The Johns Hopkins Center for Health Security developed this document in response to Representative Mariannette Miller-Meeks’ Request for Information (RFI) on how Congress can reform and improve upon the Centers for Disease Control and Prevention (CDC). Our recommendations draw heavily from 2 reports: “Building the CDC the Country Needs” (linked here), written under the auspices of The Center for Strategic and International Studies (CSIS) Commission Working Group on the CDC and co-authored by our Director, and “Proposal for a National Diagnostics Action Plan for the United States” (preprint here), which our Center co-authored with the American Clinical Laboratory Association (ACLA).

The Johns Hopkins Center for Health Security identified 1 major limitation holding the CDC back and provided 8 recommendations spread across 6 domains. Foremost, the CDC has an underpowered global mission that undermines the agency’s ability to build sustainable global health security capacities that would achieve its original mission of surveillance, detection, and prevention of communicable diseases.

Our recommendations are as follows:

1. Leadership Structure and “Moving Forward” Reorganization
   i. Launch a high-level executive-congressional dialogue on the CDC’s future, implementing immediate reforms and consolidating long-term plans.

2. Good Guidance Practices
   i. Reform the CDC’s guidance development process by improving transparency, outreach, and legibility.

3. Morbidity and Mortality Weekly Reports Development
   i. MMWRs are not an appropriate tool for communicating timely, scientific updates during a public health emergency, and Congress should direct the agency to develop a mechanism to rapidly communicate information during a crisis.

4. Workforce Reform
   i. Update the career incentive system to reward operational excellence, experience, and speed.
   ii. Ensure budget flexibility in response to an infectious disease crisis.

5. Data and Surveillance
   i. Provide new data authorities and contracting, administrative, and budget flexibilities to improve the speed and quality of data collection, sharing, and reporting, including by ensuring the CDC has greater flexibility with the Paperwork Reduction Act during a crisis and integrating the currently siloed surveillance systems through the reauthorization of the Pandemic and All-Hazards Preparedness Act.

6. CDC Authorization
   i. Clarify and reaffirm CDC’s core mission.
   ii. Grant the CDC data-sharing authorities, loosen restrictions imposed on the CDC by the Paperwork Reduction Act during a crisis, authorize the CDC to use Other Transaction Authorities, ensure that the CDC has budget flexibility to respond to a crisis, and ensure that the CDC has an adequate budget.