August 3, 2020

Jeffrey M. Zinger
Information Collection Review Office
Centers for Disease Control and Prevention
1600 Clifton Road NE, MS D-74
Atlanta, Georgia 30329

Re: Behavioral Risk Factor Surveillance System Asthma Call-back Survey

Dear Mr. Zinger:

Thank you for the opportunity to submit comments on the Proposed Data Collection Submitted for Public Comment and Recommendations (Docket No. CDC-2020-0053) regarding the Behavioral Risk Factor Surveillance System (BRFSS) Asthma Call-back Survey (ACBS).

The American Lung Association is the oldest voluntary public health association in the United States, currently representing more than 36 million individuals living with chronic lung disease. An estimated 24.8 million Americans currently have asthma, including 5.5 million children.\textsuperscript{1}

Asthma cannot be cured, but it can be managed effectively through guidelines-based care. Consistent, comprehensive and regularly updated data on the prevalence of asthma and other key indicators of asthma control is critical to developing, implementing and evaluating programs and policies to reduce the burden of asthma. The Lung Association therefore encourages the Centers for Disease Control and Prevention (CDC) to continue to administer the Asthma Call-back Survey.

Asthma Call-back Survey data provide key information to the CDC’s National Asthma Control Program (NACP). The NACP tracks asthma prevalence, promotes asthma control and prevention and builds capacity in state health programs. It has been a highly effective program: while the rate of asthma has increased, asthma morbidity and mortality rates have decreased due to improved control of the disease among patients. Comprehensive and consistent data about asthma prevalence, hospitalizations and measures of asthma control are critical to determine program effectiveness across state asthma programs supported by the NACP. The Asthma Call-back Survey provides data that help the NACP and funded states evaluate state asthma programs to determine effectiveness and identify best practices. Clear outcome metrics ensure that the NACP will continue to provide effective asthma control interventions across the funded states.

Data from the Asthma Call-back Survey have also informed research featured in several journals, such as the CDC’s Morbidity and Mortality Weekly Report, Journal of Asthma, Medical Care, the Journal of Preventive Medicine, and others. As researchers continue to use these valuable data, they can identify trends related to asthma and help identify areas of innovation or concern in asthma care. Building the body of research around asthma can help inform evidence-based care and clinical guidelines.
The Lung Association encourages CDC to continue to look for opportunities to improve data collection on asthma. For example, the latest Asthma Call-back Survey data available for adults are from 2016 and the most recent data for children are from 2014. Regularly collected, comprehensive data that can be compared across all 50 states and include asthma prevalence and key measures of asthma control (such as symptoms, medication use, self-management education and environmental factors) for both adults and children are critical to the work of the American Lung Association and many other stakeholders working to help patients with asthma.

The Lung Association encourages CDC to continue to collect the Asthma Call-back Survey data and to continue to improve the collection of information about asthma so that it is consistent and inclusive across the United States. Thank you for the opportunity to provide comments.

Sincerely,

Harold P. Wimmer
National President and CEO

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