2014 Accomplishments Shaping 2015 Priorities

NCHS Update for the Board of Scientific Counselors



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Director, NCHS

January 22, 2015



Welcome to New BSC Members

- Virginia M. Lesser, DrPH, Chair and Director, Survey Research Center, Department of Statistics, Oregon State University
- Wendy D. Manning, Ph.D., Professor, and Director, Center for Family and Demographic Research, Bowling Green State University
- Robert E. McKeown, Ph.D., FACE, Distinguished Professor Emeritus, Department of Epidemiology and Biostatistics, Arnold School of Public Health, University of South Carolina
- Trivellore E. Raghunathan, Ph.D., Director, Survey Research
 Center, Institute for Social Research, University of Michigan

ADMINISTRATIVE AND BUDGET UPDATES



NCHS Staff Updates

- Nat Schenker appointed as NCHS Deputy Director, starting in February.
- Susan Queen announced as the new Associate Director for the Office of Planning, Budget, and Legislation—anticipated by March.
 - Thank you to Jennifer Madans for serving as the Acting Director of OPBL.

Budget Update

- FY 2015 Health Statistics Appropriation: \$155,397,000 in Budget Authority – level with FY 2014 and consistent with the FY 2015 request.
 - Includes funding for administrative and business services through the CDC Working Capital Fund (About \$15 million of the Health Statistics appropriation went to the WCF in FY 2014).
- No funds received from the Prevention and Public Health Fund means that NHIS and NAMCS survey enhancements will discontinue in 2016, unless other funding is identified.
- FY 2016 President's Budget expected to release Feb. 2nd.

Other Administrative Updates

- Move to swing space to commence on January 22nd involving floors 2—5. Renovation of current space should be completed by August 2015.
- NCHS continues to operate under a monetary ceiling for all travel, and restrictions on the numbers of staff that can attend conferences, meetings and training.
- Planning for National Conference on Health Statistics in Summer 2015.

NCHS and the CDC Ebola Response

- To date, multiple NCHS staff have participated in CDC's Ebola response in various capacities.
 - 7 staff deployed/deploying to West Africa for epidemiology teams.
 - 2 served at quarantine station at Washington Dulles.
- NCHS will be called upon for additional staff as CDC continues to respond.

Countries with Widespread Transmission			
Country	Total Cases	Laboratory-Confirmed Cases	Total Deaths
Guinea	2799	2508	1807
Liberia	8278	3123	3515
Sierra Leone	10094	7766	3049
Total	21171	13397	8371

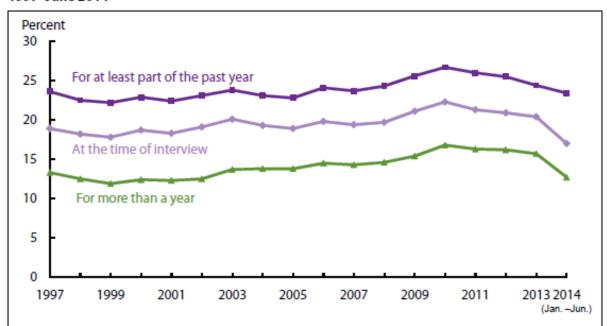
2014 SELECTED ACCOMPLISHMENTS



Provided timely access to data to monitor the Affordable Care Act

- January June 2014 National Health Interview Survey (NHIS)
 health insurance data released in December showed:
 - The proportion with exchange coverage increased from 1.4% (3.7 million) in the first quarter of 2014 (January–March) to 2.4% (6.3 million) in the second quarter of 2014 (April–June).
- Full year of data anticipated in June 2015.

Figure 2. Percentages of adults aged 18–64 who lacked health insurance coverage at the time of interview, for at least part of the past year, or for more than a year: United States, 1997–June 2014

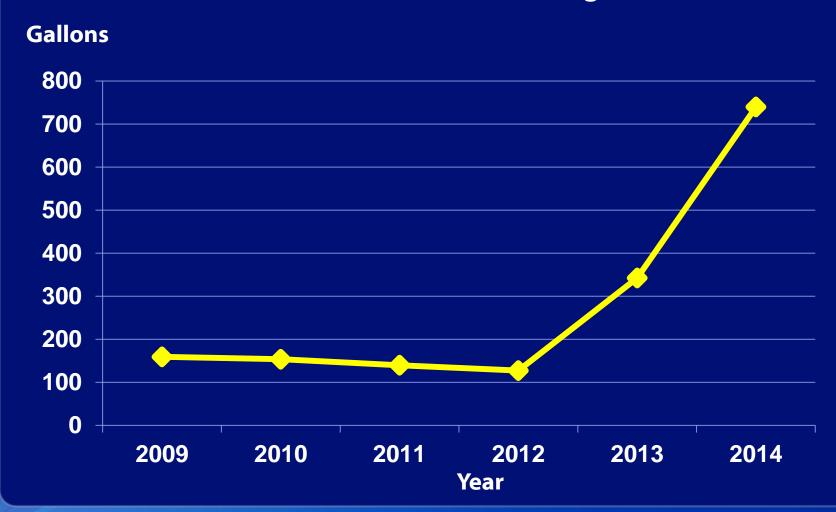


Major Timeliness Improvements for Vital Statistics

- The 2013 Preliminary Birth Report released in May 2014, within five months after the end of the data collection year the <u>earliest</u> that it has ever been released.
- In 2014, we released final mortality data for 2011, 2012 and 2013 data years—a significant staffing accomplishment.
 - 2013 mortality data marks the <u>first time</u> mortality data released within 12 months of the end of the calendar year in which data were collected.
 - Updated the National Death Index, thereby facilitating the work of health researchers seeking this information.
- Nationally in 2014, mortality data (primarily fact of death)
 was first reported to NCHS within 10 or less days for about
 31% of the deaths.

Innovations in Data Collections: 24-hour urine

Gallons of Urine Collected through NHANES



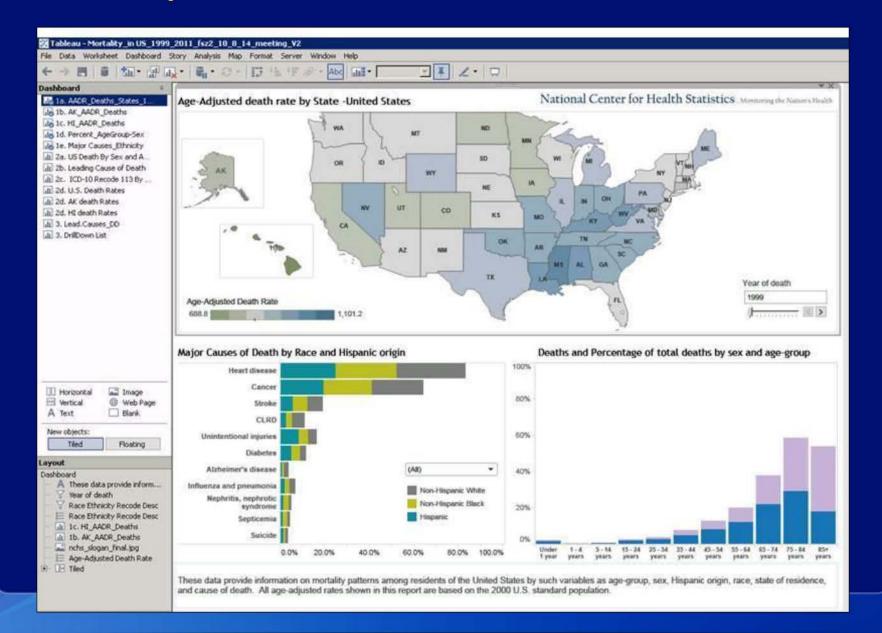
Innovations in Measure and Data Development

- Advances in data linkage
 - First time linkage between NCHS surveys and data from the Department of Housing and Urban Development.
 - New knowledge about approaches for improving linkage.
- Conducting research on combining information from multiple data sources. In particular, investigating how data from other data systems and web surveys, as well as "big data," might be used to enhance estimation based on NCHS data systems.
- New survey items for international comparison of functional status and disability.

Moving to Electronic Data Collections

- Laid the groundwork to move from manual data collection to data collection using EHRs for National Health Care Surveys.
- Developed an Health Level International (HL7)
 Implementation Guide (IG) for the National Health Care
 Surveys. Published in December by HL7, this two-volume IG, is a Draft Standard for Trial Use.

Explored Methods for Data Visualization



2015 PRIORITIES



2015 Priorities

- Maintain surveys and data collections under decreased budget.
- Seek support to maintain strength of 2016 NHIS and NAMCS in the absence of FY 2015 PPHF.
- Continue to provide timely access to data to monitor the Affordable Care Act at the national and state levels.
 - Release of 2014 NHIS data anticipated in June 2015 expected to include health insurance estimates for 50 states and DC.
 - 2016 NHIS will continue providing data for monitoring the ACA, but unfortunately primarily at the national level with fewer state estimates.
- Even faster vital statistics reporting. Continue the expansion of uses for vital statistics for CDC surveillance activities.

2015 Priorities

- Continue working with EHR vendors to develop an interface that enables hospitals to forward their inpatient and outpatient data for the National Health Care Surveys.
- Recruitment and retention of staff for key positions, and for individuals with appropriate technical and substantive skills.
- Encourage mentoring and cross-training.
- Continue to investigate data visualization methods.
- Ensuring adequate IT infrastructure for large data files and data visualization efforts.
- Address the growing number of health measures at state, regional and national level that must be analyzed, harmonized, updated, housed and disseminated.