

May 23, 2025

The Honorable Shelley Moore Capito
Chair
Subcommittee on Labor, HHS, Education, and
Related Agencies
Committee on Appropriations
U.S. Senate

The Honorable Tammy Baldwin
Ranking Member
Subcommittee on Labor, HHS, Education, and
Related Agencies
Committee on Appropriations
U.S. Senate

The Honorable Robert Aderholt
Chair
Subcommittee on Labor, HHS, Education, and
Related Agencies
Committee on Appropriations
U.S. House of Representatives

The Honorable Rosa DeLauro
Ranking Member
Subcommittee on Labor, HHS, Education, and
Related Agencies
Committee on Appropriations
U.S. House of Representatives

Dear Chair Capito, Ranking Member Baldwin, Chair Aderholt, and Ranking Member DeLauro:

Thank you for your support for our nation's public health workforce and data systems in recent years. As you address ongoing public health needs, the undersigned organizations urge you and your colleagues to pass a Labor, Health and Human Services, Education, and Related Agencies (LHHS) appropriations bill for Fiscal Year (FY) 2026 that includes funding to modernize and sustain our public health data infrastructure. The undersigned organizations respectfully request \$340 million annually for public health data modernization at the Centers for Disease Control and Prevention (CDC). Additionally, we ask for your support for \$55 million for the One CDC Data Platform (1CDP) through the Response Ready Enterprise Data Integration (RREDI) platform and \$100 million for the CDC's Center for Forecasting and Outbreak Analytics (CFA).

CDC's public health data modernization efforts represent a long-term commitment to building and maintaining world-class data systems and workforce that meet the nation's ongoing need to safeguard health. Public health data is not only needed during an emergency response; it is necessary for people and communities to thrive by rapidly identifying, tracking, and responding to daily public health threats of all types—acute, chronic, and emerging. Data modernization plays a critical role to ensure public health receives data from the health care system that is essential to the disease detection and outbreak response efforts that keep communities safe and our nation secure.

As technology evolves and becomes more central to supporting and maintaining our health, our public health data systems will continue to need updates, software patches, security vulnerability protection, and upgrades, and the staff supporting these critical systems will need ongoing training. Public health workers and agencies are essential for protecting and improving the health of communities, but they cannot do their work without adequate funding.

Unfortunately, data modernization efforts across the country have been interrupted or completely halted by recent, abrupt CDC funding terminations, stalling progress on work that is needed to protect us from current and emerging public health threats. In light of these interruptions and the ongoing need to continue our modernization efforts, providing sustained yearly funding for public health data is key to ensure the continuous improvement of our public health infrastructure. The Data: Elemental to Health Campaign [estimates](#) true modernization will cost at least \$7.84 billion over five years at the state, Tribal,

local, and territorial (STLT) levels with additional funding needed to support data efforts at the CDC. By supporting these efforts Congress will directly impact every jurisdiction's ability to keep their communities safe. So far, Congress has provided an initial down payment of more than \$1 billion for public health data modernization through annual and supplemental appropriations—which has been critical to catalyzing the work, but consistent annual funding is necessary to maintain improvements, make continued upgrades as technology advances, and support the expert public health workforce. To capitalize on the initial investment, more funding is needed for states to maintain and support upgraded systems and not return to antiquated data collection and sharing processes. Lack of consistent funding will halt progress, and force health departments to move backwards abandoning projects before completion.

The agency's 1CDP data platform is an essential component of CDC's enterprise data strategy to create a more integrated, scalable, and secure data ecosystem that will allow CDC and STLT public health agencies to better detect and respond to threats to public health. \$55 million in funding for 1CDP and its components, including RREDI, is critical to the success of CDC's data modernization efforts.

Data modernization will make possible the work of the CDC's Center for Forecasting and Outbreak Analytics (CFA). Improved data, made possible by data modernization, enables the work of CFA to model and predict outbreaks to help improve pandemic preparedness and response. CFA is already transforming our disease modeling capabilities and using data and processes established by advancing data modernization with the initial funds received. An additional \$100 million appropriation for CFA in FY 2026 is needed to ensure this work can continue.

Public Health data modernization, RREDI, and CFA are each necessary components of the CDC's public health data strategy, and each must be funded separately and robustly to help communities stay safe and thrive. Base funding for data modernization must be retained and grow with additional funds added for RREDI and CFA.

We are grateful for the subcommittee's bipartisan support of public health data modernization so people and communities can know about health threats in their own back yards. Continuous investment in these crucial activities is essential to ensure the strength and resilience of the nationwide public health data system. Again, as you work to finalize the FY 2026 LHHS bill, we respectfully request at least \$340 million for public health data modernization at CDC, \$100 million for CFA, and \$55 million for RREDI. Thank you for your leadership and for considering our recommendation.

Sincerely,

AcademyHealth
Alliance for Nursing Informatics
American Association of Bioanalysts
American Association of Colleges of Pharmacy (AAPC)
American Association of Neuroscience Nurses (AANN)
American Association on Health and Disability
American College of Obstetricians and Gynecologists
American Heart Association
American Mosquito Control Association
American Psychological Association Services
American Public Health Association

American Society for Microbiology
American Society for Nutrition
American Society of Tropical Medicine and Hygiene
American Statistical Association
Association for Diagnostics & Laboratory Medicine
Association for Prevention Teaching and Research
Association of Public Health Laboratories
Association of State and Territorial Health Officials
Association of State Public Health Nutritionists
beHuman Corp.
Big Cities Health Coalition
Center for Infectious Disease Research and Policy
Civitas Networks for Health
Community Solutions
Connected Health Initiative
Council of State and Territorial Epidemiologists
cureCADASIL
Developmental and Epileptic Encephalopathies Project (DEE-P Connections)
Dogtown Media
eHealth Exchange
Entomological Society of America
Epilepsies Action Network (EAN)
Epilepsy Foundation of America
Gerontological Society of America
Green & Healthy Homes Initiative
Healthcare Information and Management Systems Society
HIV Medicine Association
HLN Consulting, LLC
Hope for HIE
ICPSR (U of Michigan)
ICPSR, the data consortium
Infectious Diseases Society of America
International SCN8A Alliance
ISF, Inc.
Johns Hopkins Center for Health Security
Kahuina Consulting, LLC
Lakeshore Foundation
Mosquito and Vector Control Association of California
NASTAD
National Association for Public Health Statistics and Information Systems
National Association of County and City Health Officials
National Association of Pediatric Nurse Practitioners
National Environmental Health Association
National Independent Laboratory Association
National League for Nursing
National Network of Public Health Institutes
National Safety Council
New York State Public Health Association

Northeast Regional Center for Excellence in Vector-Borne Diseases
Phelan-McDermid Syndrome Foundation
Prevent Blindness
Rare Epilepsy Network Coordinating Committee
Resolve to Save Lives
Ruvos
Safe States Alliance
Society for Healthcare Epidemiology of America
Society for Maternal-Fetal Medicine
Spina Bifida Association
Trinity Health
Trust for America's Health