



## DMI Consortium Meeting: Executive Summary August 23, 2023

### Purpose

*The purpose of this session was to seek individual perspectives and experiences, not group consensus advice, to inform planning, engagement, and strategies in the identification and development of sustainable and efficient solutions for interoperable and streamlined data flows, shared solutions, and health data analysis for public health purposes.*

*This meeting was convened as a group of multisector public health partners (government, public health, industry) to increase dialogue, prioritize goals, and vet real life solutions to achieve a desired future state public health data ecosystem that provides timely, secure, adaptable access and transfer of data and information to effectively drive public health action.*

### Public Health Data Strategy Milestones Update

Presenter(s): Teresa Jue, Jasmine Chaitram, Valerie Albrecht

**90% of ELC recipients are connected to one or multiple intermediaries (e.g., AIMS, ReportStream, HIEs) for lab data**

### Achieving this milestone in 2023

- 44/64 (68%) of ELC recipients connected to ReportStream receive lab data
  - Currently working with 8 jurisdictions for ReportStream onboarding
  - SimpleReport
  - COVID Lab Results
- 58/64 (90%) of jurisdictions connected to AIMS receive lab data
  - Quest centralized ELR feed
  - Interjurisdictional Data Exchange

**Accessibility caption:** Screenshot of slide detailing Public Health Data Strategy Milestone. Text on left reads "90% of ELC recipients are connected to one or multiple intermediaries (e.g., AIMS, ReportStream, HIEs) for lab data". Text on right indicates 44/64 (68%) of ELC recipients connected to ReportStream receive lab data, with 8 jurisdictions onboarding. 58/64 (90%) of jurisdictions connected to AIMS receive lab data via Quest centralized ELR feed and Interjurisdictional Data Exchange.

90% of state Public Health Labs have implemented ETOR (e.g., web portal, direct integration, or use of intermediary) with at least 1 health care partner for at least 1 lab program

## Achieving this milestone in 2023

- 43/51 (84%) SPHLs have implemented at least one ETOR solution
  - Web portal: 42
  - Direct integration: 22
  - Use Intermediary: 0
- Planned solution:
  - Web portal: 23
  - Direct integration: 14
  - Use Intermediary: 10

**Accessible caption:** Slide detailing Public Health Data Strategy Milestone. Text on left reads "90% of state Public Health Labs have implemented ETOR (e.g., web portal, direct integration, or use of intermediary) with at least 1 health care partner for at least 1 lab program". Text on right indicates 43/51 (84%) SPHLs have implemented at least one ETOR solution (42 web portal, 22 direct integration), with 23 web portal, 14 direct integration, and 10 intermediary usage planned.

75% of CDC infectious disease labs send lab test results to external partners electronically (e.g., using ELR, CSTOR, intermediary)

## Achieving this milestone in 2023

- All states have organizations onboarded to CSTOR for ability to submit test order requests electronically and securely view reports
  - PDF reports will sunset Dec 2023
- Onboarding last remaining CDC lab to ELIMS for purposes of report delivery
- 26 CDC labs are sending ELR to 15 states
  - Continuing to onboard more CDC labs and states once CLIA compliance is achieved
- Working to modernize HL7 message pathway by incorporating Report Stream

**Accessible caption:** Slide detailing Public Health Data Strategy Milestone. Text on left reads "75% of CDC infectious disease labs send lab test results to external partners electronically (e.g., using ELR, CSTOR, intermediary)". Text on right indicates all state have organizations onboarded to CSTOR, with PDF reports sunsetting December 2023. CDC is onboarding the last remaining CDC lab to ELIMS. 26 CDC labs are sending ELR to 15 states. The team is working to modernize HL7 message pathways by incorporating ReportStream.

Experts from CDC's National Center for Emerging and Zoonotic Infectious Diseases (NCEZID) and Office of Public Health Data, Surveillance, and Technology (OPHDST) provided updates on CDC's lab-related Public Health Data Strategy Milestones. Updates included an overview of the milestones, steps to achieving the milestones, and any milestone-related work in progress. The three lab-related milestones for 2023 included the following:

- 1) 90% of Epidemiology and Laboratory Capacity (ELC) recipients connected to one or multiple intermediaries,
- 2) 90% of state public health laboratories have implemented Electronic Test Orders and Results (ETOR) with at least one health care partner for at least one lab program, and
- 3) 75% of CDC infectious disease laboratories send lab test results to external partners electronically.

Topics including intermediaries versus point-to-point connections, Simple Report, centralized Electronic Laboratory Reporting (ELR) feeds, ETOR implementation mechanisms (web portal, direct integration, indirect integration), and CDC Specimen Test Order and Reporting (CSTOR) were discussed.

### **CSTE's DMI Stories from the Field**

Presenter(s): Jim Collins, Kate Goodin



Two of CSTE's STLT representatives discussed their jurisdiction's CSTE Stories from the Field submissions, outlining innovative and resilient ways their public health organizations leveraged data for action to modernize systems and processes during and following the COVID-19 pandemic emergency. At the Michigan Department of Health and Human Services (MDHHS), staff were able to integrate an open-source application to index and report on ELR data outside of their established surveillance system. To address a lack of race and ethnicity data in laboratory reports, MDHHS's created ELR submitter report cards, which resulted in an increase in demographic completeness among reports sent to MDHHS staff that allowed staff to better detect disparities and allocate resources to COVID-19 testing centers.

At the Tennessee Department of Health, staff are currently evaluating electronic case reporting and have designed customized datamart processes. Such processes include modularization to examine key content areas, including demographic data and messaging fields, with the hope to expand to clinical data soon and to move to production next month. Staff are also piloting timeboxing to assist in reportability determination based on time-related messages and codes.

*For questions regarding the CDC DMI Consortium, please contact [DMIconsortium@cdc.gov](mailto:DMIconsortium@cdc.gov).*