Colleagues,

Please find below the National Notifiable Diseases Surveillance System (NNDSS) Modernization Initiative (NMI) Technical Assistance (TA) Coordination Team Update for June 5, 2015. These e-mail 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 will be sent biweekly in an effort to keep reporting jurisdictions and other partners and stakeholders updated on the progress of NMI.

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.

**NMI Overall Updates**

- Staff members from all three NMI partners—CDC, CSTE, and APHL—will share NMI accomplishments and plans during several NMI-related sessions at the upcoming CSTE Annual Conference, to be held in Boston, Massachusetts, from 6/14/15 to 6/18/15.
- Planning is underway for the CSTE Surveillance and Informatics Preconference Workshop, to be held on Sunday, 6/14/15.
  - CDC Division of Health Informatics and Surveillance (DHIS) and Office of Infectious Diseases staff are collaborating on ideas for the NNDSS-related components of the CSTE Surveillance and Informatics Preconference Workshop.
  - This session will help to identify best practices for case notification and explore ways to increase the utility of the NNDSS data published through the Morbidity and Mortality Weekly Report.

**Message Mapping Guide Development Updates**

- **Message Mapping Guide (MMG) Status Updates:**
  - **Mumps and Pertussis MMGs (Stage 1—Draft Phase):**
    - The second external review period for the restructured Mumps and Pertussis MMGs closed on 5/22/15. CDC received more than 50 comments from four states (Washington, California, Virginia, and Minnesota), which have been compiled and are now being reviewed internally.
    - Once DHIS and the respective CDC programs have addressed these comments and implemented any necessary changes to the MMGs, the
MMG Development Team will post them as Stage II–Pilot Test-ready versions on the Draft MMG Web Site.

- **Congenital Syphilis and STD MMGs (Stage II—Pilot Test-ready Draft Phase)**
  - The MMG Development Team posted pilot test-ready versions of the STD and Congenital Syphilis MMGs and their artifacts to the Draft MMG Web Site.

- **Generic v2 and Hepatitis MMGs (Stage II—Pilot Test-ready Draft Phase)**
  - The MMG Development Team posted pilot test-ready versions of the Generic v2 and Hepatitis MMGs and their artifacts to the Draft MMG Web Site.

- No guides are in **Stage III—Final MMG Phase** at this time.

### Message Validation, Processing, and Provisioning System Updates

- The MVPS developer is currently finalizing the development of the message processing functions for Generic v2, Hepatitis, and STD requirements.
  - The developer is expected to deliver the message processing code to CDC by 6/5/15 for Generic v2, STD, and Hepatitis.
  - This new delivery date is a slight delay but now allows for the installation and testing of code in a single release.

- The MVPS Team continues to work on finalizing the data provisioning requirements and data dictionary mapping for Generic v2, Hepatitis, and STD in conjunction with the CDC Surveillance Operations Team (SOT) and the Message and Vocabulary (M&V) Team.
  - The MVPS Team reviewed the Generic v2 requirements with SOT and M&V team members during the weeks of 5/11/15 and 5/18/15 and expects to deliver a draft to the MVPS developer the week of 6/5/15. The MVPS team will soon schedule time with CDC programs to discuss the data provisioning design and approach.
  - The goal is to complete the data provisioning requirements in June 2015 and provide them to the MVPS developer.
  - Based upon the Generic v2 data provisioning requirements and approach, the MVPS developer will re-estimate when the data provisioning functionality for Generic v2, Hepatitis, and STD will be delivered to CDC.

- The MVPS Team is preparing for the move (“cutover”) to a multi-server environment, expected in June 2015.
  - The cutover depends on the approval of the authority to operate (ATO) from the CDC Office of the Chief Information Security Officer, which is still in the final stages of review and anticipated to be completed soon.
  - Once the ATO is received, the MVPS Team will transition production to the multi-server environment.
  - The MVPS Team will then submit a change request to the MVPS developer to incorporate the security code in the multi-server environment.

- Once the multi-server environment is in production, the MVPS Dashboard and message processing code will be installed in the test environment and technical acceptance testing of them will occur.

- The code for the Message Evaluation and Testing Service (METS) tool is not constrained by the ATO and is expected to be installed and tested earlier than the MVPS Dashboard. The MVPS Team plans to make the METS code available to jurisdictions as soon as possible, with a target date by 6/19/15, to support jurisdictions in their independent validation testing of Hepatitis, STD, and Generic v2 messages.
Technical Assistance Updates

- CDC sent out an announcement to Epidemiology and Laboratory Capacity for Infectious Diseases (ELC) Health Information System (HIS) Cooperative Agreement Grantees to introduce the new NNDSS web site at [http://wwwn.cdc.gov/nndss](http://wwwn.cdc.gov/nndss/). The announcement included the following information:
  
  *Additional guidance on implementing new MMGs*
  
  To avoid unnecessary work and expense, especially for jurisdictions using vendor-based systems, that may occur by implementing a non-finalized guide, all 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 to the NNDSS web site. Only those jurisdictions selected for pilot testing should use the test-ready versions (Stage II) of the MMGs after they have been contacted by the NMI Technical Assistance Team. CDC is currently working with APHL, jurisdictions who use MAVEN, and the vendor to explore options for how to implement the HL7 case notification messages in a way that is cost efficient and reusable. This approach will be expanded in the future to include other vendor-based systems.

- To assist the states using MAVEN surveillance systems, CDC staff Lesliann Helmus, Michele Hoover, and Jason Hall will participate in the MAVEN User Group Meeting to be held after the CSTE Annual Conference in Boston.

- **Update on Jurisdiction Implementation:** Note that all pilot jurisdictions are working on both Hepatitis and STD at the same time and are using the test messages and scenarios developed by CDC. Additional test messages may be developed by the jurisdictions.

  - **California:**
    - The APHL Technical Assistance Team and the technical team from California identified an approach for implementing case notification HL7 messaging, set up and tested the PHINMS transport, installed the Rhapsody validator, and completed the initial gap analysis for STD and Hepatitis.
    - The teams continue to work on implementing the messaging plan, mapping to the data extract, and customizing the Rhapsody route for California.
  
  - **Minnesota:**
    - The APHL Technical Assistance Team and the technical team from Minnesota established an architectural solution for case notification messaging and installed the Rhapsody validator.
      - Minnesota has completed the gap analysis for Hepatitis and is in progress for STD.
      - The state is currently preparing to implement the designed technical solution.
    - The PHINMS transport has been tested, and a permanent route will be installed when the customized Rhapsody route is implemented.
  
  - **Oregon** (Site visit scheduled for 6/9/15 to 6/11/15):
    - Oregon has completed the gap analysis for Hepatitis and STD, is working to input test case scenarios, and is establishing the Rhapsody route.
    - PHINMS transport has been setup and tested.
- During the site visit, the APHL Technical Assistance Team will work with the technical team from Oregon to develop and review test messages in preparation for internal validation.
  - **Michigan:**
    - Michigan is building the full suite of test messages for Hepatitis and STD in preparation for internal validation. The APHL Technical Assistance Team is reviewing and providing feedback on test messages as they are created.
  - **Florida:**
    - Florida is working on the gap analysis for Hepatitis and STD.
    - Florida will pilot the Mirth Channel created by the NMI Technical Assistance Team. The technical team from Florida and the APHL Technical Assistance Team are preparing to customize the Mirth Channel for Florida upon the basis of the results of the gap analysis.
- 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:
  - Please see the NMI FAQs at [http://www.cdc.gov/nmi/faq.html](http://www.cdc.gov/nmi/faq.html).
  - For pilot jurisdictions: If you have questions specific to NMI TA, please contact Laura Carlton, APHL, at [laura.carlton@aphl.org](mailto: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](mailto:edx@cdc.gov).

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