

Data Modernization Initiative: Updates from the National Vital Statistics System (NVSS)

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What does a modernized NVSS look like?

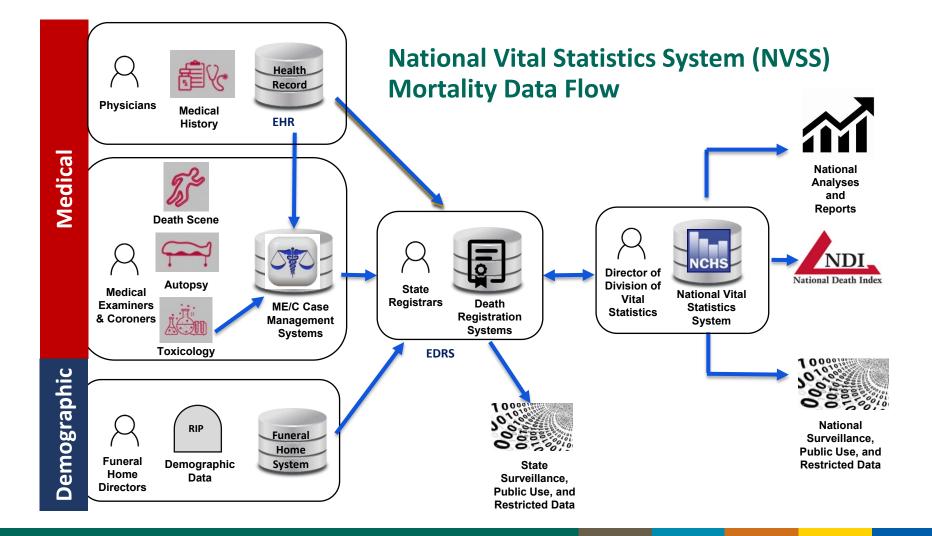
 A modern NVSS will be reliable, efficient, and able to provide timely high-quality data for public health research and surveillance to inform policy and emergency response.

NVSS Modernization... Questions for BSC Consideration

 Are our goals and focus areas consistent with the needs of the public health surveillance and research community?

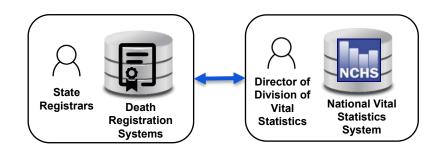
• What are we missing in our data modernization efforts (i.e., what should we be doing that we aren't)?

Conversely, are there things we are doing that we shouldn't (i.e., are we on the wrong track with anything)?



State Electronic Death Registration System (EDRS) to NCHS Data Flow

- VRDR FHIR IG (Vital Records Death Reporting, Fast Healthcare Interoperability Resources Implementation Guide) Development
- Bidirectional data flow / messaging
 - API development / implementation
 - STEVE (NAPHSIS operated system)
- NCHS Internal System Modernization
 - Modify data tracking / review processes and tools



Accelerating Data Modernization in Jurisdictions

Epidemiology and Laboratory Capacity (ELC) Cooperative Agreement Funding

ELC: Accelerating Data Modernization in Jurisdictions - FY21 Funding

- Tier 1 Core Data Modernization Infrastructure (\$46M)
 - All 64 ELC recipients eligible for funding
- Tier 2 Electronic Case Reporting (eCR) Scale-Up (\$77M)
 - All 64 ELC recipients eligible for funding; amount based on recipient eCR status
 - Level 1 Funding Range \$200,000 \$810,000
 - Level 2 Funding Range \$1,100,000 \$1,545,000
- Tier 3 National Vital Statistics (NVSS Modernization)

ELC: Tier 3 Funding

- \$77 Million for National Vital Statistics System modernization
- 57 ELC recipients who are part of the NVSS (i.e., 50 states, NYC, DC, AS, CNMI, GU, PR, USVI) will each receive \$1,350,000
- 24-month performance period

ELC: Tier 3 - Goal

Move all jurisdictions closer to supporting FHIR-based, bi-directional interoperability between their EDRS and NCHS by July 2023, with the expectations of being ready to fully support within one year of the end of the project funding period.

What specifically will jurisdictions be working on...

- Make necessary upgrades to existing systems to support FHIR standards and record-level messaging
- Implement application programing interfaces (API's) to support sending and receipt of FHIR messages
- Engage in testing and piloting between EDRS and NCHS

Other things jurisdictions might choose to do (optional activities)

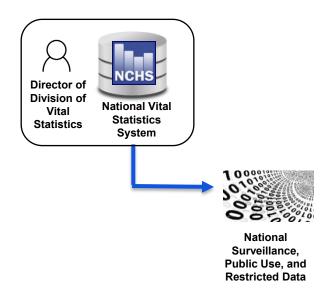
- Propose and implement additional projects, with CDC approval.
- Examples:
 - FHIR-based interoperability between medical examiner/coroner case management systems and EDRS
 - Pilot interoperability between hospital EHR and recipient electronic birth/death registration systems
 - Interoperability between recipient's EDRS and one or more surveillance systems or registries
 - Maintain existing system, including personnel and operating environment and supporting software necessary for them to function

Other NVSS Modernization Focus Areas

- A geocoding service that can code address on birth and death records as they are received by NCHS and return to jurisdictions
- Develop FHIR standards for birth data and for medical death investigation
- Expanded and improve training and materials to support jurisdictional modernization efforts
- Query system for public release of provisional death data.

Enhanced External Access to Provisional Mortality Data

- CDC WONDER Enhancements
 - New query screen for provisional data
 - Add week of death
 - Add state of death occurrence (currently only by residence)
 - Modernized and enhanced API
 - Updated Monthly



NVSS Modernization Discussion Questions

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