC) is a commitment to building the world-class data workforce and data systems that are ready for the next public health emergency. We are grateful to Congress for providing nearly $1 billion to date for CDC’s DMI through annual and supplemental appropriations. Now, we need robust, sustained, annual funding to ensure we are investing in public health systems and infrastructure, including at state and local health departments, that will keep pace with evolving technology and stand ready to combat any emerging threat to public health.

The DMI is helping to create a standards-based interoperable public health infrastructure, ensuring all systems can communicate and share data seamlessly with one another; advancing standards so that information can be stored and shared across systems; and facilitating complete and timely reporting so that our public health system has essential data on race, ethnicity, pregnancy status, treatments, and co-morbidities that are critical for achieving equity in public health response.

As we continue to battle the rapidly-evolving COVID-19 pandemic it has become even clearer that our public health data systems are in dire need of upgrades. The President recognized the need for increased funding by including an additional $100 million for CDC’s DMI in his FY 2022 budget request. The House of Representatives allocated $150 million for DMI. We respectfully request that you meet or exceed the House-passed level of $150 million for DMI in your forthcoming appropriations bill.
State and local public health departments represent the foundation of any response. We need to ensure they have the necessary staff and resources to protect our society from emerging threats. In addition to increased funding for DMI, the House-passed bill includes an important new funding line for public health infrastructure. The initial proposed $1 billion represents “a disease-agnostic source of funding to address mission-critical gaps in public health infrastructure nationwide.” We strongly encourage you to include this funding in the Senate bill as well.

COVID-19 will not be the last public health crisis to threaten our nation. We have learned many lessons from this pandemic, including that our public health infrastructure and data systems were not prepared to respond to a highly infectious, fast-moving virus. We need public health systems that are equipped to respond to this and any future public health threat. The way to achieve this is through long-term, sustained federal investments in public health infrastructure and data systems.

Again, we respectfully request that you provide at least $150 million for CDC’s DMI and $1 billion for public health infrastructure in Senate FY 2022 LHHS-Ed appropriations legislation. Thank you for your consideration of this issue that is so critical to our nation’s health. If you have questions or wish to discuss this further, please contact Erin Morton at emorton@dc-crd.com.

Sincerely

Association of Public Health Laboratories
Association of State and Territorial Health Officials
Big Cities Health Coalition
Council of State and Territorial Epidemiologists
Healthcare Information and Management Systems Society
National Association of County and City Health Officials
National Association for Public Health Statistics and Information Systems