

# **National Committee on Vital and Health Statistics (NCVHS)**

## **Hearing on current status and issues regarding the Vital Statistics System**

----- **Overview and Issues**-----

**CDC/NCHS Headquarters, Hyattsville, MD**

**OR**

**HHS Headquarters, Washington, DC**

**September 11-12, 2017**

### **Background/Context**

The vital statistics system is the foundational source of data for tracking and understanding the US population. Legal authority for the registration of births, deaths, marriages, divorces, and fetal deaths reside individually with the states and territories. As a result, the collection of registration-based vital statistics at the national level is dependent on a cooperative relationship between the states and the federal government. As one of 13 Federal Statistical Agencies, the National Center for Health Statistics (NCHS) is responsible for the federal side of this relationship. NCVHS is charged with helping HHS, including NCHS, strengthen its data enterprise, assuring its viability for assessing and promoting the population's health.

Vital statistics are used for health research and demography. Individuals use birth certificates for routine activities such as obtaining driver's licenses and registering children for school. Commercial uses include establishing the basis for insurance benefits and filing claims for death benefits. Vital statistics data are used to determine the future revenues and costs to Medicare, Social Security, and other major programs. Vitals are a critical component of population estimates produced by the Census Bureau, which are in turn used by other federal agencies, such as the Bureau of Labor Standards as a basis for projections of the future labor force and the National Center for Education Statistics to plan education estimates. At the state and local level, the Census population projects are used for specific planning objectives such as assessing demand for roads, schools, and other infrastructure improvement. Furthermore, vital statistics are a key component of identity establishment and protection as inputs for protecting individual identity and informing other national security needs.

As currently constituted, the federated, state-based data system is vulnerable, facing both structural and funding challenges. In recent years, the National Center for Health Statistics' Division of Vital Statistics has made significant improvements in the quality and timeliness of the national data, but maintenance of progress and strategic visioning is at risk given the 100-year old structure of the system developed within the context of a very different era. This collective national data set is foundational for public health and the nation's infrastructure: it plays a critical role in public health surveillance; the information is essential to understanding the effectiveness of the healthcare and health financing system; and the data are relied upon for business and commerce. The Committee views this as a timely opportunity to reinforce and strengthen this critical system.

To clearly define these challenges and identify potential approaches to address them, NCVHS will convene a two-day hearing to obtain input from key stakeholders including HHS, other federal sources, state jurisdictions, researchers, health informatics and security experts, healthcare providers, public health thought leaders, and other experts.

## Hearing Purposes/Objectives

The purpose of this hearing is to gather information about the current status and deficiencies in the current approach to vital statistics from the federal and state and local perspectives, and emerging best practices and future solutions to protect, improve and strengthen the system.

- Obtain input from various users of the system, e.g., Federal, state, commercial, research.
- Identify pain points and priority areas for change and improvement.
- Identify potential solutions and paths forward.

## Potential products:

- Hearing summary report on the current state, the need, concerns and future direction
- Letter to Secretary with recommendations
- Future 'white papers' on specific topics that emerge and require further explication

## Suggested structure:

- 2 day hearing
- Facilitated panel presentations and discussions, with time for Committee members to ask questions, to support development of potential recommendations and next steps
- Where possible, encourage experts to attend in the audience and allow for public discussion during each panel.

## Draft Hearing Agenda:

Monday, Sept. 11, 2017

9:00 **Welcome and introductions**

9:15 **Importance of vital records (local, state, federal, international)**

*An overview of Vitals on the centrality of vital statistics to the essential functioning of the federal government.*

10:15 Break

10:30 **Panel 1: Current status of vital records: birth and death.**

**Presenters: Federal health data stewardship partners**

**Committee Q & A**

12:00 **Discussion and public comment**

12:30 Lunch

1:30 **Panel 2: Current status for vital records**

**Presenters: State/local data producers**

**Committee Q & A**

3:00 Break

3:15 **Panel 3: Current status for vital records**

**Presenters: Other users of vital statistics**

- Federal users
- Commercial and Research users

**Committee Q & A**

5:15 **Discussion and public comment**

5:45 **Adjourn**

**Tuesday, Sept. 12, 2017**

8:30 **Reconvening welcome**

8:45 **Panel 4: Challenges, Barriers and Potential Solutions – Federal level**

**Committee Q & A**

10:15 Break

10:30 **Panel 5: Challenges, Barriers and Potential Solutions – Local level**

**Committee Q & A**

12:00 **Discussion and public comment**

12:30 Lunch

1:30 **Panel 6: e-Health and its Relationship to e-Vitals**

**Committee Q & A**

2:30 **Discussion, Q and A, Small group discussion**

- Identify key points, key themes
- Integrate – discuss framework for synthesizing testimony

3:45 Break

4:00 **Public comment**

4:30 **Next steps and wrap-up**

5:00 **Adjourn**

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