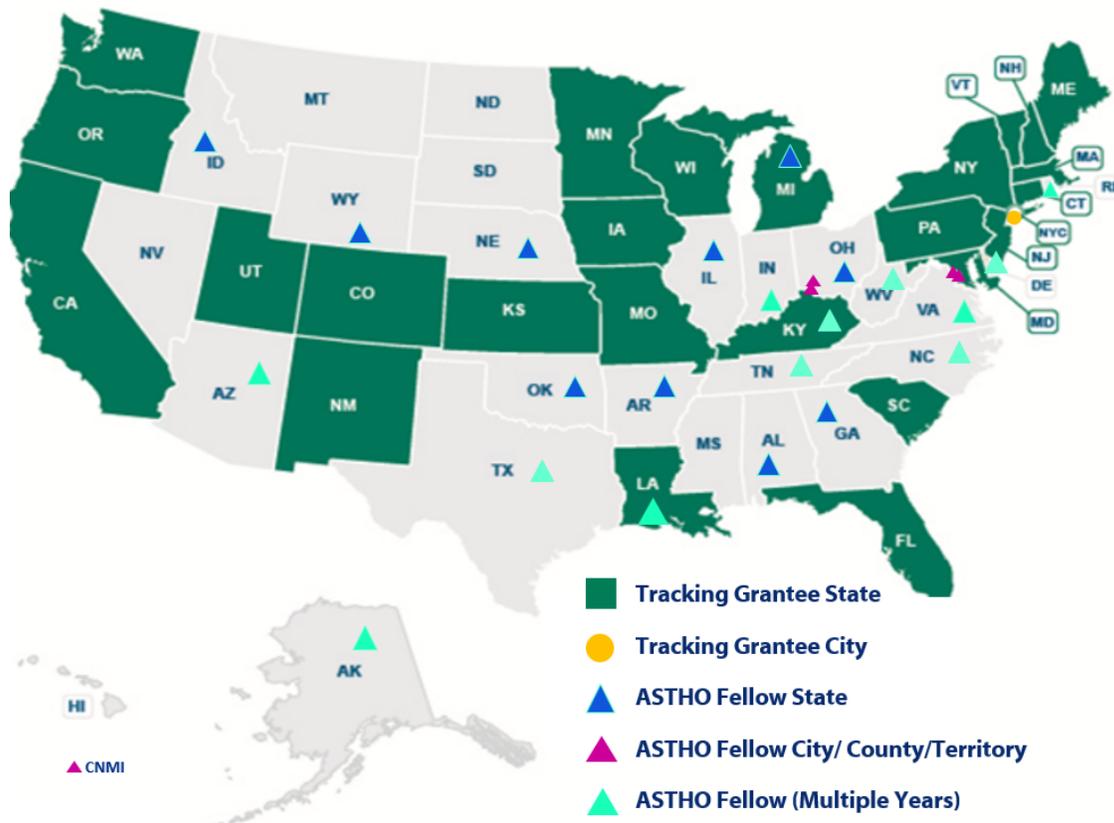




**Health Tracking Program**  
**FY 2018 Labor HHS Appropriations Bill**  
**Centers for Disease Control and Prevention (CDC)**  
**National Center for Environmental Health**

	2015	2016	2017 Marks	2018 TFAH
National Environmental Public Health Tracking Program	\$34,904,000	\$34,000,000	\$34,000,000	\$40,000,000

**Background:** The World Health Organization estimates that 25 percent of our disease burden is created by environmental exposures. Yet without the right data, researchers and policymakers struggle to answer basic, sometimes life-threatening questions about health. The Environmental and Health Outcome Tracking Network is a critical public health investigatory tool.



**Impact:** Roughly a decade after its inception, the Tracking Program contains data points for cancer, reproductive health outcomes, birth defects and demographics and socioeconomic status, outdoor air quality, drinking water quality, hospitalizations for asthma, cardiovascular disease, carbon monoxide poisoning, childhood lead poisoning, community design, and developmental

disabilities. In total, the network has 19 datasets, 96 indicators, and 379 health measures. The network covers regions representing over 190 million people — or only 62 percent of the country's population. To date, state and local health officials have used the Tracking Network over 225 times to prevent sickness or loss of life.

In FY16, the Tracking Program completed year three of a three-year funding cycle. In addition, the Association of State and Territorial Health Officials (ASTHO) partners with CDC to administer a Peer-to-Peer Fellowship Program to assist state health agencies that are not grantees in efforts to improve their readiness to conduct tracking activities. A Public Health Foundation study estimated that every dollar invested in tracking results in a \$1.44 return in the form of health care savings.

**Recommendation:** Today we fund only half our states to participate in the Tracking Network. Ultimately, roughly \$100 million would be needed to expand the program to all 50 states, D.C. and U.S. territories. TFAH urges the Committee to provide \$40 million in funding for the Health Tracking Network as a down payment towards fully funding the Network within the next five years.

For an additional \$5 million (\$40 million total), the program could add at least three states to the existing network. Additional levels of funding would also allow the program to continue to expand the type of health data available to policymakers, public health professionals, and the public. Unfortunately, the House markup level of \$24,000,000 for FY17 would represent roughly a \$10 million cut for this program from current funding levels. At that level, roughly ten states would be cut from the program.