

Comments in response to the 60-day Federal Register Notice (FRN)

A 60-day Federal Register Notice was published in the Federal Register on April 7, 2026, Vol. 91, No. 66, pp. 17654-17656. CDC received five public comments related to this notice and can be found in their entirety within this attachment below. The following table summarizes the comment topics and CDC's response:

Public Comment #	Topic	Commenter	Organization	CDC's Response
Comment 1	Requested clarity on 50 additional data elements versus the 45 included in the 50-day FRN	Brett Fitzgerald	Longbow Public Policy Group, LLC	The 50 data elements used in the 60-day FRN was an estimate and there are actually 45 data elements being implemented.
Comment 2	Requesting to use FHIR with AI to support state-to-state data exchange.	David Rocha	N/A	Standard Response*
Comment 3	Modernize terminology and remove CSV's as a tool for case notifications, while also noting timeliness should be real time.	David Rocha	N/A	Standard Response*
Comment 4	Requests CDC to strengthen commitment to minimization of data collected, continue data modernization and standardization, and continue monitoring costs and burden to ensure they are controlled, resulting in effective public health surveillance and practice.	Andrew Langer	Main Street Foundation Center for Regulatory Analysis and Engagement	Standard Response*
Comment 5	Support for updates to the data collection	Anonymous	N/A	<i>No response provided as no contact information was included.</i>

	and benefit for public health.			
--	-----------------------------------	--	--	--

*Standard Response: Thank you for the comment related to the National Notifiable Diseases Surveillance System (NNDSS) data collection that was published in the 60-day Federal Register Notice on April 7, 2026. The CDC NNDSS Program acknowledges receipt of the comment and will take it into consideration when the data collection is executed.

The following are the public comments respectively.

Gadsden-Knowles, Kim (CDC/OD/OPHDST)

From: OMB-Comments (CDC)
Sent: Tuesday, April 7, 2026 7:53 AM
To: Gadsden-Knowles, Kim (CDC/OD/OPHDST)
Subject: FW: Inquiry Regarding Docket No. CDC-2026-0562

Hi Kim. As expected, the public commenter has asked a follow-up question about the NNDSS [0920-0728] package (see below). I sent him the 60d FRN Request Worksheet in response to his initial question, but he has asked if there is a list of the 50 additional data elements that are mentioned in the FRN Request Form Microsoft document? I let him know that ICRO is working with the Program to get an official list. Please let me know if this is available or if one can be created.

Thanks,
Jeff



JEFFREY M. ZIRGER, Ph.D.

Health Scientist

Centers for Disease Control and Prevention (CDC)

Department of Health and Human Services (HHS)

Phone: (470) 217-8909 (Mobile)

From: Brett Fitzgerald <Brett@longbowpolicy.com>
Sent: Monday, April 6, 2026 4:31 PM
To: OMB-Comments (CDC) <omb@cdc.gov>
Subject: RE: Inquiry Regarding Docket No. CDC-2026-0562

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Thank you for forwarding the relevant documents. Is there a list of the 50 additional data elements that are mentioned in the FRN Request Form Microsoft document? I see 45 data elements in the "Core Data" Excel sheet that are in bold and I'm unsure if those are new data elements or if there are separate, new data elements that will be collected.

Best,

Brett

Brett Fitzgerald
Public Policy Associate
Longbow Public Policy Group, LLC
(908) 720-8744 (Direct)
Brett@longbowpolicy.com

The information contained in this transmission is intended for the use of the individual or entity named above. If the reader of this message is not the intended recipient, you are hereby notified that any dissemination, distribution, or copying of this communication to any third party is strictly prohibited. If you received this message in error, please notify me immediately and follow with its deletion.

From: OMB-Comments (CDC) <omb@cdc.gov>

Sent: Monday, April 6, 2026 4:13 PM

To: Brett Fitzgerald <Brett@longbowpolicy.com>; OMB-Comments (CDC) <omb@cdc.gov>

Subject: RE: Inquiry Regarding Docket No. CDC-2026-0562

Good afternoon. Thank you for your interest in this CDC-sponsored data collection. Attached you can find several additional documents that were provided by the CDC Program as part of the 60-day FRN package for CDC-2026-0562 - National Notifiable Diseases Surveillance System (NNDSS) (OMB Control No. 0920-0728). These are being made available to help answer any questions you may have. Please let CDC know if additional materials are needed in order to help you make a more informed comment(s).

Regards,



JEFFREY M. ZIRGER, Ph.D.

Health Scientist

Centers for Disease Control and Prevention (CDC)

Department of Health and Human Services (HHS)

Phone: (470) 217-8909 (Mobile)

From: Brett Fitzgerald <Brett@longbowpolicy.com>

Sent: Monday, April 6, 2026 11:21 AM

To: OMB-Comments (CDC) <omb@cdc.gov>

Subject: Inquiry Regarding Docket No. CDC-2026-0562

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Jeffrey,

I'm reaching out regarding the information collection request (ICR) in today's public inspection and scheduled for publication in tomorrow's *Federal Register* with Docket No. CDC-2026-0562 and entitled, "National Notifiable Diseases Surveillance System (NNDSS)" ([available here](#)). Specifically, this notice says that revisions to the ICR include the collection of "additional data elements for all conditions" and I'm interested in which additional data elements would be collected under this revision.

Thanks,

Brett

Brett Fitzgerald

Public Policy Associate

Longbow Public Policy Group, LLC

(908) 720-8744 (Direct)
Brett@longbowpolicy.com

The information contained in this transmission is intended for the use of the individual or entity named above. If the reader of this message is not the intended recipient, you are hereby notified that any dissemination, distribution, or copying of this communication to any third party is strictly prohibited. If you received this message in error, please notify me immediately and follow with its deletion.

PUBLIC SUBMISSION

As of: 6/22/26, 12:49 PM
Received: April 14, 2026
Status: Posted
Posted: April 15, 2026
Tracking No. mny-zqf2-n1b8
Comments Due: June 08, 2026
Submission Type: Web

Docket: CDC-2026-0562
National Notifiable Disease Surveillance System (NNDSS)

Comment On: CDC-2026-0562-0001
National Notifiable Disease Surveillance System (NNDSS)

Document: CDC-2026-0562-0003
Comment from Rocha, David

Submitter Information

Name: David Rocha
Address:
San Antonio, TX, 78256
Email: drocha3408@outlook.com

General Comment

HHS, CMS, ASTP/ONC and the CDC should accelerate the movement to FHIR-ize with AI the National Notifiable Disease Surveillance System (NNDSS), National Electronic Disease Surveillance System (NEDSS) and the National Syndromic Surveillance Program (NSSP), and the National Wastewater Surveillance System (NWSS) to exchange public health disease surveillance data and public health syndromic surveillance data.

In addition, the states need to do state to state FHIR with AI exchange for NEDSS, NNDSS, NSSP, and NWSS.

this will be useful for contact tracing, case investigations, outbreak detection etc.

FHIR Terminology services APIs integration with the CDC will help with standardizing exposure reporting across centers, allow for automated queries and more importantly, support real time data exchange with NEDSS, NNDSS, NWSS, and NSSP during public health emergencies.

PUBLIC SUBMISSION

As of: 6/22/26, 12:50 PM
Received: April 20, 2026
Status: Posted
Posted: April 21, 2026
Tracking No. mo7-wv4o-ddsv
Comments Due: June 08, 2026
Submission Type: Web

Docket: CDC-2026-0562
National Notifiable Disease Surveillance System (NNDSS)

Comment On: CDC-2026-0562-0001
National Notifiable Disease Surveillance System (NNDSS)

Document: CDC-2026-0562-0004
Comment from Rocha, David

Submitter Information

Name: David Rocha
Address:
San Antonio, TX, 78256
Email: drocha3408@outlook.com

General Comment

The CDC needs to modernize the terminology infrastructure to eliminate CSVs and spreadsheets for terminology exchange from file based semantics towards API based terminology services infrastructure. Case reporting needs to be done in real time and syndromic surveillance needs to be continuously updated.

As a result, no CSVs nor spreadsheets will need to be reconciled between local, state public health departments. In addition, there will not be inconsistent value sets adopted across the states, territories, and the CDC.

This will transform the CDC infrastructure for syndromic surveillance data using FHIR terminology services at scale.

PUBLIC SUBMISSION

As of: 6/22/26, 12:52 PM
Received: June 08, 2026
Status: Posted
Posted: June 09, 2026
Tracking No. mq5-g9oi-zelp
Comments Due: June 08, 2026
Submission Type: Web

Docket: CDC-2026-0562
National Notifiable Disease Surveillance System (NNDSS)

Comment On: CDC-2026-0562-0001
National Notifiable Disease Surveillance System (NNDSS)

Document: CDC-2026-0562-0005
Comment from ain Street Foundation Center for Regulatory Analysis and Engagement

Submitter Information

Email: andrew@cooperativepolicy.org
Organization: ain Street Foundation Center for Regulatory Analysis and Engagement

General Comment

Attached are comments from the Main Street Foundation Center for Regulatory Analysis and Engagement.

Attachments

MSF CRAE HHS CDC Comments RFI NNDSS FINAL 060826



MEMORANDUM

To: Hon. Robert F. Kennedy, Jr, Secretary of Health and Human Services
Hon. Jay Bhattacharya, MD, PhD, Acting Director Centers for Disease Control and Prevention

From: Andrew Langer, President, Main Street Foundation

Date: June 1, 2026

Re: Comments on the Department of Health and Human Services Centers for Disease Control and Prevention Notice and Request for Comment, “National Notifiable Disease Surveillance System (NNDSS),” Docket # CDC-2026-0562, Published April 7, 2026

Below are comments of the Main Street Foundation’s Center for Regulatory Analysis and Engagement (CRAE) in response to the Department of Health and Human Services Centers for Disease Control and Prevention Notice and Request for Comment, “National Notifiable Disease Surveillance System (NNDSS),” Docket # CDC-2026-0562, published April 7, 2026.

CRAE is a project of the Main Street Foundation, a recently-formed non-profit, non-partisan 501(c)(3) research and education foundation. Our mission is to bring a disciplined, common-sense perspective to the regulatory process, one grounded in real-world experience, sound science, and rigorous economic analysis. We work to ensure that the costs, risks, and benefits of regulatory proposals are evaluated transparently and accurately, and that the voices, interests, and freedoms of Americans, particularly small businesses and working families, are meaningfully represented in regulatory debates. Above all, we focus on outcomes: regulations should address real problems, function effectively in practice, and improve conditions on the ground—not exacerbate the challenges they are intended to solve.

The Center for Regulatory Analysis and Engagement (CRAE) appreciates the opportunity to comment on the Centers for Disease Control and Prevention's proposed revision and extension of the National Notifiable Diseases Surveillance System (NNDSS) information collection. Effective public health surveillance serves an important governmental function by enabling federal, state, territorial, and local public health authorities to identify emerging disease trends, coordinate responses to outbreaks, and allocate resources efficiently. Reliable disease surveillance can help

policymakers and public health professionals make informed decisions while supporting the protection of public health.

CRAE supports CDC's proposal to continue the NNDSS information collection and generally supports the addition of flea-borne typhus and soil-transmitted helminth infections to standardized surveillance activities. Surveillance systems must evolve as disease patterns change and as public health authorities gain a better understanding of emerging risks. The collection of accurate and timely information regarding these conditions may improve situational awareness and contribute to more effective prevention and response efforts.

At the same time, the Paperwork Reduction Act exists to ensure that information collections remain appropriately tailored to their intended purposes and that agencies continually assess whether the benefits of additional data justify the burdens imposed on reporting entities. Public confidence in data collection programs depends not only upon the value of the information collected but also upon a demonstrated commitment to restraint, efficiency, and periodic review.

For that reason, CRAE encourages CDC to remain attentive to the risk of incremental paperwork growth over time. Individually, the addition of a small number of conditions or data elements may appear modest. However, surveillance systems frequently evolve through a series of small expansions that collectively impose significant administrative burdens on state and local public health agencies. The cumulative effect of these additions can be difficult to evaluate when each revision is considered in isolation.

CRAE therefore encourages CDC to strengthen its commitment to data minimization and periodic reassessment. Whenever new reporting elements are proposed, the agency should clearly identify the public health purpose served by each element, explain why existing information is insufficient, and evaluate whether older or less useful elements can be retired. Such an approach would help ensure that surveillance systems remain focused on collecting information that provides meaningful operational value rather than simply accumulating data over time.

The agency should also continue to prioritize interoperability, automation, and standardization as part of its broader data modernization efforts. Automated reporting systems can substantially reduce reporting burdens while improving data quality and timeliness. As CDC works with state and territorial partners to modernize surveillance infrastructure, the agency should seek opportunities to reduce duplicative reporting requirements and minimize manual data-entry obligations wherever possible.

CRAE further encourages CDC to maintain transparency regarding the costs associated with surveillance modernization. The burden estimates associated with implementation activities demonstrate that substantial effort is required at the state and local level to support these systems. Ongoing evaluation of those costs can help ensure that modernization investments generate measurable improvements in public health capabilities while avoiding unnecessary administrative expenditures.

Ultimately, effective public health surveillance and sound regulatory practice are complementary objectives. A surveillance system that is focused, efficient, and periodically reviewed is more likely to maintain the confidence of reporting jurisdictions and the public alike. By pairing appropriate surveillance expansion with continued attention to burden reduction and data

minimization, CDC can strengthen both the effectiveness and sustainability of the NNDSS program.

CRAE appreciates the opportunity to provide these comments and supports approval of the proposed information collection revision. We encourage CDC to continue pursuing modernization efforts while remaining vigilant against unnecessary paperwork growth and ensuring that all reporting requirements remain justified by clear public health benefits.

Sincerely,

A handwritten signature in black ink, reading "Andrew M. Langer". The signature is written in a cursive style with a large, stylized "A" and "L".

Andrew M. Langer
President
Main Street Foundation

PUBLIC SUBMISSION

As of: 6/22/26, 12:41 PM
Received: April 08, 2026
Status: Posted
Posted: April 08, 2026
Tracking No. mnp-md3d-ab52
Comments Due: June 08, 2026
Submission Type: Web

Docket: CDC-2026-0562
National Notifiable Disease Surveillance System (NNDSS)

Comment On: CDC-2026-0562-0001
National Notifiable Disease Surveillance System (NNDSS)

Document: CDC-2026-0562-0002
Comment from Anonymous

Submitter Information

Name: Anonymous Anonymous

General Comment

As a college student interested in the field of research related to public health, I am fully supportive of updating the systems for collecting data in order to keep up with advancing technology. The American population is growing which entails larger data sets that could more efficiently be refined with newer infrastructure. It is a long term solution that will be beneficial for future data sets in order to carry out more studies from universities and private entities. The public is in need of an accurate national disease surveillance system to more effectively stop future epidemics/pandemics or at least slow transmissions.