



MEMORANDUM

To: Subcommittee on Health Members and Staff
From: Committee on Energy and Commerce Majority Staff
Re: Health Subcommittee Hearing on July 23, 2024

The Subcommittee on Health will hold a hearing on Tuesday, July 23, 2024, at 10:30 a.m. (ET) in 2322 Rayburn House Office Building. The title of the hearing is “Are CDC's Priorities Restoring Public Trust and Improving the Health of the American People?”

I. Witnesses

- **Dr. Henry Walke, M.D., M.P.H.**, Director, CDC Office of Readiness and Response (ORR)
- **Dr. Jennifer Layden, M.D., Ph.D.**, Director, CDC Office of Public Health Data, Surveillance, and Technology (OPHDST)
- **Dr. Daniel Jernigan, M.D., M.P.H.**, Director, CDC National Center for Emerging and Zoonotic Infectious Diseases (NCEZID)
- **Dr. Karen Hacker, M.D., M.P.H.**, Director, CDC National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP)
- **Dr. Demetre Daskalakis, M.D., M.P.H.**, Director, CDC National Center for Immunization and Respiratory Diseases (NCIRD)
- **Dr. Allison Arwady, M.D., M.P.H.**, Director, CDC National Center for Injury Prevention and Control (NCIPC)

II. General Background

The Centers for Disease Control and Prevention (CDC) began as the Communicable Disease Center in 1946 and was established to assist states and localities in controlling communicable disease outbreaks.¹ Since then, the CDC has undergone several review, renaming, and reorganization efforts that have led to the evolution and expansion into its present form today. The CDC’s current stated mission is to:

[Work] 24/7 to protect America from health, safety and security threats, both foreign and in the [United States] ... To accomplish our mission, CDC conducts critical science and provides health information that protects our nation against expensive and dangerous health threats and responds when they arise.²

¹ Congressional Research Service, “Centers for Disease Control and Prevention (CDC): History, Overview of Domestic Programs, and Selected Issues,” *R47981*, 2024, <https://crsreports.congress.gov/product/pdf/R/R47981>. [hereinafter CRS Report, *R47981*]

² U.S. Centers for Disease Control and Prevention, “About CDC: Our Mission,” 2024, <https://www.cdc.gov/about/cdc/index.html#:~:text=Our%20mission,citizens%20to%20do%20the%20same>.

The CDC's primary domestic activities include providing support to state, local, tribal, and territorial (SLTT) health agencies, which are often on the front lines of public health activities. State law provides the basis for numerous public health authorities in the United States, and many public health programs are based at the local level, though the programs vary in their organization, scope, and governance structures. The CDC also supports public health research, investigation, and data collection. The CDC operates over 100 surveillance systems that collect data on an ongoing basis, in addition to administering numerous national population and health care provider surveys. The CDC provides public health education, guidance, and outreach to various audiences, including the general public, clinicians, and public health practitioners. Currently, these activities can cover a wide range of health topics, including: infectious diseases, chronic diseases, injury, disability, occupational health, environmental health, and public health emergency preparedness and response. The CDC exercises regulatory authority in a few limited areas, such as in federal quarantine and inspection and occupational health and safety. The CDC also administers a few mandatory health services programs, such as the Vaccines for Children program and the World Trade Center Health Program, as well as several global health programs.

In fiscal year (FY) 2024, the CDC had a total program level of \$17.282 billion, including \$9.248 billion for core public health programs and \$8.034 billion for other mandatory programs. Core public health programs include: \$7.937 billion in discretionary funding from the Labor, Health and Human Services (LHHS) bill; \$1.186 billion in funding for the Prevention and Public Health Fund, and \$81.619 million for the Agency for Toxic Substances and Disease Registry (ATSDR). Mandatory programs include the Vaccines for Children Program (\$7.212 billion) and World Trade Center Program (\$768.392 million).³

The CDC is organized into 23 centers, institutes, and offices (CIOs), with each focusing on different facets of public health, including specific health areas or challenges (e.g., National Center for Immunization and Respiratory Diseases and National Center for Emerging and Zoonotic Infectious Diseases) or functions and capabilities (e.g., Office of Public Health Data, Surveillance, and Technology). At times, CIOs have been the result of Congress authorizing a specific type of activity at the CDC (e.g., injury prevention and control), explicitly establishing a new center or office by statute (e.g., National Center for Health Statistics) or creating a role for the CDC through periodic reauthorizations (e.g., public health emergency preparedness and response activities).

The CDC does not have a single, overarching statute that defines the agency's overall mission, purpose, structure, or programs. The CDC has largely been shaped by several major administrative reorganizations over the course of its history. At times, Congress has enacted specific authorizing legislation, but Congress often uses the annual appropriations process to guide programmatic focus areas by directing funding to disease- or program-specific accounts or budget lines. As a result, the CDC programs frequently cite general program authorizations in the *Public Health Service Act* (PHSA) as their statutory basis. Many of the CDC's specific program

³ FY2024 discretionary amounts are from P.L. 118-47 and Congressional Record, vol. 170, no. 51 (March 22, 2024), H2020-H2022, and other mandatory program amount estimates from CDC, "FY2025 Budget Detail Table," <https://www.cdc.gov/budget/documents/fy2025/FY-2025-CDC-Budget-Detail.pdf>.

authorizations are currently expired. The CDC's FY 2025 Congressional Budget Justification lists 29 programs with authorizations of appropriations that have expired in FY 2023 or earlier.⁴

The varying CIOs have continued to grow through internal operations and functions, as well through the appropriations process and an increasing number of programmatic budget lines within accounts. For example, the CDC's role in various immunization programs has continued to expand through its Vaccines for Children's (VFC) Program and long-standing Section 317 Immunization Program authorities.⁵ The CDC's support for various grant programs has grown as well. In FY 1990, the conference report for CDC appropriations specified funding levels for 18 programs within CDC accounts; currently, there are specified funding levels for more than 165 line-items within CDC accounts.⁶ The CDC's Chronic Disease Prevention and Health Promotion program alone is currently funding programs under eighty different Notice of Funding Opportunities.⁷

As stated previously, the CDC has undergone several major review and reorganization processes. The most recent, the "Moving Forward" initiative, began in April 2022, and consisted of both a scientific and programmatic review and an organizational structure review. In February 2023, the CDC finalized an agency reorganization and identified more than 160 key actions targeted to be completed by January 2024.⁸ As of May 2024, the CDC stated that nearly 90 percent of actions are complete and implementation monitoring is underway.⁹

This hearing will focus on the following CDC CIOs:

- (1) Office of Readiness and Response;
- (2) National Center for Chronic Disease Prevention and Health Promotion;
- (3) National Center for Injury Prevention and Control;
- (4) National Center for Emerging and Zoonotic Infectious Diseases;
- (5) National Center for Immunization and Respiratory Diseases; and
- (6) Office of Public Health Data, Surveillance, and Technology.

III. CIO Background

Office of Readiness and Response:

The Office of Readiness and Response (ORR) is the CDC's primary hub for preparedness and response efforts. The ORR's mission is "to advance the nation's preparedness and response

⁴ Department of Health and Human Services, "Fiscal Year 2025: Centers for Disease Control and Prevention, Justification of Estimates for Appropriations Committees", 2024, <https://www.cdc.gov/budget/documents/fy2025/FY-2025-CDC-congressional-justification.pdf>. [hereinafter Fiscal Year 2025, CDC Congressional Justification]

⁵ CRS Report, *R47981*.

⁶ *Id.*

⁷ *Id.*

⁸ *Id.*

⁹ U.S. Centers for Disease Control and Prevention, "CDC Moving Forward," January 2024, https://www.cdc.gov/about/cdc-moving-forward.html?CDC_AAref_Val=https://www.cdc.gov/about/organization/cdc-moving-forward.html.

in order to fight off public health emergencies and threats.”¹⁰ The ORR works with experts in immunization, environmental health, emerging diseases, injury prevention and control, and occupational safety and health, as well as other federal partners, and state, local, tribal, and territorial health departments. The ORR works to monitor public health risks to the public, providing technical assistance, funding, and training to public health departments, coordinating standardized emergency management structures, and helping with the recovery and rebuilding post-emergency.

For FY 2024, public health preparedness and response activities were funded at \$938,200,000. The President’s FY 2025 Budget request for these activities is \$943,300,000.¹¹

National Center for Chronic Disease Prevention and Health Promotion:

The National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP) “supports healthy behaviors and preventative medical care to help people prevent and manage chronic disease.”¹² The NCCDPHP leads health surveillance and epidemiology research efforts, surveying and collecting data on day-to-day lifestyle choices and conditions, promoting environmental changes, and working to connect individuals with community resources. The Center’s divisions include the: Division of Adolescent and School Health, Division of Cancer Prevention and Control, Division of Diabetes Translation, Division for Heart Disease and Stroke Prevention, Division of Nutrition, Physical Activity, and Obesity, Division of Oral Health, Division of Population Health, Division of Reproductive Health, and Office on Smoking and Health.

In FY 2024, the NCCDPHP was funded at \$1,433,914,000, including \$241,267,000 from the Prevention and Public Health Fund (PPHF). The President’s FY 2025 budget request for the Center is \$1,559,414,000, of which \$254,950,000 is from the Prevention and Public Health Fund (PPHF).¹³

National Center for Injury Prevention and Control:

The National Center for Injury Prevention and Control’s (Injury Center) mission is to “keep individuals, families, and communities safe, healthy, and thriving.”¹⁴ The Injury Center’s stated priorities include the prevention of adverse childhood experiences (ACEs), overdoses, and suicides. The Center tracks trends, conducts research, raises awareness, and implements prevention programs for these priorities through its Divisions of Injury Prevention, Overdose Prevention, and Violence Prevention.

¹⁰ U.S. Centers for Disease Control and Prevention, Office of Readiness and Response, “About Office of Readiness and Response,” January 2024, <https://www.cdc.gov/orr/about/index.html>.

¹¹ Fiscal Year 2025, CDC Congressional Justification.

¹² U.S. Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, “About Us,” May 2024, <https://www.cdc.gov/nccdphp/about/index.html>.

¹³ Fiscal Year 2025, CDC Congressional Justification.

¹⁴ U.S. Centers for Disease Control and Prevention, National Center for Injury Prevention and Control, “About the CDC Injury Center,” February 2024, <https://www.cdc.gov/injury/about/index.html>.

In FY 2024, the Injury Center was funded at \$761,379,000. The President's FY 2025 budget request for the Center is \$943,379,000, of which \$100 million is from public health service (PHS) evaluation transfer funds.¹⁵

National Center for Emerging and Zoonotic Infectious Diseases:

The National Center for Emerging and Zoonotic Infectious Diseases (NCEZID) is responsible for the "prevention and control of a wide range of infectious diseases."¹⁶ These include rare and deadly diseases, such as anthrax and Ebola, as well as more common diseases, such as foodborne and healthcare-associated infections. The Center conducts public health surveillance and coordinates outbreak preparedness and response programs. The Center's stated priorities include: infectious disease preparedness and response, health equity, climate and infectious diseases, and global health.

In FY 2024, the NCEZID was funded at \$760,272,000. The President's FY 2025 budget request for the Center is \$780,772,000, of which \$52,000,000 is from the Prevention and Public Health Fund (PPHF).¹⁷

National Center for Immunization and Respiratory Diseases:

The National Center for Immunization and Respiratory Diseases (NCIRD) "focuses on the prevention of disease, disability, and death through immunization and control of respiratory and related diseases."¹⁸ The NCIRD shares weekly updates on the respiratory illness seasons, conducts disease investigations, and oversees several surveillance systems, including viral, bacterial, and vaccine surveillance. The Center's divisions include the: Office of the Director, Division of Bacterial Diseases, Division of Viral Diseases, Influenza Division, Immunization Services Division, and Coronavirus and Other Respiratory Viruses Division.

In FY 2024, the NCIRD was funded at \$919,291,000. The President's FY 2025 budget request for the Center is \$969,291,000, of which \$469,350,000 is from the Prevention and Public Health Fund (PPHF).¹⁹

Office of Public Health Data, Surveillance, and Technology:

The Office of Public Health Data, Surveillance, and Technology (OPHDST) works to improve access to and use of public health data and to increase the efficiency of data and technology systems across all levels of public health. The office's mission is to "optimize timely access, exchange, and integration of public health data, while driving efficiency and consolidation of data and technology systems supported by the CDC across all levels of public

¹⁵ Fiscal Year 2025, CDC Congressional Justification.

¹⁶ U.S. Centers for Disease Control and Prevention, National Center for Emerging and Zoonotic Infectious Diseases, "About the National Center for Emerging and Zoonotic Infectious Diseases," January 2024, <https://www.cdc.gov/ncezid/about/index.html>.

¹⁷ Fiscal Year 2025, CDC Congressional Justification.

¹⁸ U.S. Centers for Disease Control and Prevention, National Center for Immunization and Respiratory Diseases, "About NCIRD," April 2024, <https://www.cdc.gov/ncird/about/index.html>.

¹⁹ Fiscal Year 2025, CDC Congressional Justification.

health and advancing open data and dissemination to inform decision making and action.”²⁰ OPHDST is leading the CDC’s efforts to shift from a program-led to an agency-led data approach through its Public Health Data Strategy (PHDS) and “One Public Health” approach to data modernization initiatives. It aims to improve several forms of data exchange over the coming years, including Electronic Case Reporting (eCR), National Syndromic Surveillance Program (NSSP), Trusted Exchange Framework and Common Agreement (TEFCA), Fast Healthcare Interoperability Resources (FHIR), and United States Core Data for Interoperability (USCDI).

IV. Staff Contacts

If you have questions regarding this hearing, please contact Emma Schultheis of the Committee staff at 202-225-3641.

²⁰ U.S. Centers for Disease Control and Prevention, Office of Public Health Data, Surveillance, and Technology, “About OPHDST,” May 2024, <https://www.cdc.gov/ophdst/about/index.html>.