

**Resolution 2005 -01**  
**National Association for Public Health Statistics and Information Systems**

**Title: Funding for Data from the 2003 Revision of the US Standard Certificates in the NCHS Vital Statistics Cooperative Program Contract**

**Background:**

On a periodic basis, the US Standard Certificates for collection of vital record information are revised to reflect changing legal requirements and to improve the quality and usefulness of data collected for public health programs and health statistics research. In January 1998, a Panel of expert consultants began reviewing the standard certificates in use since 1989. In addition to making recommendations for revising the standard certificates, the Panel also recommended the use of standard worksheets and instructions for collecting information. Changes to the standard certificates recommended by the Panel were revised by the Department of Health and Human Services (HHS), and the new standard certificates were officially approved by the Secretary of HHS in December 2003.

The 2003 standard certificate for birth and the 2003 standard report of fetal death contain major changes in the medical and statistical data sections. Many new data items are included on these certificates and many other data items have been revised in format so that 2003 birth and fetal death data are not always comparable to data from 1989 standard certificates. The 2003 standard death certificate has fewer changes with only a few new items added. However, for all 2003 standard certificates, the collection format has been changed for items such as race and education.

Detailed specifications have also been developed by NCHS for states\*to follow in the reporting, collecting, coding, and editing of the items on the 2003 standard certificates. Many additional data items have been included as part of the VSCP data file format for birth, death, and fetal death in the NCHS specifications including items previously dropped from the 1989 data file format by NCHS due to lack of funds. Major changes have also been made to the NCHS specifications for coding various data items such as race, ethnicity, residence, and place of birth. To implement the required NCHS specifications, states must make major changes in their internal processes and their electronic computer systems. Major costs will be incurred by states to make the changes necessary to implement the 2003 revised standard certificates and to maintain the systems necessary to create the data sets NCHS wants.

During a plenary session at the 1999 joint meeting of NAPHSIS and the NCHS VSCP Project Directors, drafts of the revised standard certificates were presented to NAPHSIS members. At that meeting, members expressed their concerns over the major changes in the standards and the cost to implement these changes. Due to member concern, an additional open session was held during the meeting with NCHS staff and NAPHSIS members. At that session, the NCHS Division of Vital Statistics Director assured NAPHSIS members that prior to requiring states to implement the 2003 standard certificates, funds would be provided to states to assist with the implementation. NAPHSIS members also passed Resolution 1999-2 that endorsed a Panel recommendation "that a careful plan for implementation be developed so that states have adequate time and resources to permit orderly transition to the new certificates."

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Since the meeting in 1999, NCHS has not had sufficient funds to fully support the current VSCP system and has had to make cuts in the amount of data they purchase. No funds have been available to states to directly support the implementation of the new standard certificates. Despite the lack of funds, a number of states have moved ahead with implementation on their own. Several of these states have also begun sending data to NCHS in the new file format. Because of the increase in the size of the data set, particularly for births, and the expanded coding requirements for some items, the ongoing costs to states for quality control and software maintenance have also increased. To date, states that are sending the new standard data files to NCHS have received no additional support from NCHS, and the prospect for receiving any additional funding appears minimal at this time.

The National Association for Public Health Statistics and Information Systems recognizes the long history of cooperation between the federal government and the states in producing vital statistics data for the United States. The Association also believes that the 2003 revisions to the standard certificates will provide new and useful information for public health, and it strongly supports having standards for the collection and production of vital statistics data. However, the process for data collection and registration of vital records is changing to an electronic system rather than a paper one, and as states implement the 2003 standard certificates they are moving to these electronic systems. Expanded data sets, additional coding requirements, and higher quality control standards added to these electronic systems increase cost for initial implementation and ongoing maintenance. States cannot be expected to bear these increased costs on their own.

#### **Recommendation:**

The National Association for Public Health Statistics and Information Systems recognizes the public health importance of the new data items on the 2003 revisions to the standard certificates and recommends that the National Center for Health Statistics take steps to obtain adequate funding for implementation of the new standard certificates in all states. Funds provided to states should be in the form of a onetime payment to help with implementation costs and an annual amount to cover the ongoing costs for the additional and expanded data items and increased quality standards for the NCHS data files created from the 2003 standard certificates. Furthermore, the Association recommends that, if sufficient funds cannot be found in the NCHS budget, NCHS seek funds to cover the increased costs from other government agencies that are major users of the data.

The Association recognizes that some states have already transitioned to the 2003 standard certificates as they revised their vital statistics systems to move from paper based to electronic systems, and other states may do so as well. However, members of the Association agree that they will only voluntarily loan new data items on the electronic files they transmit to NCHS if the NCHS agrees to the following conditions:

- 1. The NCHS will only use the new items to assess and evaluate the quality of the data with the states submitting the data;**
- 2. The NCHS will not release the new item information in a statistical format or on data files or in publications except to communicate back to the states or at NAPHSIS meetings;**
- 3. States loaning new item data to the NCHS retain ownership of the data; and**

**4. The NCHS will return or purge the new item data upon request of a state.**

The Association shall transmit this resolution to the National Center for Health Statistics, the Centers for Disease Control and Prevention, the Maternal and Child Health Bureau at the Health Resources and Services Administration, the Association for State and Territorial Health Officials, the Association of Maternal and Child Health Programs, and Friends of the National Center for Health Statistics.

Adopted this \_\_8<sup>th</sup>\_\_ day of June 2005 in Cincinnati, Ohio.

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Steven Schwartz

President

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Catherine Molchan

Secretary Pro-Tem

**ATTACHMENT TO RESOLUTION 2005-01**

**NEW ITEMS IN VSCP DATA SETS FOR 2003 STANDARD CERTIFICATES  
NOT TO BE INCLUDED IN TRANSMISSIONS TO NCHS**

<b>BIRTHS</b>	<b>DEATHS</b>	<b>FETAL DEATHS</b>
Time of birth Facility – State hospital code Mother married ever? Mother not married -- Acknowledgement signed? Father’s education Date of last live birth Date of last other outcome Mother transferred? Date of last prenatal visit Plurality – Set order Number live born Matching certificate number Apgar 10 min Number of cigs smoked 3 mths prior to pregnancy Source of payment Mother’s height WIC food during pregnancy? Infections present Maternal morbidity Infant transferred within 24 hrs Infant living at time of report Infant being breastfed Infertility treatment (part of Risk Factors)	Demographic File Time of death Country of birth Method of disposition Occupation (optional) Industry (optional)  Medical File Tobacco use contribute to death? Transportation accident specifics Certifier Date of surgery	Time of delivery ZIP code of delivery Place where delivery occurred Facility – State hospital code Place of birth – Mother/ Father WIC food during pregnancy? Mother’s height Date of last prenatal visit Mother transferred Number of cigs smoked 3 mths prior to pregnancy Infections present Maternal morbidity Attendant NPI number Autopsy performed Histological placental examination Result used for determining cause of FD Method of Disposition Infertility treatment (part of Risk Factors)