



*American Academy of Forensic Sciences
American Society of Crime Laboratory Directors
International Association for Identification
International Association of Coroners and Medical Examiners
National Association of Medical Examiners
Society of Forensic Toxicologists*

FY27 Priorities for Forensic Science, Death Investigation, and Public Health Data Systems

Congress should sustain and strengthen FY27 appropriations for forensic science, medical examiner and coroner systems, missing and unidentified persons programs, opioid and synthetic drug investigations, ballistic research, standards development, and public health data modernization. These investments are essential to public safety, timely death investigation, victim identification, violent crime response, overdose prevention, and the integrity of the justice system.

1. Paul Coverdell Forensic Science Grants and CARA Forensic Support

Position: Support the House FY27 budget level of \$28 million for Paul Coverdell Forensic Science Grants and maintain a separate \$17 million carve-out in the Comprehensive Addiction and Recovery Act for forensic support related to opioid and synthetic drug investigations.

Justification: Forensic science needs are outpacing funds significantly. Coverdell grants help state and local jurisdictions improve the quality and timeliness of forensic science and medical examiner/coroner services. Dedicated forensic support for opioid and synthetic drug investigations is necessary because fentanyl, emerging synthetic substances, and polysubstance deaths require specialized toxicology capacity, timely laboratory testing, and coordination between public health and public safety agencies.

2. National Missing and Unidentified Persons System (NamUs)

Position: Support the House FY27 budget level of \$11 million for the National Missing and Unidentified Persons System.

Justification: NamUs is a critical national tool for resolving missing, unidentified, and unclaimed persons cases. Continued funding supports case entry, forensic services, biometric and DNA coordination, family assistance, and collaboration among law enforcement, medical examiners, coroners, forensic laboratories, and families seeking answers.

3. Debbie Smith Act DNA Backlog Reduction Funding

Position: Support the \$120 million level for the Debbie Smith Act included in the FY27 President's Budget rather than the \$115 million level proposed in the House budget.

Justification: DNA analysis remains one of the most powerful tools for identifying perpetrators, exonerating the innocent, resolving cold cases, and bringing answers to victims and families. A \$120 million level better reflects the ongoing national need to reduce backlogs, maintain testing capacity, support qualified personnel, and ensure that forensic DNA evidence can be processed accurately and promptly.

4. Medical Examiner and Coroner Fellowships

Position: Support the \$10 million included in the President's FY27 budget for Other Federal, State, and Local Forensic Activities to fund medical examiner and coroner fellowships.

Justification: The nation faces persistent workforce shortages in forensic pathology and death investigation. Fellowship funding will help recruit and train the next generation of medical examiners and coroners, improve death certification accuracy, reduce case backlogs, and strengthen the capacity of local jurisdictions to respond to overdose deaths, violent deaths, disasters, and unidentified decedent cases.

5. Ballistics Research and Operational Support

Position: Fully support funding and training for ballistics research and operational support for forensic and ballistic research.

Justification: Ballistic evidence is central to many violent crime investigations. Federal support for research, training, and operational capacity helps agencies improve firearm and toolmark analysis, strengthen quality assurance, support investigator training, and apply emerging technologies responsibly and consistently across jurisdictions.

6. Forensic Standards, OSAC, and Standards Development Organizations

Position: Support the proposed House FY27 budget level of \$25 million and ensure that the carve-outs of \$3.5 million for the Organization of Scientific Area Committees for Forensic Science and \$1.5 million for standards development organizations remain intact.

Justification: Consensus-based standards and best practices improve reliability, transparency, and confidence in forensic science. Continued support for OSAC and standards development organizations helps ensure that forensic disciplines have scientifically grounded standards, implementation guidance, and mechanisms for continuous improvement.

7. Opioid Overdose Prevention, Surveillance, and Violent Death Reporting

Position: Support the HHS House-proposed FY27 budget level of \$505.6 million for Opioid Overdose Prevention and Surveillance and \$24.5 million for the National Violent Death Reporting System. Congress should also continue to require coordination with medical examiners and coroners.

Justification: Overdose and violent death data depend on timely and accurate death investigation, toxicology, and death certification. Medical examiners and coroners are essential partners in identifying drug trends, detecting emerging substances, informing prevention strategies, and improving the quality of mortality data used by public health agencies and policymakers.

8. Public Health Data Modernization

Position: Support the House-proposed FY27 level of \$230 million for the Public Health Data Modernization Act and ensure that medical examiners and coroners are explicitly included as eligible and prioritized partners for funding.

Justification: Death investigation offices generate core public health data, yet many lack modern technology, interoperable systems, and resources to exchange data efficiently with public health agencies. Including medical examiners and coroners in data modernization funding will improve mortality surveillance, overdose response, disaster preparedness, emerging threat detection, and the timeliness and completeness of national public health datasets.