



13-CD-01

Committee: Chronic Disease

Title: Revision to the National Chronic Disease Indicators

I. Statement of the Problem:

The Chronic Disease Indicators are a collaborative effort of the Council of State and Territorial Epidemiologists (CSTE), the National Association of Chronic Disease Directors (NACDD), and CDC's National Center for Chronic Disease Prevention and Health Promotion. They are a cross-cutting set of indicators that have been developed by consensus. They allow states, territories and large metropolitan areas to uniformly define, collect, and report chronic disease data that are 1) important to public health practice, and 2) available for states, territories and large metropolitan areas. One of the strengths of the CDIs is their rigorous definitions and rationales. Furthermore, they are an integrated set of indicators with data available in one place (the CDC Chronic Disease Indicators Website (1)) to assess chronic disease-related burden across many different content areas. In the late 1990s, CSTE worked with epidemiologists and chronic disease program directors at the state and federal levels to select, prioritize, and define the original 73 CDIs. The original 73 CDIs were adopted by a set of CSTE position statements at the 1998 CSTE business meeting. CSTE position statement #98-CD-01, "Modification of Chronic Disease Indicators," which was also adopted at the 1998 CSTE business meeting, charges the CSTE Chronic Disease Committee to work in collaboration with the NACDD Science and Epidemiology Committee to bring recommendations to CSTE for additions, deletions, and modifications to the CDIs (2). A formal revision process for the CDIs was undertaken in the early 2000s, when a CDI Work Group, composed of representatives of CSTE, NACDD, and CDC, was formed. The CDI Work Group reviewed the original CDIs, and recommended specific revisions to the original set of indicators. Revisions were made to six of the previous 73 indicators and 23 new indicators were added. This revised set of CDIs was adopted by CSTE position statement in 2002 (3).

Since 2002, no formal process to update the CDIs had been undertaken, although some small informal revisions to the indicators have been made periodically, primarily minor revisions to reflect changes in availability of data. After the 2002 revision, CDC undertook an effort to develop, maintain, and encourage use of the Chronic Disease Indicator's Website (1). CDC worked with state chronic disease epidemiologists to develop and revise the website to be most useful. While other chronic disease data websites are available, the CDI website has the unique role of providing access to a comprehensive list of indicators by which to measure chronic disease-related burden and access to data across several chronic disease content areas. CDC also works with all of the agencies housing the data sources to analyze and provide data on the CDIs, in order to display data for all the CDIs for each of the states, territories, and many large metropolitan areas on the CDI website.

Late in the 2000s, CSTE, NACDD, and CDC recognized that a formal review and revision to the CDIs was long overdue. Since the 2002 revision, many changes in chronic disease surveillance, including the systems used, the breadth of issues, and the available data, have occurred. Beginning in 2010, a process to review and revise the Chronic Disease Indicators was undertaken by NACDD, CSTE, and CDC. A Steering Committee was formed with representation from the three organizations/agencies and including the current CSTE Chronic Disease/MCH/Oral Health Committee Chair and the current NACDD Science and Epidemiology Committee Chair. The first part of the process involved stakeholder and subject matter expert interviews and surveys to identify potential needed revisions, additions, and deletions to the CDIs. These results informed the next part of the process, in which seventeen content-specific Working Groups with representation from subject-matter experts from state health departments and CDC, were convened to review and revise the CDIs to be better aligned with and relevant to current chronic disease practice and public health priorities. Particular attention was paid to the potential for adding systems/environment indicators to align with the focus of much of the chronic disease public health work being conducted nationally. Efforts have also been made to align these indicators with other indicator sets, such as Healthy People 2020, the National Oral Health Surveillance System, and the Preconception Health Indicators. The Working Groups conducted their business through



conference calls and email and provided recommendations by late summer 2012. On Friday, September 14, 2012, the Working Group Chairs (or their designee) gathered at the Chronic Disease Indicator Update Consensus Meeting in Atlanta, GA, to review and discuss all the recommended revisions to the CDIs. After the September meeting, the Steering Committee and the Working Group Chairs continued work through conference calls and email to finalize the revisions to the Chronic Disease Indicators. After receiving input from stakeholders and subject matter experts through this process, the CDI Steering Committee recommends specific revisions to the existing set of indicators, summarized below and detailed in the attached.

The names and affiliations of the Working Group members are listed in Appendix A.

II. Statement of the desired action(s) to be taken:

CSTE adopts the proposed revisions to the Chronic Disease Indicators (CDI) as standard case definitions and encourages states, territories, and CDC to utilize the CDI to guide programmatic and surveillance efforts. Further, CSTE recommends that CDC update its current Chronic Disease Indicator website to reflect these revisions. The Chronic Disease/MCH/Oral Health Committee of CSTE will work with CDC and NACDD on implementation of the newly revised Chronic Disease Indicators. CSTE also recommends that an ongoing joint CSTE, NACDD, and CDC working group be formed to routinely review, evaluate, and update the CDI.

A summary list of the recommended revised set of Chronic Disease Indicators is in Appendix B. Detailed indicator definitions and rationales are included in Attachment I.

A list of the indicators that are recommended for removal from the Chronic Disease Indicators and the rationale for their removal is in Appendix C.

III. Public health impact:

Chronic diseases are the leading causes of death and disability in the United States despite the fact that they are largely preventable and controllable by intervening on their risk factors and by managing chronic conditions (4). Chronic disease programs in state and territorial health departments have grown tremendously over the past 10 years and now address a wide range of related health issues, including but not limited to cancer, cardiovascular disease, diabetes, asthma, tobacco use and exposure to secondhand smoke, alcohol use, obesity, physical activity, nutrition, oral health, health among women of reproductive age, arthritis, chronic kidney disease, COPD and adult immunizations. These programs work in multiple settings and are multi-level, including work on policy, environmental, and systems changes in communities, worksites, schools, and health care settings as well as individual knowledge, behavior change, and self-management of chronic conditions. In order to reduce the mortality and morbidity resulting from chronic diseases and prevent chronic conditions and their risk factors, public health chronic disease programs need access to data for relevant and sufficient chronic disease indicators to understand the patterns within their populations, how best to intervene, and program impact. These newly revised Chronic Disease Indicators provide state and territorial health departments and other health agencies with a framework for chronic disease surveillance in the form of rigorously-defined consensus measures that are relevant to their programs.

IV. References

1. Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. Chronic Disease Indicators. Website. <http://apps.nccd.cdc.gov/cdi/Default.aspx>. Accessed March 27, 2013.
2. Council of State and Territorial Epidemiologists. Modification of Chronic Disease Indicators. Position Statement #98-CD-01. 1998. <http://c.ymcdn.com/sites/www.cste.org/resource/resmgr/PS/1998-CD-1.pdf>. Accessed March 27, 2013.
3. Council of State and Territorial Epidemiologists. Revise Chronic Disease Indicators (CDI) to reflect expert and stakeholder recommendations. Position Statement #02-CD.MCH.OH -02. 2002. <http://c.ymcdn.com/sites/www.cste.org/resource/resmgr/PS/2002-CDMCHOH-2.pdf>. Accessed March 27, 2013



4. Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. The Power of Prevention: Chronic disease...the public health challenge of the 21st century. 2009. Accessed March 27, 2013.

V. Coordination

Agencies for Response:

- (1) Centers for Disease Control & Prevention
Thomas Frieden, MD, MPH
Director
1600 Clifton Rd., NE
Atlanta, GA 30333
(404) 639-7000
txf2@cdc.gov

Agencies for Information:

- (1) National Association of Chronic Disease Directors
John W. Robitscher, MPH
Chief Executive Officer
2200 Century Parkway, Suite 250
Atlanta, GA 30345
(770) 458-7400 x 226
john@chronicdisease.org
- (2) Association of Maternal and Child Health Programs
Michael Fraser, PhD, CAE
Chief Executive Officer
2030 M Street, NW
Suite 350
Washington, DC 20036
(202) 266-3038 x103
mfraser@amchp.org
- (3) Association of State and Territorial Dental Directors
Christine Wood, RDH, BS
Executive Director
1838 Fieldcrest Drive
Sparks, NV 89434
775-626-5008
cwood@astdd.org

VI. Submitting Author:

- (1) Sara L. Huston, PhD
Chronic Disease Epidemiologist
Maine Center for Disease Control & Prevention
244 Water St, 2nd Floor
11 SHS
Augusta, ME 04333
207-287-1967
Sara.Huston@maine.gov



Co-Author:

- (1) Active Member Associate Member

Khosrow Heidari, PhD
Chronic Disease Epidemiology Director
South Carolina Department of Health and Environmental Control
2600 Bull Street
St Julian Building
Columbia, SC 29204
803 545-4928
heidarik@dhec.sc.gov

- (2) Active Member Associate Member

James B. Holt, MPA, PhD
Team Leader, Analytic Methods
CDC Division of Population Health
Mailstop K-67
4770 Buford Highway, N.E.
Atlanta, GA 30341
770-488-5510
jgh4@cdc.gov



Appendix A: Working Group Members

Alcohol	
Clark Denny, PhD	Fetal Alcohol Syndrome Prevention Team, CDC
Katy Gonzales, MPH	Michigan Department of Community Health
Dafna Kanny, PhD	Excessive Alcohol Use Prevention Team, CDC
Jim Roeber, MSPH (chair)	New Mexico Department of Health
Arthritis	
Charles G. (Chad) Helmick, MD (chair)	Arthritis Program, CDC
Randy Tanner, MPA	Utah Department of Health
Kristina A. Theis, MPH	Arthritis Program, CDC
Asthma	
Wendy Brunner, MS, PhD	Minnesota Department of Health
Rebekah Buckley, MPH, CRT, AE-C	School Health Branch, CDC
Steve Kinchen, BS	Division of Adolescent and School Health, CDC
Sarah Lyon-Callo, PhD	Michigan Department of Community Health
Melissa Lurie, MPH	New York State Department of Health
Liza Lutzker, MPH	California Department of Public Health
Jeanne E. Moorman, PhD	Air Pollution and Respiratory Health Branch, CDC
Trang Q. Nguyen, MD, Dr.PH, MPH	New York State Department of Health
Cancer	
Polly Hager, MSN, RN	Michigan Department of Community Health
Tara Hylton, MPH	Florida Department of Health
Djenaba A. Joseph, MD, MPH (co-chair)	Division of Cancer Prevention and Control, CDC
Jacqueline W. Miller, MD, FACS	Division of Cancer Prevention and Control, CDC
Minnie Inzer Muniz, MEd	Idaho Department of Health and Welfare
Lynne Nilson, MPH, MCHES	Utah Department of Health
Cheryll C. Thomas, MSPH (co-chair)	Division of Cancer Prevention and Control, CDC
Julie Townsend, MS	Division of Cancer Prevention and Control, CDC
Donna Williams, MS, MPH, DrPH	Louisiana State University Health Sciences Center, School of Public Health
Chronic Kidney Disease	
Nilka Rios Burrows, MPH	Division of Diabetes Translation, CDC
David Gilbertson, PhD (chair)	United States Renal Data System, Minneapolis Medical Research Foundation
Patsy Myers, RD, MS, DrPH	South Carolina Department of Health and Environmental Control
Brenda Ralls, PhD	Utah Department of Health
Xiao-Ying Yu, MD, MS	Maryland Department of Health and Mental Hygiene
COPD	
Janet B. Croft, PhD	Division of Population Health, CDC
Tim Flood, MD	Arizona Department of Health Services
Harry Herrick, MSPH, MSW	North Carolina Department of Health and Human Services
Roy A. Pleasants, II, PharmD	Duke University School of Medicine, and Campbell University College of Pharmacy and Health Sciences
Anne G. Wheaton, Ph.D.	Division of Population Health, CDC
Xiao-Ying Yu, MD, MS (chair)	Maryland Department of Health and Mental Hygiene
CVD	
Shifan Dai, MD, PhD	Division for Heart Disease and Stroke Prevention, CDC
Carrie Daniels, MS	Oklahoma State Department of Health



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TERRITORIAL EPIDEMIOLOGISTS**

Rachel S. Davis, MPH	Division for Heart Disease and Stroke Prevention, CDC
Jing Fang, MD, MS	Division for Heart Disease and Stroke Prevention, CDC
Joseph Grandpre, PhD, MPH (chair)	Wyoming Department of Health
Michael Schooley, MPH	Division for Heart Disease and Stroke Prevention, CDC
Diabetes	
Lawrence Barker, PhD	Division of Diabetes Translation, CDC
Carolyn Bridges, MD, FACP	Immunization Services Division, CDC
Nilka Rios Burrows, MPH	Division of Diabetes Translation, CDC
Joe Grandpre, PhD, MPH	Wyoming Department of Health
Youjie Huang, MD, DrPH, MPH	Florida Department of Health
Stephanie Poulin	Connecticut Department of Health
Brenda Ralls, PhD	Utah Department of Health
Patricia Shea	Division of Diabetes Translation, CDC
Joan Ware, BSN, MSPH (chair)	National Association of Chronic Disease Directors
Desmond Williams, MD, PhD	Division of Diabetes Translation, CDC
Immunization	
Carolyn B. Bridges, MD, FACP	Immunization Services Division, CDC
Sara L. Huston, PhD	Maine Center for Disease Control & Prevention and University of Southern Maine
Donna Lazorik, RN, MS	Massachusetts Department of Public Health
CAPT Raymond A. Strikas, MD, MPH, FACP	Immunization Services Division, CDC
Walter W. Williams, MD, MPH, FACPM (chair)	Immunization Services Division, CDC
Reproductive Health	
Ana Penman-Aguilar, PhD, MPH	Division of Reproductive Health, CDC
Shanna Cox, MSPH	Division of Reproductive Health, CDC
Denise D'Angelo, MPH	Division of Reproductive Health, CDC
Violanda Grigorescu, MD, MSPH	Division of Reproductive Health, CDC
Adeline Yerkes (chair)	National Association of Chronic Disease Directors
Nutrition, Physical Activity, and Weight Status	
Renee Calanan, PhD (chair)	Colorado Department of Public Health and Environment
Susan A. Carlson, MPH	Division of Nutrition, Physical Activity and Obesity, CDC
Rosanne P. Farris, PhD, RD	Division of Nutrition, Physical Activity and Obesity, CDC
Janet E. Fulton, PhD	Division of Nutrition, Physical Activity and Obesity, CDC
Deborah Galuska, PhD	Division of Nutrition, Physical Activity and Obesity, CDC
Kirsten Grimm, MPH	Division of Nutrition, Physical Activity and Obesity, CDC
Youjie Huang, MD, DrPH	Florida Department of Health
Jessica Irizarry-Ramos, MS, PhD Candidate	Puerto Rico Department of Health
Sonia A. Kim, PhD	Division of Nutrition, Physical Activity and Obesity, CDC
Steve Kinchen, BS	Division of Adolescent and School Health, CDC
Allison Nihiser, MPH	School Health Branch, CDC
Ghazala Perveen, MBBS, PhD, MPH	Kansas Department of Health and Environment
Kelley S. Scanlon, PhD, RD	Division of Nutrition, Physical Activity and Obesity, CDC
Bettylou Sherry, PhD, RD	Division of Nutrition, Physical Activity and Obesity, CDC



**COUNCIL OF STATE AND
TERRITORIAL EPIDEMIOLOGISTS**

Older Adults	
Lynda A. Anderson, PhD (chair)	Healthy Aging Program, CDC
Carol McPhillips-Tangum, MPH	National Association of Chronic Disease Directors
Jennifer Mead, MPH	Oregon Department of Human Services - Aging and People with Disabilities
Cora Plass, MSW, LISW	South Carolina Department of Health and Environmental Control
Oral Health	
Laurie Barker, MSPH	Division of Oral Health, CDC
Renee Calanan, PhD	Colorado Department of Public Health and Environment
Cassandra Martin Frazier, MPH, CHES	Division of Oral Health, CDC
Mei Lin, MD, MPH, MSc	Division of Oral Health, CDC
Junhie Oh, BDS, MPH (chair)	Rhode Island Department of Health Oral Health Program
Gregg Reed, MPH	North Dakota Department of Health, Division of Family Health MCH/Oral Health
Overarching Conditions	
Elizabeth Barton	South Carolina Department of Health and Environmental Control
Khosrow Heidari, PhD (chair)	South Carolina Department of Health and Environmental Control
James B. Holt, MPA, PhD	Division of Population Health, CDC
Chris Maylahn, MPH	New York State Department of Health
Rashid Njai	Division of Community Health, CDC
Ann Pobutsky	Hawaii Department of Health
Letitia Presley-Cantrell, PhD	Division of Population Health, CDC
Matthew M. Zack, MD	Division of Population Health, CDC
Tobacco	
Rebekah Buckley, MPH, CRT, AE-C	School Health Branch, CDC
Shanta Dube, PhD (chair)	Office on Smoking and Health, CDC
Erika Fulmer, MHA	Office on Smoking and Health, CDC
Steve Kinchen, BS	Division of Adolescent and School Health, CDC
Dennis Peyton	Kentucky
Overall Set of Indicators	
Chuck Gollmar	National Association of Chronic Disease Directors
Khosrow Heidari, PhD	South Carolina Department of Health and Environmental Control
James B. Holt, MPA, PhD	Division of Population Health, CDC
Sara L. Huston, PhD	Maine Center for Disease Control & Prevention and University of Southern Maine
Yong Liu, MS, MD	Division of Population Health, CDC
Randy Schwartz, MSPH	National Association of Chronic Disease Directors
Ann Ussery-Hall, MPH, CHES	National Association of Chronic Disease Directors
Annie Tran, MPH	Council of State and Territorial Epidemiologists



Appendix B. Recommended Revised Set of Chronic Disease Indicators

Indicator Group	#	Indicator Measurement	Existing/Revised/New	Data Source
Alcohol	1.1	Alcohol use among youth	Existing	YRBSS ¹
Alcohol	1.2	Alcohol use before pregnancy	New	PRAMS ²
Alcohol	2.1	Binge drinking prevalence among youth	Existing	YRBSS
Alcohol	2.2	Binge drinking prevalence among adults aged ≥18 years	Existing	BRFSS
Alcohol	2.3	Binge drinking prevalence among women aged 18-44 years	Existing	BRFSS
Alcohol	3	Binge drinking frequency among adults aged ≥18 years	New	BRFSS ³
Alcohol	4	Binge drinking intensity among adults aged ≥18 years	New	BRFSS
Alcohol	5.1	Heavy drinking among adults aged ≥18 years	Revised	BRFSS
Alcohol	5.2	Heavy drinking among women aged 18-44 years	New	BRFSS
Alcohol	6	Chronic liver disease mortality	Existing	Death certificate
Alcohol	7	Per capita alcohol consumption among persons aged ≥14 years	New	AEDS ⁴
Alcohol	8	Amount of alcohol excise tax by beverage type	New	APIS ⁵
Alcohol	9	Commercial host (dram shop) liability for alcohol service	New	Legal research ⁶
Alcohol	10	Local control of the regulation of alcohol outlet density	New	Legal research ⁷
Arthritis	1.1	Arthritis among adults aged ≥18 years	Existing	BRFSS
Arthritis	1.2	Arthritis among adults aged ≥18 years who are obese	Existing	BRFSS
Arthritis	1.3	Arthritis among adults aged ≥18 years who have diabetes	Existing	BRFSS
Arthritis	1.4	Arthritis among adults aged ≥18 years who have heart disease	Existing	BRFSS
Arthritis	2	Activity limitation due to arthritis among adults aged ≥18 years	Existing	BRFSS
Arthritis	3	Physical inactivity among adults aged ≥18 years with arthritis	Existing	BRFSS
Arthritis	4	Fair or poor health among adults aged ≥18 years with arthritis	Existing	BRFSS
Arthritis	5	Adults aged ≥18 years with arthritis who have taken a class to learn how to manage arthritis symptoms	Existing	BRFSS
Asthma	1.1	Current asthma prevalence	New	BRFSS/NSCH ⁸
Asthma	1.2	Asthma prevalence among women aged 18-44 years	New	BRFSS

¹Youth Risk Behavior Surveillance System

²Pregnancy Risk Assessment Monitoring System

³Behavioral Risk Factor Surveillance System

⁴Alcohol Epidemiologic Data System

⁵Alcohol Policy Information System

⁶Mosher JF, Cohen EN, Jernigan DH. Commercial host (dram shop) liability: current status and trends. Manuscript submitted for publication.

⁷Mosher JF, Treffers R. State preemption, local control, and the regulation of alcohol retail outlet density. Am J Prev Med 2013;44:399-405.

⁸National Survey of Children's Health



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Indicator Group	#	Indicator Measurement	Existing/Revised/New	Data Source
Asthma	2.1	Emergency department (ED) visit rate for asthma	New	SEDD ⁹
Asthma	2.2	At-risk emergency department (ED) visit rate for asthma	New	SEDD; BRFSS; NSCH
Asthma	3.1	Hospitalizations for asthma	Existing	SID ¹⁰
Asthma	3.2	Risk-based hospital discharge rate for asthma	New	SID; BRFSS; NSCH
Asthma	4.1	Asthma mortality rate	Existing	Death certificate
Asthma	4.2	Risk-based asthma mortality rate	New	Death certificate, BRFSS
Asthma	5.1	Influenza vaccination among non-institutionalized adults aged 18-64 years with asthma	New	BRFSS
Asthma	5.2	Influenza vaccination among non-institutionalized adults aged ≥65 years with asthma	New	BRFSS
Asthma	6.1	Pneumococcal vaccination among non-institutionalized adults aged 18-64 years with asthma	New	BRFSS
Asthma	6.2	Pneumococcal vaccination among non-institutionalized adults aged ≥65 years with asthma	New	BRFSS
Cancer	1	Mammography use among women aged 50-74 years	Revised	BRFSS
Cancer	2.1	Papanicolaou smear use among adult women aged 21-65 years	Revised	BRFSS
Cancer	2.2	Recent Papanicolaou smear use among women aged 21-44 years	New	BRFSS
Cancer	3	Fecal occult blood test, sigmoidoscopy, or colonoscopy among adults aged 50-75 years	Revised	BRFSS
Cancer	4.1	Invasive cancer (all sites combined), incidence	Existing	Statewide central cancer registries
Cancer	4.2	Invasive cancer (all sites combined), mortality	Existing	Death certificate
Cancer	5.1	Invasive cancer of the female breast, incidence	Existing	Statewide central cancer registries
Cancer	5.2	Cancer of the female breast, mortality	Existing	Death certificate
Cancer	6.1	Invasive cancer of the cervix, incidence	Existing	Statewide central cancer registries
Cancer	6.2	Cancer of the female cervix, mortality	Existing	Death certificate
Cancer	7.1	Cancer of the colon and rectum (colorectal), incidence	Existing	Statewide central cancer registries
Cancer	7.2	Cancer of the colon and rectum (colorectal), mortality	Existing	Death certificate
Cancer	8.1	Cancer of the lung and bronchus, incidence	Existing	Statewide central cancer registries
Cancer	8.2	Cancer of the lung and bronchus, mortality	Existing	Death certificate
Cancer	9.1	Invasive melanoma, incidence	Existing	Statewide central cancer registries
Cancer	9.2	Melanoma, mortality	Existing	Death certificate
Cancer	10.1	Invasive cancer of the oral cavity or pharynx, incidence	Existing	Statewide central cancer registries
Cancer	10.2	Cancer of the oral cavity and pharynx, mortality	Existing	Death certificate

⁹State Emergency Department Database

¹⁰State Inpatient Database



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Indicator Group	#	Indicator Measurement	Existing/Revised/New	Data Source
Cancer	11.1	Invasive cancer of the prostate, incidence	Existing	Statewide central cancer registries
Cancer	11.2	Cancer of the prostate, mortality	Existing	Death certificate
Cardiovascular Disease	1.1	Mortality from total cardiovascular diseases	Revised	Death certificate
Cardiovascular Disease	1.2	Mortality from diseases of the heart	Existing	Death certificate
Cardiovascular Disease	1.3	Mortality from coronary heart disease	Existing	Death certificate
Cardiovascular Disease	1.4	Mortality from heart failure	Revised	Death certificate
Cardiovascular Disease	1.5	Mortality from cerebrovascular disease (stroke)	Existing	Death certificate
Cardiovascular Disease	2	Hospitalization for heart failure among Medicare-eligible persons aged ≥ 65 years	Revised	CMS ¹¹ Part A claims data; CMS Medicare population estimates
Cardiovascular Disease	3.1	Hospitalization for stroke	Revised	SID
Cardiovascular Disease	3.2	Hospitalization for acute myocardial infarction	Revised	SID
Cardiovascular Disease	4	Cholesterol screening among adults aged ≥ 18 years	Existing	BRFSS
Cardiovascular Disease	5	High cholesterol prevalence among adults aged ≥ 18 years	New	BRFSS
Cardiovascular Disease	6.1	Awareness of high blood pressure among adults aged ≥ 18 years	Existing	BRFSS
Cardiovascular Disease	6.2	Awareness of high blood pressure among women aged 18-44 years	New	BRFSS
Cardiovascular Disease	7	Taking medicine for high blood pressure control among adults aged ≥ 18 years with high blood pressure	Existing	BRFSS
Cardiovascular Disease	8	Pre-pregnancy hypertension	New	PRAMS
Cardiovascular Disease	9.1	Influenza vaccination among non-institutionalized adults aged 18-64 years with a history of coronary heart disease or stroke	New	BRFSS
Cardiovascular Disease	9.2	Influenza vaccination among non-institutionalized adults aged ≥ 65 years with a history of coronary heart disease or stroke	New	BRFSS
Cardiovascular Disease	10.1	Pneumococcal vaccination among non-institutionalized adults aged 18-64 years with a history of coronary heart disease	New	BRFSS
Cardiovascular Disease	10.2	Pneumococcal vaccination among non-institutionalized adults aged ≥ 65 years with a history of coronary heart disease	New	BRFSS
Chronic Kidney Disease	1	Mortality with end-stage renal disease	Existing	Death certificate
Chronic Kidney Disease	2.1	Incidence of treated end-stage renal disease	Existing	USRDS ¹²
Chronic Kidney Disease	2.2	Incidence of treated end-stage renal disease attributed to diabetes	Existing	USRDS
Chronic Kidney Disease	3	Prevalence of chronic kidney disease among adults aged ≥ 18 years	New	BRFSS

¹¹ Centers for Medicare and Medicaid Services

¹² U.S. Renal Data System



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Indicator Group	#	Indicator Measurement	Existing/Revised/New	Data Source
Chronic Obstructive Pulmonary Disease	1.1	Mortality with chronic obstructive pulmonary disease as underlying cause among adults aged ≥ 45 years	Revised	Death certificate
Chronic Obstructive Pulmonary Disease	1.2	Mortality with chronic obstructive pulmonary disease as underlying or contributing cause among adults aged ≥ 45 years	Revised	Death certificate
Chronic Obstructive Pulmonary Disease	2	Prevalence of chronic obstructive pulmonary disease among adults	New	BRFSS
Chronic Obstructive Pulmonary Disease	3	Prevalence of current smoking among adults with diagnosed chronic obstructive pulmonary disease	New	BRFSS
Chronic Obstructive Pulmonary Disease	4	Prevalence of activity limitation among adults with diagnosed chronic obstructive pulmonary disease	New	BRFSS
Chronic Obstructive Pulmonary Disease	5.1	Hospitalization for chronic obstructive pulmonary disease as first-listed diagnosis	New	SID
Chronic Obstructive Pulmonary Disease	5.2	Hospitalization for chronic obstructive pulmonary disease as any diagnosis	New	SID
Chronic Obstructive Pulmonary Disease	5.3	Hospitalization for chronic obstructive pulmonary disease as first-listed diagnosis among Medicare-eligible persons aged ≥ 65 years	New	CMS Part A claims data; CMS Medicare population estimates
Chronic Obstructive Pulmonary Disease	5.4	Hospitalization for chronic obstructive pulmonary disease as any diagnosis among Medicare-eligible persons aged ≥ 65 years	New	CMS Part A claims data; CMS Medicare population estimates
Chronic Obstructive Pulmonary Disease	6.1	Emergency department visits rate for chronic obstructive pulmonary disease as first-listed diagnosis	New	SEDD; SID
Chronic Obstructive Pulmonary Disease	6.2	Emergency department visits rate for chronic obstructive pulmonary disease as any diagnosis	New	SEDD; SID
Chronic Obstructive Pulmonary Disease	7	Influenza vaccination among non-institutionalized adults aged ≥ 45 years with chronic obstructive pulmonary disease	New	BRFSS
Chronic Obstructive Pulmonary Disease	8	Pneumococcal vaccination among adults aged ≥ 45 years with chronic obstructive pulmonary disease	New	BRFSS
Diabetes	1.1	Mortality due to diabetes reported as any listed cause	Revised	Death certificate
Diabetes	1.2	Mortality with diabetic ketoacidosis	New	Death certificate
Diabetes	2.1	Diabetes prevalence among adults aged ≥ 18 years	Existing	BRFSS
Diabetes	2.2	Diabetes prevalence among women aged 18-44 years	New	BRFSS
Diabetes	3.1	Pre-pregnancy diabetes	New	PRAMS
Diabetes	3.2	Gestational diabetes	New	Birth certificate
Diabetes	4	Amputation of a lower extremity attributable to diabetes	Existing	SID
Diabetes	5	Foot examination among adults aged ≥ 18 years with diabetes	Existing	BRFSS
Diabetes	6	Glycosylated hemoglobin measurement among adults aged ≥ 18 years with diabetes	Revised	BRFSS



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Indicator Group	#	Indicator Measurement	Existing/Revised/New	Data Source
Diabetes	7	Dilated eye examination among adults aged ≥ 18 years with diabetes	Existing	BRFSS
Diabetes	8	Visits to dentist or dental clinic among adults aged ≥ 18 years with diabetes	New	BRFSS
Diabetes	9	Hospitalization with diabetes	Existing	SID
Diabetes	10	Adults with diabetes aged ≥ 18 years who have taken a diabetes self-management course	New	BRFSS
Diabetes	11.1	Prevalence of high cholesterol among adults aged ≥ 18 years with diabetes	New	BRFSS
Diabetes	11.2	Prevalence of high blood pressure among adults aged ≥ 18 years with diabetes	New	BRFSS
Diabetes	11.3	Prevalence of depressive disorders among adults aged ≥ 18 years with diabetes	New	BRFSS
Diabetes	12.1	Influenza vaccination among non-institutionalized adults aged 18-64 years with diabetes	Revised	BRFSS
Diabetes	12.2	Influenza vaccination among non-institutionalized adults aged ≥ 65 years with diabetes	Revised	BRFSS
Diabetes	13.1	Pneumococcal vaccination among non-institutionalized adults aged 18-64 years with diabetes	Revised	BRFSS
Diabetes	13.2	Pneumococcal vaccination among non-institutionalized adults aged ≥ 65 years with diabetes	Revised	BRFSS
Disability	1	Disability among adults aged ≥ 65 years	New	ACS ¹³ 1-Year Estimates
Immunization	1	Influenza vaccination among non-institutionalized adults aged ≥ 18 years	Revised	BRFSS
Mental Health	1	Recent mentally unhealthy days among adults aged ≥ 18 years	Existing	BRFSS
Mental Health	2	≥ 14 recent mentally unhealthy days among women aged 18-44 years	New	BRFSS
Mental Health	3	Postpartum depressive symptoms	New	PRAMS
Nutrition, Physical Activity, and Weight Status	1.1	Obesity among adults aged ≥ 18 years	Existing	BRFSS
Nutrition, Physical Activity, and Weight Status	1.2	Obesity among high school students	Revised	YRBSS

¹³ American Community Survey (U.S. Census Bureau)



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Indicator Group	#	Indicator Measurement	Existing/Revised/New	Data Source
Nutrition, Physical Activity, and Weight Status	2.1	Overweight or obesity among adults aged ≥ 18 years	Existing	BRFSS
Nutrition, Physical Activity, and Weight Status	2.2	Overweight or obesity among high school students	New	YRBSS
Nutrition, Physical Activity, and Weight Status	2.3	Overweight and obesity among women aged 18-44 years	New	BRFSS
Nutrition, Physical Activity, and Weight Status	2.4	Pre-pregnancy overweight and obesity	New	Birth certificate
Nutrition, Physical Activity, and Weight Status	3.1	Healthy weight among adults aged ≥ 18 years	New	BRFSS
Nutrition, Physical Activity, and Weight Status	3.2	Healthy weight among high school students	New	YRBSS
Nutrition, Physical Activity, and Weight Status	4.1	Median daily frequency of fruit consumption among high school students	Revised	YRBSS
Nutrition, Physical Activity, and Weight Status	4.2	Median daily frequency of fruit consumption among adults aged ≥ 18 years	Revised	BRFSS
Nutrition, Physical Activity, and Weight Status	5.1	Median daily frequency of vegetable consumption among high school students	Revised	YRBSS
Nutrition, Physical Activity, and Weight Status	5.2	Median daily frequency of vegetable consumption among adults aged ≥ 18 years	Revised	BRFSS
Nutrition, Physical Activity, and Weight Status	6	Census tracts with healthier food retailers within $\frac{1}{2}$ mile of boundary	New	InfoUSA; USDA ¹⁴

¹⁴ U.S. Department of Agriculture (listing of SNAP authorized retailers)



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Indicator Group	#	Indicator Measurement	Existing/Revised/New	Data Source
Nutrition, Physical Activity, and Weight Status	7.1	Farmers markets that accept Women and Infant Children (WIC) farmers market nutrition program coupons	New	USDA National Farmers' Market Directory
Nutrition, Physical Activity, and Weight Status	7.2	Farmers markets that accept Supplemental Nutrition Assistance Program (SNAP) benefits	New	USDA National Farmers' Market Directory
Nutrition, Physical Activity, and Weight Status	8	Number of farmers markets per 100,000 residents	New	USDA National Farmers' Market Directory
Nutrition, Physical Activity, and Weight Status	9.1	Presence of regulations pertaining to serving fruit in early care and education settings	New	ASHW ¹⁵
Nutrition, Physical Activity, and Weight Status	9.2	Presence of regulations pertaining to serving vegetables in early care and education settings	New	ASHW
Nutrition, Physical Activity, and Weight Status	10	No leisure-time physical activity among adults aged ≥ 18 years	New	BRFSS
Nutrition, Physical Activity, and Weight Status	11.1	Meeting aerobic physical activity guidelines for substantial health benefits among adults aged ≥ 18 years	Revised	BRFSS
Nutrition, Physical Activity, and Weight Status	11.2	Meeting aerobic physical activity guidelines for substantial health benefits and for muscle-strengthening activity among adults aged ≥ 18 years	New	BRFSS
Nutrition, Physical Activity, and Weight Status	11.3	Meeting aerobic physical activity guidelines for additional and more extensive health benefits among adults aged ≥ 18 years	New	BRFSS
Nutrition, Physical Activity, and Weight Status	11.4	Meeting aerobic physical activity guidelines among high school students	Revised	YRBSS
Nutrition, Physical Activity, and Weight Status	12.1	Participation in daily school physical education classes among high school students	New	YRBSS

¹⁵ Achieving a State of Healthy Weight: A National Assessment of Obesity Prevention Terminology in Child Care Regulations (updated annually)



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Indicator Group	#	Indicator Measurement	Existing/Revised/New	Data Source
Nutrition, Physical Activity, and Weight Status	12.2	Soda consumption among high school students	New	YRBSS
Nutrition, Physical Activity, and Weight Status	13.1	Middle and high schools that allow community-sponsored use of physical activity facilities by youth outside of normal school hours	New	CDC School Health Profiles
Nutrition, Physical Activity, and Weight Status	13.2	Middle schools and high schools that allow students to purchase soda or fruit drinks	New	CDC School Health Profiles
Nutrition, Physical Activity, and Weight Status	13.3	Middle schools and high schools that allow students to purchase sports drinks	New	CDC School Health Profiles
Nutrition, Physical Activity, and Weight Status	13.4	Middle schools and high schools that offer less healthy foods as competitive foods	New	CDC School Health Profiles
Nutrition, Physical Activity, and Weight Status	14.1	Presence of regulations pertaining to screen time in early care and education settings	New	ASWH
Nutrition, Physical Activity, and Weight Status	14.2	Television viewing among high school students	Revised	YRBSS
Nutrition, Physical Activity, and Weight Status	14.3	Computer use among high school students	New	YRBSS
Nutrition, Physical Activity, and Weight Status	15	Infants breastfed at 6 months	New	National Immunization Survey
Nutrition, Physical Activity, and Weight Status	16	Receiving formula supplementation within the first 2 days of life among breastfed infants	New	National Immunization Survey
Nutrition, Physical Activity, and Weight Status	17	Mean maternity practices in infant nutrition care score	New	mPINC ¹⁶

¹⁶ Maternity Practices in Infant Nutrition and Care (CDC biennial survey)



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Indicator Group	#	Indicator Measurement	Existing/Revised/New	Data Source
Nutrition, Physical Activity, and Weight Status	18	Live births occurring at Baby Friendly Facilities	New	CDC Breastfeeding Report Card
Nutrition, Physical Activity, and Weight Status	19	State child care regulation supports onsite breastfeeding	New	ASHW
Nutrition, Physical Activity, and Weight Status	20	Presence of regulations pertaining to avoiding sugar in early care and education settings	New	ASHW
Older Adults	1	Hospitalization for hip fracture among Medicare-eligible persons aged ≥ 65 years	Existing	CMS Part A claims data; CMS Medicare population estimates
Older Adults	2	Percentage of female Medicare beneficiaries aged ≥ 65 years who reported not ever being screened for osteoporosis with a bone mass or bone density measurement	New	MCBS ¹⁷
Older Adults	3.1	Proportion of older adults aged ≥ 65 years who are up to date on a core set of clinical preventive services	New	BRFSS
Older Adults	3.2	Proportion of older adults aged 50-64 years who are up to date on a core set of clinical preventive services	New	BRFSS
Older Adults	4	Prevalence of 2 or more chronic conditions among Medicare-eligible persons aged > 65 years	New	CMS CCW ¹⁸
Oral Health	1.1	Visits to dentist or dental clinic among adults aged ≥ 18 years	Existing	BRFSS
Oral Health	1.2	Dental visits among children and adolescents aged 1-17 years	New	NSCH
Oral Health	2.1	Preventive dental visits among children and adolescents aged 1-17 years	New	NSCH
Oral Health	2.2	Preventive dental care before pregnancy	New	PRAMS
Oral Health	3	Oral health services at Federally Qualified Health Centers	New	UDS ¹⁹
Oral Health	4.1	All teeth lost among adults aged ≥ 65 years	Existing	BRFSS
Oral Health	4.2	Six or more teeth lost among adults aged ≥ 65 years	New	BRFSS
Oral Health	4.3	No tooth loss among adults aged 18-64 years	New	BRFSS
Oral Health	5	Population served by community water systems that receive optimally fluoridated drinking water	New	WFRS ²⁰

¹⁷ Medicare Current Beneficiary Survey

¹⁸ CMS Chronic Condition Data Warehouse

¹⁹ Uniform Data System (HRSA)

²⁰ Water Fluoridation Reporting System



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Indicator Group	#	Indicator Measurement	Existing/Revised/New	Data Source
Overarching Conditions	1.1	Current lack of health insurance among adults aged 18-64 years	Existing	BRFSS
Overarching conditions	1.2	Current health care coverage among women aged 18-44 years	New	BRFSS
Overarching Conditions	1.3	Health insurance coverage before pregnancy	New	PRAMS
Overarching Conditions	2.1	High school completion among adults aged 18-24 years	Existing	CPS ²¹
Overarching conditions	2.2	High school completion among women aged 18-44 years	New	BRFSS
Overarching Conditions	3.1	Poverty	Existing	CPS
Overarching Conditions	3.2	Poverty among women aged 18-44 years	New	CPS
Overarching Conditions	4.1	Life expectancy at birth	Existing	National Vital Statistics System
Overarching Conditions	4.2	Life expectancy at age 65 years	Existing	National Vital Statistics System
Overarching Conditions	5	Premature mortality among adults aged 45-64 years	Existing	Death certificate
Overarching Conditions	6.1	Fair or poor self-rated health status among adults aged ≥18 years	Existing	BRFSS
Overarching Conditions	6.2	Self-rated health status among women aged 18-44 years	New	BRFSS
Overarching Conditions	7.1	Recent physically unhealthy days among adults aged ≥18 years	Existing	BRFSS
Overarching Conditions	7.2	Recent activity limitation among adults aged ≥18 years	Existing	BRFSS
Overarching Conditions	8	Prevalence of sufficient sleep among adults aged ≥18 years	New	BRFSS
Overarching Conditions	9	Gini Index	New	ACS
Reproductive Health	1	Timeliness of routine health care checkup among women aged 18-44 years	New	BRFSS
Reproductive Health	2	Postpartum checkup	New	PRAMS
Reproductive Health	3	Folic acid supplementation	New	PRAMS
Tobacco	1.1	Current cigarette smoking among youth	Existing	YRBSS
Tobacco	1.2	Current smoking among adults aged ≥18 years	Revised	BRFSS
Tobacco	1.3	Current cigarette smoking among women aged 18-44 years	New	BRFSS
Tobacco	1.4	Cigarette smoking before pregnancy	New	PRAMS
Tobacco	2.1	Current smokeless tobacco use among youth	Existing	YRBSS
Tobacco	2.2	Current smokeless tobacco use among adults aged ≥18 years	New	BRFSS
Tobacco	3	Quit attempts in the past year among current smokers	New	BRFSS
Tobacco	4	States that allows stronger local tobacco control and prevention laws	New	STATE ²²
Tobacco	5	Proportion of jurisdictions with strong policies that require retail licenses to sell tobacco products	New	STATE

²¹ Current Population Survey (U.S. Census Bureau)

²² State Tobacco Activities Tracking and Evaluation System (CDC Office on Smoking and Health)



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Indicator Group	#	Indicator Measurement	Existing/Revised/New	Data Source
Tobacco	6	Proportion of jurisdictions with 100%, 24/7, public policies for tobacco-free workplaces and other public places (private workplaces, restaurants and bars)	New	STATE
Tobacco	7	Amount of tobacco product excise tax	New	STATE
Tobacco	8	Percent tobacco revenue to fund at CDC recommended level	New	STATE
Tobacco	9	Tobacco-free schools	New	CDC School Health Profiles
Tobacco	10	Sale of cigarette packs	Existing	STATE
Tobacco	11.1	Pneumococcal vaccination among non-institutionalized adults aged 18-64 years who smoke	New	BRFSS
Tobacco	11.2	Pneumococcal vaccination among non-institutionalized adults aged ≥ 65 years who smoke	New	BRFSS

Appendix C. Indicators Recommended for Removal from the Chronic Disease Indicators.

Indicator Group	Indicator Name	Rationale for Removal
Cancer	Cancer of the bladder (in situ and invasive), incidence	Although bladder cancer remains a significant cause of morbidity and mortality, particularly among men, use of this indicator in addition to the other cancer incidence indicators was deemed unnecessary for the purposes of the chronic disease indicators
Cancer	Cancer of the bladder, mortality	Although bladder cancer remains a significant cause of morbidity and mortality, particularly among men, use of this indicator in addition to the other cancer mortality indicators was deemed unnecessary for the purposes of the chronic disease indicators.
Cancer	Clinical breast examination among women ≥ 40 years	The most recent U.S. Preventive Services Task Force (USPSTF) recommendations regarding screening for breast cancer found insufficient evidence to assess the additional benefits and harms of clinical breast examination beyond screening mammography among women 50 years and older. There is inadequate evidence that CBE in addition to mammography yields better outcomes than mammography alone.**
Cancer	Fecal occult blood test among adults aged ≥ 50 years	<p>These three indicators are replaced by one single proposed indicator, “Fecal occult blood test, sigmoidoscopy, or colonoscopy among adults aged 50 – 75 years” (Cancer #3), to reflect current U.S. Preventive Services Task Force Guidelines. The combined measure represents the proportion of respondents that are up-to-date with colorectal cancer screening.</p> <p>Prior to 2008, Behavioral Risk Factor Surveillance System (BRFSS) data could not be used assess the prevalence of sigmoidoscopy use and colonoscopy use separately. The current indicator, which measures sigmoidoscopy/colonoscopy use every 5 years, may underestimate screening prevalence with these methods as screening colonoscopy in average risk people is recommended every 10 years. Starting in 2008, BRFSS data can be used to assess sigmoidoscopy use and colonoscopy use separately resulting in a more accurate estimate of the use of these test types.</p> <p>These indicators are no longer consistent with USPSTF recommendations for colorectal cancer screening and do not maximize use of currently available data. USPSTF now recommends that average-risk adults aged 50 – 75 years be screened for colorectal cancer with one of three of options: 1) fecal occult blood test (FOBT) annually or, 2)</p>
Cancer	Fecal occult blood test or sigmoidoscopy/colonoscopy among adults aged ≥ 50 years	
Cancer	Sigmoidoscopy/colonoscopy among adults ≥ 50 years	

** <http://www.uspreventiveservicestaskforce.org/uspstf09/breastcancer/brcanrs.htm>



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		sigmoidoscopy every 5 years with FOBT every 3 years or, 3) colonoscopy every 10 years. *** As of 2008, BRFSS data can be used to measure the prevalence of use of each of these options alone.
CVD	Hospitalization for cerebrovascular accident or stroke among Medicare-eligible persons aged ≥ 65 years	Can occur in adults under age 65 years; therefore, the following CDI is more applicable: Hospitalization for stroke.
CVD	Hospitalization for congestive heart failure	Usually occurs in adults aged ≥ 65 years; therefore, more appropriate indicators are: Hospitalization for heart failure among Medicare-eligible persons aged ≥ 65 years; and Medicare-eligible persons aged ≥ 65 years hospitalized for heart failure.
CVD	Medicare-eligible persons aged ≥ 65 years hospitalized for cerebrovascular accident or stroke	Can occur in adults under age 65 years; therefore, the following CDI is more applicable: Hospitalization for stroke.
CVD	Medicare-eligible persons aged ≥ 65 years hospitalized for heart failure.	Indicator not needed. An existing indicator (Hospitalization for heart failure among Medicare-eligible persons aged ≥ 65 years) provides similar information.
Other Diseases and Risk Factors	Teeth cleaning among adults aged ≥ 18 years	The BRFSS last included the dental cleaning question in 2010. Due to resource constraints, it is unclear at this point if or when the question will be asked again in the BRFSS.

*** <http://www.uspreventiveservicestaskforce.org/uspstf/uspscolo.htm>



Appendix D. Additional Agencies for Information.

Agency for Healthcare Research and Quality
Carolyn M. Clancy, MD
Director
540 Gaither Road
Rockville, MD 20850
(301) 427-1200
Carolyn.Clancy@ahrq.hhs.gov

Centers for Medicare & Medicaid Services
Marilyn Tavenner, BSN, MHA
Administrator
7500 Security Boulevard
Baltimore, MD 21244
(410) 786-3151
Marilyn.Tavenner@cms.hhs.gov

Health Resources and Services Administration
Mary K. Wakefield, PhD, RN
Administrator
5600 Fishers Lane
Rockville, MD 20857
(301) 443-2216
MWakefield@hrsa.gov

National Institute on Alcohol Abuse and Alcoholism
Kenneth R. Warren, PhD
Director
5635 Fishers Lane
MSC 9304
Bethesda, MD 20892
(301) 443-5494
Kenneth.warren@nih.gov

National Institute of Diabetes and Digestive and Kidney Diseases
Griffin P. Rodgers, MD, MACP
Director
Bldg 31, Rm 9A06
31 Center Drive
MSC 2560
Bethesda, MD 20892
(301) 496-3583
GriffinR@extra.niddk.nih.gov

United States Census Bureau
Thomas L. Mesenbourg
Acting Director
4600 Silver Hill Road
Washington, DC 20233
(301) 763-2135
Thomas.L.Mesenbourg.Jr@census.gov



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United States Department of Agriculture
Food and Nutrition Service
Audrey Rowe
Administrator
3101 Park Center Drive
Alexandria, VA 22302
(703) 305-2062