Colleagues,

Please find below the National Notifiable Diseases Surveillance System (NNDSS) Modernization Initiative (NMI) Technical Assistance (TA) Coordination Team Update for December 18, 2015. These email updates are a collaboration among the Centers for Disease Control and Prevention (CDC), Council of State and Territorial Epidemiologists (CSTE), and the Association of Public Health Laboratories (APHL) and are sent biweekly in an effort to keep reporting jurisdictions and other partners and stakeholders updated on the progress of NMI.

Please note that the NMI update will change to a monthly frequency in 2016, with the next issue scheduled to be published on January 29, 2016.

For more information on NMI, please see the NMI FAQS at http://www.cdc.gov/nmi/faq.html. If you have questions not answered in the FAQs, please send them to eda.gov.cdc.gov.

NNDSS Modernization Initiative Biweekly Update December 18, 2015

Message Mapping Guide Development Updates

- Message Mapping Guide (MMG) Development Team Streamlining Vaccine Template:
 - The MMG development team is working on a proposal to revise the vaccine template to eliminate vaccine data element duplication.
 - The proposal will move the vaccine template to the Epi Observation Request (OBR);
 there will no longer be a vaccine OBR.
- Change Requests Documented in Final Quality Assurance (QA) Review of Six Priority Guides
 - The MMG development team has documented change requests (CRs) identified from the QA review of the six priority guides (Generic v2, Hepatitis, STD, Congenital Syphilis, Mumps, and Pertussis) that will affect the Message Validation, Processing, and Provisioning System (MVPS) work to-date. The NMI Change Control Board soon will review these in January 2016.
 - From the recent QA review, the MMG development team also is making minor updates to the MMGs, test scenarios, and test messages for the six priority guides to improve consistency in format and wording across these documents.
 - When the QA process is complete, the team expects to post updated pilot test-ready versions of the six priority MMGs and their associated artifacts to the revised <u>Draft</u> <u>MMG Web Site</u>, targeting January 2016.
- MMG Status Updates:
 - Arboviral MMG (Message Design and Development)
 - A draft version of the MMG has been completed. Additional work is on hold until the QA review of the six priority MMGs is completed.
 - Varicella MMG (Message Design and Development)
 - A gap analysis of vaccine data elements in the mumps, pertussis, and varicella guides was performed as part of the vaccine deduplication project.
 - Mumps and Pertussis MMGs (Stage I—Draft Phase)
 - The MMG development team will forward mock-ups of the Mumps and Pertussis
 MMGs that incorporate the proposed changes to the guides, including changes

to the lab and vaccine templates, to the CDC programs for review and approval after the QA review has been completed for these MMGs.

- o Congenital Syphilis and STD MMGs (Stage II—Pilot Test-ready Draft Phase)
 - A CR has been initiated to allow for the substitution of LOINC codes for four data elements in the Congenital Syphilis MMG to replace existing PHIN Question identifiers.
 - The STD MMG is currently being updated according to changes identified during the QA review.
- Generic v2 and Hepatitis MMGs (<u>Stage II—Pilot Test-ready Draft Phase</u>)
 - The Generic MMG is currently being updated according to changes identified during the QA review.
 - The Hepatitis MMG is currently being updated according to changes identified during the QA review.
- o No guides are in Stage III—Final MMG Phase at this time.

Message Validation, Processing, and Provisioning System Updates

- MVPS Project Management Team Revising MVPS Initial Release Project Schedule:
 - The MVPS project management team is updating the MVPS project schedule to support the initial MMG release of MVPS for Generic v2 and Hepatitis.
 - Each MVPS work stream has identified milestones, tasks, and estimated duration of effort to support the initial MMG release of MVPS for Generic v2 and Hepatitis.
 - The team now is aggregating the input received from each work stream to create a feasible project schedule.
 - MVPS leadership is meeting regularly with the project team creating the schedule to provide guidance, identify gaps, and refine tasks. The team is targeting 12/31/15 to complete the final version of the schedule.
- MVPS Data Provisioning Team Identifies MVPS Data Security Requirements:
 - o The MVPS data provisioning team met on 12/2/15 to discuss the feasibility of various security methods, including role-based access, open access, and table-driven access.
 - The decision was made that an MVPS admin will not manage user access across every program.
 - Individual programs will be able to manage their own user privileges.

Technical Assistance Updates

- NMI eSHARE Monthly Webinar Announced:
 - CDC is transitioning the "State Discussion and Support for Case Notification using HL7 v2.5 Call" into a new monthly webinar series called "NMI eSHARE":
 - NMI NNDSS Modernization Initiative
 - e electronic
 - S State
 - H HL7 Implementation
 - A to Achieve
 - R Resource
 - E Exchange.

- O CDC anticipates that the new series will better inform jurisdictions on how to implement NNDSS HL7 case notifications and other HL7 efforts. It will create a forum to discuss lessons learned during the HL7 case notification implementation process and provide an interactive discussion session for participants. Each month's topic will be planned in advance and will include the appropriate CDC program staff to enhance the discussion and provide clarification around the topic.
- NMI eSHARE is scheduled for every third Thursday of the month, with the next one occurring on 1/21/16.
- Also of note is that NMI eSHARE will include an eSHARE seminar series. eSHARE seminars will discuss in-depth topics of interest to the group, such as electronic case reporting, as they arise.
- Please send input on topics to cover in the NMI eSHARE webinar series and in the eSHARE seminar series to <u>edx@cdc.gov</u>.

NMI TA Team Develops Jurisdiction Implementation Documents:

- The NMI technical assistance (TA) team continues to develop several documents that will assist during jurisdiction implementation: Technical Assistance and Implementation Guidebook; User Acceptance Testing for Pilot Jurisdictions Guidebook, and Jurisdiction Onboarding Guidebook.
- o Complementary information will be developed for CDC program and NMI staff.
- Update on Jurisdiction Implementation: The National Electronic Disease Surveillance System
 Base System (NBS) team provides technical assistance for NBS pilot jurisdictions, and the APHL
 TA team provides technical assistance for non-NBS pilot jurisdictions.

Alabama:

 Alabama is testing STD messages by using the Message Evaluation and Testing Service and migrating STD data.

Arkansas:

 Arkansas is ready to conduct end-to-end testing with CDC for Hepatitis when MVPS is ready.

o California:

- California has completed the data extract for Hepatitis and is close to completion for Generic v2.
- APHL is building the customized Rhapsody route for California that will create
 HL7 messages based on their data extracts.

o Florida:

- Florida has completed the test message suites for Hepatitis and is ready for endto-end testing when MVPS is ready.
- Florida is currently working on generating Generic v2 test messages.

o Idaho:

 Idaho is ready to conduct end-to-end testing with CDC for STD conditions when MVPS is ready.

Kentucky:

 Kentucky is ready to conduct end-to-end testing with CDC for Hepatitis when MVPS is ready.

Louisiana:

 Louisiana is ready to conduct end-to-end testing with CDC for Hepatitis when MVPS is ready.

O Michigan:

 Michigan has completed test message suites for Hepatitis and Generic v2 and is ready for end-to-end testing with CDC when MVPS is ready.

O Minnesota:

- Minnesota has produced a draft data extract for Hepatitis and Generic v2.
- APHL reviewed with the Minnesota team detailed requirements for a data warehouse that will be used to generate HL7 messages. These requirements are pending final approval.
- APHL is currently building a customized Rhapsody route for Minnesota that will create HL7 messages based on their data extract.

New York State:

- New York provided an initial suite of Generic v2 messages and mapping documents to APHL for review.
- New York has completed the gap analysis for both the Generic v2 and Hepatitis guides and is currently working on generating updated data extracts and completing test case scenario documents.

Oregon:

 Oregon is making minor revisions (i.e., LOINC codes for Generic v2) to the full suite of Generic v2 and Hepatitis test messages. Once these revisions are made, they will be ready for end-to-end testing with MVPS.

Tennessee:

 Tennessee is ready to conduct end-to-end testing with CDC for Hepatitis when MVPS is ready.

Texas:

- Texas is ready to conduct end-to-end testing with CDC for Hepatitis when MVPS is ready.
- CSTE will work with all of the pilot jurisdictions to evaluate the NMI TA efforts.
- Reminder about MMG status:
 - MMGs in Stages I and II are considered draft and may be revised until the time they are finalized.
 - Those jurisdictions selected for pilot testing of the test-ready versions (Stage II) of the MMGs should wait until contacted by the NMI TA team before using the test-ready MMGs, before implementing surveillance information system changes, and before submitting test messages to CDC.
 - All other jurisdictions should not plan to submit data to CDC or implement MMG-based updates to their surveillance information systems until the final MMGs (Stage III) have been posted.
- For more information about technical assistance:
 - o Please see the NMI FAQs at http://www.cdc.gov/nmi/faq.html.
 - o For pilot jurisdictions: If you have questions specific to NMI TA, please contact Laura Carlton, APHL, at laura.carlton@aphl.org.
 - For non-pilot jurisdictions: If you have questions or would like to request TA through the Epidemiology and Laboratory Capacity for Infectious Diseases (ELC) Cooperative Agreement, please email edx@cdc.gov.

For more information on NMI, please see the NMI FAQS at http://www.cdc.gov/nmi/faq.html. If you have questions not answered in the FAQs, please send them to edx@cdc.gov.