

Protecting our homes from COVID-19 means 'protecting home for COVID-19 data at CDC'

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The American Geriatrics Society (AGS) today expressed concern that the new process for sharing COVID-19 data risks fragile progress in our hard-fought national response to the pandemic. The AGS is particularly concerned that the new process, which would change the role of the Centers for Disease Control and Prevention (CDC), does not provide

public access to the data at a time when the agency's impartial expertise has never been needed more.

"Representing more than 6,000 experts who care for us all as we age, the AGS strongly believes the CDC is still best positioned to collect, analyze, and act on [health data](#) as we support age-friendly care in the face of pandemics," notes AGS President Annie Medina-Walpole, MD, AGSF. "Instead of removing the country's premier health protection agency from the equation, let's focus on building the infrastructure it needs to remain 'first among equals' leading local, state, and other national partners in ending COVID-19."

At issue is the Trump administration's order that hospitals and labs send data on coronavirus patients straight to the Department of Health and Human Services (HHS), instead of the CDC and its National Health Safety Network (NHSN). At the AGS and elsewhere across [health care](#), the change raised questions about the quality and utility of data analysis, with several experts worrying that the move "could result in less transparent data," especially since the CDC's protocols are built around long-standing safeguards, like those included in the Health Insurance Portability and Accountability Act (HIPAA), according to reports. Though the NHSN certainly can be modernized with bipartisan collaboration, geriatrics experts reiterated the network's critical role—and that of the CDC, by extension—in addressing many other serious infectious diseases. In announcing the decision to have hospitals and states report directly to HHS, the Trump Administration did not announce any plans for access to the data for state and local governments, the public, and researchers.

"Such a sudden change in [data collection](#) coupled with previously collected data disappearing from and then being restored to the CDC website raises serious concerns that there is no plan to provide access to COVID-19 data in real-time for states, researchers, and the public," said

Dr. Medina-Walpole. "We need more—not less—collaboration and transparency if we are to protect [health](#), safety, and independence for us all as we age. And that means we need to strengthen the framework we already have at the CDC."

Provided by American Geriatrics Society

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