



May 06, 2020

Kristen Clarke
President and Executive Director
Lawyers' Committee for Civil Rights Under Law
1500 K Street, NW, Suite 900
Washington, DC 20005

Dear Ms. Clarke:

Thank you for your recent letter to the Secretary of Health and Human Services Alex Azar regarding the impact of the Coronavirus Disease 2019 (COVID-19) pandemic on racial and ethnic minorities. I am responding on behalf of the Secretary.

Racial and ethnic minorities are often on the front lines of the COVID-19 response whether as, healthcare workers, first responders, or critical workers in essential industries. Protecting them and other people at risk is a priority for CDC, and to do so requires that we have strong data that describes the impact of COVID-19 on these populations.

We share your concern regarding these disproportionate outcomes and the root causes of health disparities and social determinants of health. Existing health disparities, housing patterns, work circumstances, and other factors might make members of many racial and ethnic minority groups especially vulnerable in public health emergencies like outbreaks of COVID-19. CDC recognizes that responding to the needs of all communities is a priority in this response, and we strive to continuously identify needs and improve our outreach. Please see this information on our website, www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/racial-ethnic-minorities.html.

CDC is leveraging our available surveillance systems to monitor COVID-19 and protect vulnerable populations. The goal is to get as complete a picture as possible of the overall situation in the U.S. and share findings with the American public. State health departments work to get complete information on every case, including race/ethnicity, but during a large-scale pandemic, it is understandable that these health departments may not be able to gather all the case-specific information. As CDC works to improve collection of that data, we are leveraging other surveillance systems, such as hospitalizations and mortality data, to provide a fuller picture of the outbreak and how it is impacting racial and ethnic minorities.

CDC is strengthening data collection and reporting on race/ethnicity data by posting available race ethnicity data for approximately 30 percent of cases received through case-based reporting from public health departments. This information can be accessed through a link listed on our "Cases in the U.S." page (www.cdc.gov/coronavirus/2019-ncov/cases-updates/cases-in-us.html) which is updated daily.

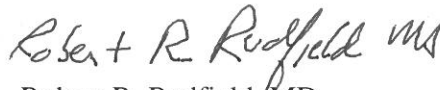
Posted on CDC's Cases, Data and Surveillance webpage (www.cdc.gov/coronavirus/2019-ncov/cases-updates/index.html) are hospitalization and mortality data that include race/ethnicity information. The COVID-19-Associated Hospitalization Surveillance Network (COVID-NET) monitors laboratory-confirmed COVID-19 hospitalizations in 14 states (CA, CO, CT, GA, IA, MD, MI, MN, NM, NY, OH, OR, TN, and UT) and provides weekly updates on rates of hospitalization as well as data on the race/ethnicity, underlying medical conditions, gender and age of hospitalized patients (https://gis.cdc.gov/grasp/covidnet/COVID19_3.html). COVID-Net currently represents approximately 10 percent of the U.S. population (approximately 32 million people). Provisional counts of deaths related to COVID-19 are reported through the National Vital Statistics System and include deaths occurring within the 50 states and the District of Columbia (www.cdc.gov/nchs/nvss/covid-19.htm). These counts are based on death certificates that contain COVID-19 as a cause of death and include race/ethnicity information. COVID-19 death counts shown in these reports may differ from other published sources, as data currently are lagged by an average of 1–2 weeks. Additionally, CDC publishes a weekly surveillance report, COVIDView, that summarizes data from these and other surveillance systems and periodic reports in CDC's Morbidity and Mortality Weekly Report provide additional race/ethnicity information from these and other systems (www.cdc.gov/mmwr/index.html).

CDC continues to collaborate with hospitals and state public health partners to gather and report more race/ethnicity data. The case surveillance data is collected frequently from state and jurisdictional reporters, and the demographic tables on CDC's site are updated daily. These collaborations will allow CDC to obtain additional data to learn more about the racial/ethnic disparities reflected in preliminary data. These data can help inform improvements in clinical management of patients, allocation of resources, and targeted public health information.

We are adjusting our response and guidance as conditions change and as we learn more about this emerging infectious disease. Please regularly visit our COVID-19 website www.cdc.gov/ncov for CDC's latest and most up-to-date information, resources, and guidance.

Thank you for your interest in this ongoing response. CDC remains committed to protecting the American public in the face of this pandemic. Please share a copy of this response with the cosigners of your letter.

Sincerely,



Robert R. Redfield, MD
Director, CDC