

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 aweddle@hivma.org or the Infectious Diseases Society of America Vice President of Public Policy and Government Relations at ajezeke@idsociety.org 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,

AIDS Alabama
 American Academy of HIV Medicine
 AIDS Foundation of Chicago
 AIDS Research Consortium of Atlanta
 AIDS United
 Alabama Rise
 American Association for Anatomy
 American Association for the Advancement of Science
 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 Public Health Association
 American Society for Microbiology
 American Society of Pediatric Nephrology
 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
 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
 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
 Lakeshore Foundation
 Lambda Legal
 Mathematical Association of America
 MDRC
 Medical Care Section – American Public Health
 Association
 Mercy Care
 National Black Nurses Association
 Natural Science Collecitons
 AllianceNeighborhood 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
 Ryan White Medical Providers Coalition
 San Francisco AIDS Foundation
 Society of General Internal Medicine
 Southern AIDS Coalition
 Spina Bifida Association
 Tennessee Health Care Campaign
 Tennessee Justice CenterTennessee
 Primary Care Association
 Society of Infectious Diseases Pharmacists
 Texas Interfaith Center for Public Policy/
 Texas Impact
 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
 3Utah Health Policy Project
 UW Population Health Institute
 UNAR, International Biometrics Society