July 17, 2020

The Honorable Mike Pence The White House Office of the Vice President 1600 Pennsylvania Avenue, NW Washington, DC 20500

The Honorable Deborah Birx, MD Coronavirus Task Force Response Coordinator The White House 1600 Pennsylvania Avenue, NW Washington, DC 20500

The Honorable Alex M. Azar II Secretary U.S. Department of Health & Human Services 200 Independence Avenue, SW Washington, DC 20201

Dear Vice President Pence, Ambassador Birx and Secretary Azar:

The undersigned organizations write with urgency to strongly recommend that the administration immediately reverse its decision to bypass the Centers for Disease Control and Prevention (CDC) in the collection and analysis of COVID-19 patient data. Our organizations represent healthcare providers, public health professionals, researchers and scientists, other healthcare professionals and patient advocates who have been central in responding to the pandemic.

Maintain the integrity of COVID-19 data. The administration's abrupt decision to establish a new data collection procedure that bypasses the CDC as a recipient of data on patients hospitalized with COVID-19 is alarming and will undermine efforts to control the pandemic at a time when COVID-19 cases and hospitalizations are surging across the country. A core function of the CDC is to collect and report public health data and this important work is led by trained experts with the infrastructure necessary to ensure the validity and accuracy of the data in addition to protecting data from misuse. Placing medical data collection outside of the CDC puts the quality and integrity of the data at risk threatening to seriously undermine our country's response to COVID-19.

Keep public health data public. COVID-19 data collection and reporting must be done in a transparent manner and must not be politicized, as these data are essential to informing an effective response to the pandemic and to establishing public trust in the response. Data transparency is particularly critical in the midst of an unprecedented national health crisis that is disproportionately impacting certain segments of the U.S. population, including Black/African American, Latinx and Native American communities. Widely accessed COVID-19 tracking sites have already lost access to ICU hospitalization data – a key indicator for monitoring the state of the pandemic.

Invest in CDC data reporting. Rather than investing in a new data collection mechanism and reporting infrastructure, we strongly urge the administration to provide funding to enhance data collection and

Please contact the HIVMA Executive Director Andrea Weddle at <u>aweddle@hivma.org</u> or the Infectious Diseases Society of America Vice President of Public Policy and Government Relations at <u>ajezek@idsociety.org</u> regarding this letter.

strengthen the role of CDC to collect and report COVID-19 data by race and ethnicity, hospital and ICU capacity, total number of tests and percent positive, hospitalizations and deaths. This critical function belongs with our nation's top public health agency.

Data is critical to the state and local response. The availability of accurate hospital data, coupled with other public health indicators, is essential for the state and local response. Jurisdictions need situational awareness about bed availability, shortages of supplies and personal protective equipment, and other healthcare needs in order to coordinate the response. Creating duplicate, siloed data reporting systems may make it harder for jurisdictions to get an accurate picture of the pandemic and limit visibility across neighboring states and localities

Reliable, comprehensive and timely data are essential to monitor and evaluate the state of the pandemic and to inform an effective response, including the distribution of essential supplies and treatment. We urge you not to advance the new data collection plan any further and instead consult with the public health and healthcare communities to discuss effective strategies for ensuring the availability of the data we all need and want to bring the pandemic under control in the U.S.

Sincerely,

AcademyHealth AIDS Alabama American Academy of HIV Medicine **AIDS Foundation of Chicago** AIDS Research Consortium of Atlanta AIDS United Alabama Arise American Association for Anatomy American Association for the Advancement of Science American Association for Dental Research American Association of Geographers American Association on Health and Disability American Association of Immunologists American College of Nuclear Medicine American College of Physicians American Educational Research Association American Institute of Biological Sciences American Lung Association American Medical Informatics Association (AMIA) American Psychological Association* American Public Health Association American Society for Microbiology American Society of Pediatric Nephrology American Society of Transplantation* American Society of Tropical Medicine and Hygiene American Sociological Association

American Statistical Association American Thoracic Society American Urological Association amfAR, Foundation for AIDS Research APIC – Association for Professionals in Infection Control and Epidemiology Arab American Community Center for Economic and Social Services (ACCESS)*

Association for Prevention Teaching and Research Association for Women in Mathematics Association of Nurses in AIDS Care **Association of Population Centers** Association of Public Data Users Association of Schools Advancing Health Professions Association of Schools and Programs of Public Health AVAC **Big Cities Health Coalition Biophysical Society Black AIDS Institute** Broom Center for Demography Cascade AIDS Project Center for Population Health and Aging Center for Studies in Demography & Ecology, University of Washington

Centro de Comunidad y Justicia* Community Catalyst* Conference Board of the Mathematical Sciences Consortium of Social Science Associations **Council of Professional Associations** on Federal Statistics CUNY Institute for Demographic Research, **City University of New York Duke Population Research Center Endocrine Society Entomological Society of America Epilepsy Foundation Every Texan** Georgians for a Healthy Future **GLMA: Health Professionals** Advancing LGBTQ Equality GO2 Foundation for Lung Cancer HealthHIV Health Care for All (Massachusetts) **HIV Medicine Association Hoosier** Action Infectious Diseases Society of America International & American Associations for **Dental Research IRMA - International Rectal Microbicide** Advocates Kentucky Voices for Health* Lakeshore Foundation Lambda Legal Mathematical Association of America MDRC Medical Care Section – American Public Health Association Mercy Care Missouri Health Care For All* National Association of State Emergency Medical Services Officials* National Black Nurses Association National Coalition of STD Directors* Natural Science Collections Alliance Neighborhood Health New Mexico Center on Law & Poverty North Carolina AIDS Action Network Northwest Health Law Advocates **Oklahoma Policy Institute Population Association of America Prevent Blindness Prevention Access Campaign**

Prevention Institute Protect Our Healthcare RI Research!America **Rvan White Medical Providers Coalition** San Francisco AIDS Foundation Social Science Research Institute, Duke* University* Society of General Internal Medicine Society of Infectious Diseases Pharmacists Southern AIDS Coalition Spina Bifida Association **TB Alliance* Tennessee Health Care Campaign Tennessee Justice Center Tennessee Primary Care Association** Texas Interfaith Center for Public Policy/ Texas Impact The AIDS Institute* The Hopkins Population Center The Society for Healthcare Epidemiology of America The Society for Public Health Education The Well Project Thrive Alabama Trust for America's Health University of Colorado Population Center Utah Health Policy Project **UW Population Health Institute** WNAR, International Biometrics Society

*Endorsement added after July 17, 2020.