

related to medical mortality data classification to states, local areas, other countries, and private organizations; (4) tests, refines, and updates automated coding systems that assist in production of mortality data; (5) conducts methodological research in data preparation and medical classification of mortality data; (6) provides nosological assistance and training, both nationally and internationally, in regard in International Classification of Diseases (ICD) information for mortality and new revisions of the ICD; (7) interprets, classifies, codes, keys, and verifies medical and demographic information of value to researchers and public policy officials; (8) develops and implements training programs for cause-of-death coding and provides technical assistance to international, federal, state, and local government and non-government agencies.

*Mortality Statistics Branch (CS53).* (1) Establishes the research agenda for mortality statistics in response to public health priorities; (2) converts identified data needs into statistical and research programs to obtain, evaluate, analyze, and disseminate mortality statistics data; (3) conducts research to improve data collection of vital records, record linkage, and sample survey methodologies related to mortality statistics; (4) performs theoretical and experimental research that improves the content of the mortality statistics data collection effort and the timeliness, availability, and quality of mortality statistics data; (5) conducts research into life tables methodology and produces annual and decennial U.S. and State life tables; (6) recommends content of U.S. Standard Certificates; (7) assesses disclosure risk and develops optimal data release strategies that improve policy analysis and decision-making; (8) prepares and publishes descriptive analyses as well as sophisticated multivariate analyses that integrate data across multiple surveys or data sets; (9) conducts research related to the International Classification of Diseases (ICD) and cause of death classification; (10) conducts national and state-specific comparability studies of cause of death classification to facilitate the study of mortality trends across ICD revisions; (11) designs and conducts methodological research to improve the collection, production, use, and interpretation of mortality-related data; (12) collaborates with other agencies and organizations in the design, implementation, and analysis of vital records surveys; and (13) develops and promotes training activities related to

the collection, production, use and interpretation of mortality statistics.

*Reproductive Statistics Branch (CS54).* (1) Establishes the research agenda for reproductive statistics in response to public health priorities; (2) assesses information data needs in the fields of reproduction, maternal and child health, family formation, growth, and dissolution; (3) plans and develops statistical and research programs to obtain, evaluate, analyze, and disseminate reproductive statistics data to meet these needs; (4) conducts research to improve data collections on vital records, record linkage, and sample survey methodologies related to reproductive statistics; (5) performs theoretical and experimental research that improves the content of the reproductive statistics data collection effort and the timeliness, availability, and quality of reproductive statistics data; (6) assesses disclosure risk and develops optimal data strategies that improve policy analysis and decision-making; (7) prepares and publishes descriptive analyses of individual data systems as well as sophisticated multivariate analyses that integrate data across multiple surveys or data sets; (8) conducts methodological research to improve statistics on reproduction, maternal and child health, family formation, growth, and dissolution; (9) recommends content of U.S. Standard Certificates; and (10) provides consultation and advice to members of Congress, the press, and a broad range of researchers and institutions at the international, national, State, and local levels on reproductive statistics data.

*Data Acquisition and Evaluation Branch (CS52).* (1) Provides policy direction to states regarding vital statistics data acquisition and quality control; (2) promotes state participation in the vital statistics cooperative program and the national death index (NDI) program; (3) develops specifications for coding, editing and processing of vital registration and statistics data; (4) develops and administers funding formulas that determine the level of reimbursement to states and the procurement mechanisms to effect this reimbursement; (5) develops and directs a comprehensive statistical quality assurance program to assure that the data received from each registration area are acceptable for national use; (6) provides technical assistance to states, local areas, other countries, and private organizations on data files, software, training, processing and coding of vital statistics data; (7) in consultation with health departments across the U.S., leads and conducts evaluation studies and other research on

issues related to the collection of vital statistics; (8) prepares and publishes information obtained from special projects related to vital registration and statistics data; (9) promotes the development and implementation of "best statistical practices" throughout the U.S. vital statistics system to maximize the utility of vital statistics data; and (10) manages the acquisition of vital statistics data from the 57 registration areas to assure a national file of timely and complete data.

*Division of Health Care Statistics (CS6).* Plans and administers complex data collection systems and analytic programs and conducts a program of methodologic and substantive public health research activities on the health care system and the use of health care services. (1) Participates in the development of policy, long-range plans, and programs of the Center; (2) plans, directs and coordinates the health care statistics program of the Center; (3) develop standards for health care statistics data collection, data reduction, and tabulation; (4) conducts research on data collection methodology, survey methodology, data quality and reliability, statistical computation, and utilization of health care statistics data; (5) conducts multidisciplinary research directed towards development of new scientific knowledge on the provision, use, quality, and appropriateness of ambulatory, hospital, and long-term care; interactions within the health care delivery system; and the effects of the system and its financing on services provided; (6) performs theoretical, experimental, and evaluation investigations into the content of the health care statistics data collection effort; (7) develops sophisticated approaches for making health care statistics data available to users, including techniques to avoid disclosure of confidential data; (8) conducts descriptive analyses and sophisticated multivariate analyses that integrate health care statistics across multiple surveys or data sets; (9) designs, develops, and implements state of the art computing systems for collection, storing, and retrieving health care statistics data for subsequent analysis and dissemination; (10) provides technical assistance, consultation, and liaison to international, federal, states, and local government agencies, as well as the private sector, on statistics describing health care resources and utilization and future data needs of particular relevance for public health, health services research, and health policy; (11) fosters the integration of health care