

***VITAL RECORDS IMPROVEMENT FUND
ADVISORY COMMITTEE***

To The New Hampshire Department of State

- MINUTES -

Friday

November 30, 2018

-MINUTES-

Vital Records Improvement Fund Advisory Committee Meeting

November 30, 2018

Archives & Records Building
2nd Floor Conference Room
9 Ratification Way
Concord, New Hampshire 03301-2455

COMMITTEE MEMBERS PRESENT:

Stephen M. Wurtz, State Registrar
David Scanlan, Deputy Secretary of State, SOS Appointment
Brian Burford, State Archivist
Tricia Piecuch, Nashua City Clerk, NHC&TC Association Appointment
Janice Bonenfant, Concord City Clerk, NHC&TC Association Appointment
Nicole Bottai, Windham Town Clerk, NHC&TC Association Appointment
Todd Rainier, Hooksett Town Clerk, NHC&TC Association Appointment
Timothy Horrigan, NH House of Representatives, Public Member, SOS Appointment
Erin Piazza, Health Information Specialist, NHHA Appointment
Jennie V. Duval, MD, Medical Examiner Appointment
David Laflamme, Data User, DHHS Appointment
Bruce Riddle, Data User, DHHS Appointment

COMMITTEE MEMBERS EXCUSED:

Ashley Conley, Municipal Data User, DHHS Appointment
Peter Morin, Funeral Director Association Appointment
Denis Goulet, OIT CIO Appointment

GUESTS:

Dan Cloutier, SOS IT
Christopher Bentzler, SOS IT
Catherine Cheney, SOS IT
Nicholl Marshall, Vital Records

1. Call to Order and Introduction of Guests:

- Ms. Tricia Piecuch called the meeting to order at 09:31 with a quorum present. Introductions were made.
- Mr. Todd Rainier arrived at 09:32.

2. Approval of minutes:

- Ms. Piecuch asked the Committee to review the minutes of the June 15, 2018, meeting. Mr. Brian Burford made a motion to approve the minutes of the meeting of June 15, 2018, seconded by Mr. Rainier; a vote was taken and all were in favor.

3. Letter of Resignation:

- Mr. David Scanlan said that Mr. Stephen Wurtz will retire at the end of today, but Mr. Wurtz will remain in a part-time capacity through the end of his term as State Registrar in seven months. The governor and executive council did meet to approve that Mr. Wurtz could continue in a part-time status. The Department is more than pleased with the job Mr. Wurtz has done as he has done quite a few amazing things during his tenure.
- Mr. Wurtz said that it was difficult to make this decision with so many years in the funeral business and in vital records, including ten years in charge of probably the best Division in the State. Mr. Wurtz knows DVRA is the most advance division because of some of the initiatives put in place recently, and Mr. Wurtz is proud to have been a part of that. DVRA is on the cutting edge nationally. Dr. Jennie Duval, the Chief Medical Examiner, and her staff have been tremendously important to the success of DVRA. These activities have the attention of the federal government, which is why they keep funding these activities. One accomplishment is combining NeCOD, the death app, with another application in which Mr. Wurtz was involved called Death Worm, and it was demonstrated how a death certifier can use NeCOD to data mine a decedent's medical chart and use it to provide details to a cause of death. DVRA is now being paid to deploy this tested new technology. Mr. Wurtz and his counterpart in the CDC were asked to present "Death on FHIR", which is the death application NeCOD utilizing the new technology Death Worm and the super highway Fast Health Interoperable Resource (FHIR). This was presented at the HL7 FHIR group, which is perhaps the most elite technologically advanced group of people from all over the world, and each of the approximately three hundred members were invited to present

their health related applications to those assembled. DVRA, 's NeCOD won "Best in Show", beating Microsoft and Google. This gives DVRA reinforced credibility. Vendors are contacting DVRA to see what they can do to collaborate. Mr. Wurtz and Ms. Catherine Cheney have worked on forming partnerships with other software developers, such as Case Management Software and VertiQ. Mr. Wurtz can not be any prouder of his team; his team, as well as Mr. Scanlan and Secretary of State Mr. William Gardner, support Mr. Wurtz.

- Ms. Piecuch has worked with Mr. Wurtz for over twenty-four years, so she remembers the ABC/AMC/ADC program, followed by VRV 2000, followed by NHVRIN, and eventually NHVRIN*Plus*. Although Mr. Wurtz credits his team, Ms. Piecuch stated that Mr. Wurtz is the leader of that team. Ms. Piecuch thanked Mr. Wurtz for putting New Hampshire in the forefront. Mr. Wurtz responded that, as he said during his conversation with Nevada yesterday, DVRA knows where it is going and will continue to set the pace. Ms. Piecuch said that whoever replaces Mr. Wurtz has huge shoes to fill. Ms. Piecuch said that Mr. Wurtz will be there for his successor and for the Committee.
- Ms. Bottai arrived at 09:49.
- Dr. Duval was shocked because she had been unaware that Mr. Wurtz will be retiring soon. The NeCOD app is life-changing. Dr. Duval polled her investigators recently to learn how they felt about it and everything was positive because DVRA was always being there help out the OCME. Mr. Wurtz answered that when one pushes a product which has not been out there before, there is nothing on which to judge it. Every problem the OCME finds is an opportunity for DVRA to make it better, so Mr. Wurtz appreciates the feedback from the OCME. Dr. Duval and the OCME are the beneficiaries of the technology as the Committee approved the purchase of the iPads which the OCME uses. The OCME was the pilot for NeCOD.
- Ms. Catherine Cheney said she started working here just over three years ago. When she interviewed for the position, although Mr. Daniel Cloutier is her immediate supervisor, Mr. Wurtz was also in the room because she would be working closely with Mr. Wurtz. Ms. Cheney really likes that Mr. Wurtz is team oriented. When the OCME suggested a decline feature in NeCOD, Mr. Wurtz put that feature into NeCOD. When one walks into Mr. Wurtz's office, one can see the contracts and figures listed on his white board. Mr. Wurtz added there have been almost two million dollars' worth of projects which DVRA has been involved in the last five years. Ms. Cheney continued that Mr. Wurtz is a great leader and has great ideas.

- Ms. Bottai said that she has worked for her municipality for about fifteen years. When she first met Mr. Wurtz, he was always down-to-earth, welcoming, and warm; many other people with high titles have a different presence about them. Ms. Bottai said that Mr. Wurtz has been with the State for three and a half decades and, instead of going backward or being stuck in the same way, Mr. Wurtz broke that mold and seek to make things better.
- Ms. Piecuch said that town/city clerks deal with many state agencies, but her office never had any conflict with DVRA.

4. Budget:

- Mr. Scanlan said that everything is operating as usual with no big surprises where expenditures are. The Committee should think of a project on which to spend some of the money while still keeping a buffer in case a significant project needs to be done, such as a change to NHVRIN. The capital project for the Archives addition includes a digitization center, and the Committee has already approved a significant purchase of digitization equipment, which would benefit not just DVRA, but the Archives Division and the State generally. It might be time for a local level project, such as the local records grant preservation project which was done about a decade ago.
- Ms. Piecuch asked for an estimate of how much the NHVRIN*Plus* project will cost; Ms. Cheney answered that with the security module, the estimate cost is now almost two million dollars. Mr. Cloutier added that the estimate of the birth module, which just arrived, was between \$1.5 million and \$2.0 million, which was higher than had been expected. Ms. Piecuch and Ms. Cheney said these estimates do not consider the marriage and divorce modules, which have not been addressed yet.
- Mr. Cloutier said that it may take another \$4 million or \$5 million to complete the project in another two years, which may deplete the fund. Mr. Cloutier added that changing technology and the shift of organization for CNSI can cause variability in the price estimates. Mr. Wurtz said that he and Ms. Cheney have met with the new management of CNSI, who also like what DVRA is doing. The price received for the birth module is still negotiable, but fits within the plan in place.
- Ms. Piecuch said she wants to see where the balance is in light of the NHVRIN*Plus* project for the next meeting, thus determining any more preservation grants. Mr. Cloutier asked how much the preservation grant was last time; Mr. Wurtz said it started at few hundred thousand dollars and ended up at \$1.3 million.

- Ms. Erin Piazza arrived at 10:02.
- Ms. Bottai said she has been working on a project in the last two years in her municipality. While researching in the beginning phases, Ms. Bottai noticed that the Commonwealth of Massachusetts received a federal grant to digitize local records and to create a website where the public could look at these archives online. Ms. Bottai asked if New Hampshire has thought about something similar; Mr. Burford answered in the affirmative, but there is a vast difference between the Massachusetts Archives and the New Hampshire Archives. Mr. Wurtz added that New Hampshire has more confidentiality requirements than Massachusetts. Mr. Burford reaffirmed that this is something he would like to do, but there is difficulty within New Hampshire's resources at the moment to get that far. Ms. Bottai suggested recruiting towns if they have such equipment because Ms. Bottai was able to purchase some scanning equipment for her records project. Ms. Bottai's goal is have her town's residents go to the town's website and look at old archived records. Mr. Wurtz asked what that cost the Town of Windham; Ms. Bottai answered \$50,000, but that included other things, such as hiring out a company to organize and establish a boxing method for the town's messy records vault. There was also imaging and an indexed repository. Ms. Bottai thought it important to mention the difference between the private silos, which the general public may not see but the town staff may see, and the public silos, which contain meeting minutes, election records, and annual town reports which would interest the public. Ms. Bottai knows here town's residents will love this, but it is a long project.
- Mr. Wurtz applauded Windham for doing that, but understood the pain involved in the process. Mr. Wurtz added that, when the Windham project is done, the Committee could do a case study on what happened so a price could be estimated. Ms. Bottai said the hands-on piece of it was keying information; as soon as other departments in her town see what the Windham town clerk is doing, the other departments will want to join in. Mr. Wurtz added that Ms. Bottai's staff is doing extra work to make this project successful; as DVRA has learned, just because another company keyed records does not mean that names were spelled correctly.
- Mr. Cloutier asked where the town's data is; Ms. Bottai answered that the data is in a cloud right now. Mr. Cloutier said there should be something in the plan for data migration and data continuity. For example, Mr. Cloutier has 5 ¼ inch floppy disks which Mr. Cloutier can still read because he has a machine which can read them, but in another three or four years that machine may not work anymore, thus that data will be lost unless time is taken to migrate that data.

- Ms. Bottai said that she must go under the direction of her board of selectmen - some like technical staff and do not want to see paper, others have been in those positions a long time and want to keep the paper just in case. Ms. Bottai agrees with the latter because of the issue Mr. Cloutier cited. But Ms. Bottai does her job as a town clerk when she had found a mess before and organizes it.
- Mr. Burford moved to accept to budget and Mr. Wurtz seconded. A vote was taken and all were in favor.

5. IT Update:

- Mr. Bentzler said fifty personal computers to replace about one hundred devices out in the field; 42 have been replaced with Windows 10 compliant machines. There are fifty machines now on Windows 10; Mr. Bentzler will have to push updates onto the other machines to get them on Windows 10. Some machines are fairly straightforward in replacing an old machine with a new one, but other machines have other software on them which makes it more complex. Since the last meeting, there have been two updates to the NHVRIN software; there will be an update to NHVRIN tonight regarding changes to Mr. Wurtz and changes to marriage law which will take effect in the new year. Ms. Piecuch asked if generational identifiers in the “legally known as” names on marriage records may be amended in the new release; Mr. Bentzler said the issue is related to the fact that the surname and the generational identifier are two separate fields, and Mr. Wurtz said it will not be in this release but re-engineering will be required. Mr. Cloutier said that the maintenance page would be put on NHVRIN at 9:00pm tonight through 9:00am tomorrow, and asked the clerks if that twelve hour window would affect them issuing any documents; the response was in the negative.
- Ms. Cheney said that she and Mr. Bentzler are constantly working on NHVRIN*Plus*. The vendor has just produced an interface on NHVRIN*Plus* which all users should like. NHVRIN*Plus* employs technology which will not be browser dependent. Ms. Heather Bentley, Mr. Christopher Wilder, and Mr. Nicholl Marshall are frequently testing NHVRIN*Plus* in the UAT environment. But a funeral director will be needed to beta-test the death module of NHVRIN*Plus*, perhaps in late February of early March. It would also be helpful for a town/city clerk to test it. Mr. Wurtz said he wants to hear from users about what problems exist.
- Mr. Cloutier asked how old are the other fifty computers; Mr. Bentzler answered they are about three or four years old. Ms. Bonenfant asked how many municipalities have no state computers; Mr. Bentzler answered there are about

136 municipalities with no state computers. Ms. Bonenfant mentioned that her office does not use state printers; Mr. Bentzler answered that other municipalities, such as Manchester and Dover, also do not use state printers.

- Mr. Burford moved to purchase fifty personal computers and Mr. Rainier seconded; a vote was taken and all were in favor.

6. CDC Contract “Special Project”:

- Ms. Piecuch pointed to handouts. Ms. Cheney said there are two software apps in development. One involves the development of *NHVRINPlus*, which will be the successor of *NHVRIN*. The other is taking the National electronic Certification Of Death (NeCOD) app to the national level. Both NeCOD and *NHVRINPlus* are HL7 FHIR enabled. In the contract, the CDC declared that if a state will receive an award for mobile death certification, that state must comply with certain technological standards, not necessarily NeCOD but NeCOD is the only application available with those technological advances. Mr. Wurtz added that the CDC has endorsed NeCOD as the national standard for electronic certifications of death, although this disturbed many vendors. There is also funding for DVRA to help two states adopt NeCOD. Mr. Wurtz added that he had a teleconference yesterday with Nevada with the future intention of adopting the NeCOD app. Ms. Cheney continued that when the death certifiers at Wentworth-Douglass Hospital, they identified a feature which they would like to have in NeCOD, so DVRA is now working to put that feature in NeCOD.
- Ms. Cheney said a contract with the CDC is providing funding for several things. One of them is an automated bi-directional State & Territorial Exchange of Vital Events (STEVE). Another item is the use of application program interfaces (APIs) to transmit death data to a medical examiner’s Case Management System (CMS). Another initiative is an Implementers Community to which six states were awarded membership. Another goal is to have 90% of all drug deaths be determined as such within ninety days of death. All these initiatives will help with the timeliness and quality of death data. DVRA is not just dealing with flat records, but secure transmission of data. New Hampshire is now a gold member of HL7, a consortium which adopts FHIR. Ms. Cheney has completed the FHIR fundamentals course.
- Ms. Piecuch repeated that two states are supposed to receive financial support to adopt NeCOD, and asked what will be the other state if Nevada is one of them; Ms. Cheney answered that Nevada already got the award and weekly meetings had been set up in April as part of the original eCOD contract. Since Nevada was part of the original eCOD contract, two additional states are sought as part of the

new contract. Surprisingly, Nevada's vendor would not let Nevada access Nevada's data.

7. Situational Surveillance:

- Dr. David Laflamme said Situational Surveillance is working well and doing what is expected. Dr. Laflamme has a resident who is assisting with the project and the resident next week will contact the seventeen birth hospitals in New Hampshire about the wording and the collection of data. Dr. Laflamme intends that the two questions presently in Situational Surveillance be moved to a permanent feature on the birth module in the near future.
- Ms. Piecuch asked if a recent meeting with the governor and executive council might hold back what Dr. Laflamme needed to do with Situational Surveillance; Dr. Laflamme answered in the negative, although funding specific to moving the temporary questions to permanent status was put on hold. Ms. Piecuch said that these two questions will not appear on a certified copy of a birth certificate; Dr. Laflamme reaffirmed that they would not appear because those data points were protected information.

8. CDC National Implementers Workgroup:

- Ms. Cheney said there will be about fifteen states using NeCOD. Mr. Wurtz won the "Best in Show" prize at the HL7 conference which was attended by people from all over the world. Ms. Cheney said NeCOD is becoming the industry standard. Mr. Wurtz added that collaboration with DVRA's vendor, the end-users, and the CDC was key.

9. Digital Preservation:

- Mr. Burford created a draft set of questions which he distributed to the Committee. Mr. Burford and Ms. Cheney have been working regularly to identify who builds archive writers and what questions should be asked of them. At this point, Mr. Burford has a fairly good idea of what they can do and what the business objective of the Archives Division would be. In the previous meeting, Mr. Burford was asked to prepare a Request For Information (RFI), and Mr. Burford drafted the sample questions he would like to ask. Mr. Burford invited other members of the Committee to propose questions as the draft questions have not been issued to anybody yet. "Digital Preservation" is the label used in the minutes and the agenda, but it is really the preservation of the information which is currently digital that would be preserved as an analog image on microfilm, which has an expected lifespan of five centuries, and has evidentiary value inasmuch as it is very difficult to modify, unlike a digital file which can be very

easily changed. This would not eliminate the digital world, but rather be an insurance. What is in the digital world has migrated forward after successive generations of software iterations. Mr. Burford believes that what is needed will be about \$150,000 as opposed to the more basic models which might cost between \$75,000 and \$100,000.

- Dr. Bruce Riddle asked who develops the film; Mr. Burford answered that the Archives Division used to develop film but a vendor now develops microfilm for the Archives Division. The Archives Division will expose the microfilm and sent it to a vendor to be developed and the vendor would return the microfilm. Dr. Riddle asked if the fail point would be that transit; Mr. Burford answered in the affirmative. Mr. Burford added that the vendor for the Archives Division is in Manchester, so the Archives Division drives any material necessary to and from the vendor.
- Mr. Wurtz added that chains of custody are very important to the whole Department of State. Dr. Riddle suggested adding that to the RFI since the RFI is still being developed; Mr. Burford answered that is a possibility. Mr. Burford also mentioned that transit is a different issue. Dr. Riddle acknowledged that while it is still fascinating, he does not like the smell of microfilm; Mr. Burford responded that this device is one of many things which Mr. Burford is pursuing for the Archives Division, so that one can go from digital to microfilm and from microfilm to digital.
- Ms. Piecuch said that she looks forward to the Committee's next meeting when Mr. Burford might have an RFI completed and asked Mr. Burford to send a copy of the RFI beforehand.
- Mr. Scanlan left at 10:59.

10. Mortality Surveillance Agent:

- Because the Mortality Surveillance Agent (MSA), Mr. Wilder, is absent, Mr. Marshall reported the activities of the MSA. Mr. Wilder has been the MSA for almost one year. Mr. Wilder has been instrumental in introducing NeCOD to the OCME at their meeting in April. Since the previous meeting, Mr. Wilder has investigated who among the OCME has or has not been using NeCOD. Most of the Assistant Deputy Medical Examiners (ADMEs) have embraced NeCOD; Mr. Wilder talked with the ADMEs who have used NeCOD only occasionally, and has assuaged their concerns about using the app.
- Mr. Marshall continued that the MSA has held on-site training courses to teach death pronouncers and death certifiers how the app works. Mr. Wilder was at

Wentworth-Douglass Hospital for this purpose in October, and at New Hampshire Oncology-Hematology (NHOH), a medical office in Hooksett, in November. In the past, the physicians at NHOH have been resistant to use any electronic pronouncement or electronic certification, so Mr. Wilder and Mr. Wurtz informed NHOH about the statute stating deaths occurring in New Hampshire shall be filed electronically within thirty-six hours of death and Mr. Wilder held a training course of NeCOD on-site at NHOH. Mr. Wilder has plans to conduct the on-site training course at other hospitals, such as Monadnock Community Hospital in Peterborough and the Veterans Administration Hospital in Manchester. The plan is for NeCOD to be released to death pronouncers and death certifiers to Wentworth-Douglass Hospital in the new year, and eventually to all death pronouncers and death certifiers across New Hampshire. This will facilitate the electronic filing of deaths.

- Mr. Wurtz added that DVRA is introducing the technology to registered nurses who pronounce death and thus can initiate a death record and push the incomplete record to a death certifier who will later put it out into the cloud for a funeral director to obtain and finish.
- Dr. Riddle noted that his group has the most trouble with the APRNs and PCs; Dr. Riddle asked when they will be brought up to speed on this. Mr. Wurtz answered that they will be brought up to speed when Mr. Wilder visits the hospitals. When the team goes to a facility to educate those who are capable of partially completing a death record, the APRNs and PCs are included. Dr. Riddle said that APRNs which his group sees are all not affiliated with a hospital. Mr. Wurtz said DVRA, through a series of correspondence, will cover those death pronouncers and death certifiers who do not affiliated with a facility.
- Ms. Piecuch asked if DVRA can determine who has and who has not registered for access to NeCOD; Mr. Wurtz answered in the affirmative, and Mr. Wilder is following this.
- Mr. Horrigan arrived at 11:06.
- Dr. Riddle observed that most New Hampshire deaths occur outside of hospitals, and New Hampshire should be proud of that; Mr. Marshall confirmed that the percentage of New Hampshire deaths which occur in hospitals is in the thirties. Dr. Riddle explained that when his group wants to contact an APRN or PC, there is no address. Ms. Cheney said Dr. Riddle may have just alerted her to something else which she needs to define and would like to discuss it with Dr. Riddle afterwards. Mr. Wurtz explained that is one reason why he and Mr. Wilder went to NHOH because NHOH is involved in a number of non-hospital deaths.

- Ms. Bottai asked if DVRA has reached out to bordering states about sharing NeCOD; Ms. Cheney said not yet, but Mr. Wurtz said DVRA did make a demonstration of NeCOD to Massachusetts as Massachusetts funeral directors expressed a desire for NeCOD.
- Dr. Riddle said in some states, almost eighty percent of cancer deaths occur in hospitals. In New Hampshire, about eighty percent of cancer patients die at home or a non-hospital place, which is a remarkable achievement because one likes to think that decedents die where they want to die and not in a hospital. Still, the non-physician certifiers are not up to speed in certifying death. Nurses, PCs and APRNs all have their own newsletters; Mr. Wurtz asked Dr. Riddle to send him a list of contacts for those groups.
- Ms. Piazza noted that providers at hospice groups are not necessarily tied to a hospital, so perhaps sending a message focusing on that group would be a good idea since they probably have much to do with in-home deaths. Mr. Wurtz said that they will be targeted for training. Mr. Wurtz said he is seeing more death certifiers signing on line, and the funeral directors are happy that more often a funeral director is able to push a death record in-progress to a certifier, even with deaths not involving the OCME. Dr. Duval said the ADMEs are still having to pronounce many deaths, but they are able to push those deaths to others certifiers if the OCME declines to certify. Mr. Wurtz said that DVRA is working on a federal contract requiring DVRA to show tangible proof that education is working, so those to certify the most should be trained first.

11. Community of Practice:

- Mr. Wurtz said the Community of Practice is a concept which DVRA put together which will allow other states to join New Hampshire for a fraction of what application software would normally cost them. Other states could then take advantage of the New Hampshire experience, including some of the initiatives New Hampshire has in place and the fact that New Hampshire is still deploying the most cutting edge technology in applications. Other states may realize that they do not have the money to do what New Hampshire is doing and the vendors do not want to get involved in the new technology because the vendors feel it increases the price of what they do while they try to sell what they have. Therefore, New Hampshire is willing to open up to other states to join New Hampshire in a Community of Practice (CoP). Guam and Rhode Island continue to express interest, and New Hampshire is at a contractual state with both of them; Mr. Wurtz and Ms. Cheney met with legal counsel this week. Shortly, Rhode Island and Guam will be part of the New Hampshire experience, including contracting with New Hampshire's vendor, who will take NHVRIN*Plus* and

change the “NH” to “RI” and “GU” as the case may be. It will save other jurisdictions the burden of creating technology, but allows them to experience the best that money can buy. For example, if a program cost New Hampshire one million dollars, another jurisdiction may get the licensing use of that module for \$50,000 per year. It is a tremendous savings, but what it does for New Hampshire is to create a nucleus of states working together to help continue change in the data collection field. Mr. Wurtz, Ms. Cheney, and Mr. Bentzler were on a teleconference this week regarding the Implementers Workgroup, which is open to anyone on the telephone, although in-person contact is by invitation only. There were a tremendous amount of vendors on the call this week because vendors are realizing this is taking hold. Vendors believe New Hampshire is competing with vendors, although New Hampshire is not competing with vendors; vendors sell things whereas New Hampshire is giving it away. Nevada is coming on board with just the NeCOD app, while New Hampshire hopes to collaborate with Utah and Michigan. Michigan has produced their first FHIR-enabled birth app. Michigan also has what Mr. Wurtz calls a Birth Worm, which is similar to New Hampshire’s death worm, giving medical records personnel the ability to data mine from that to fill out the birth worksheets. So New Hampshire may trade technology with Michigan, and Michigan is eager to collaborate with New Hampshire. American Samoa, Connecticut, and New York are all trying to figure out all this will all fit with what they currently have. Nevada has had a hard time with its current vendor, but Nevada is taking this positive experience dealing with New Hampshire.

- Ms. Picuch sat in one of the CoP meetings with Rhode Island and Guam, and they were amazed that New Hampshire uses the program on a daily basis. Ms. Picuch asked if Nevada has a long contract with their vendor; Mr. Wurtz answered in the negative. Nevada’s vendor has chosen to participate and theoretically allow Nevada to have access to its data. Mr. Cloutier asked if Nevada is on the cloud; Mr. Wurtz answered in the negative. Mr. Wurtz continued that Nevada’s vendor told Nevada Vital Records that the data belongs to Nevada Vital Records, but Nevada’s vendor is controlling the data and Nevada’s does not want to participate with New Hampshire. Dr. Riddle said that this story is not uncommon. Mr. Wurtz believes it is because the fear of what is new and what this future will bring which causes hesitancy to embrace this.
- Mr. Cloutier said that New Hampshire is not a cloud-based environment. New Hampshire controls, has access to, and owns its own data. New Hampshire has legislation which requires DVRA to protect that data. New Hampshire’s maintenance agreement with its vendor does not give that vendor control of the data. Other states may not have such an arrangement. Mr. Wurtz added that the

New Hampshire Secretary of State has given DVRA the tools to be able to do this. If New Hampshire had no money, no knowledge, and no concern, New Hampshire could have told its vendor to host the data and not bother New Hampshire about it, which would have resulted in that vendor controlling the data. Nevada Vital Records told its story to many people, and Nevada's vendor hopefully learned a valuable lesson.

12. Evolution of Vital Statistics Mortality Reporting:

- Mr. Wurtz said what follows is a summation of what has been done at DVRA in the thirty-four years during which Mr. Wurtz has been present. Mr. Wurtz was contacted by former New Hampshire Registrar Charles Sirc, who actually first hired Mr. Wurtz in 1984, to say that Mr. Sirc went with a group of businessmen to Cuba on an international symposium on technology, having returned last week. Cuba holds these symposiums biennially and people worldwide were in attendance. Mr. Sirc has put Mr. Wurtz in touch with Mr. Sirc's contacts, which include representatives from places like England and Italy. The CDC did not want to participate in this endeavor, so Mr. Sirc did not attend the symposium in Cuba on behalf of the CDC, but instead attended as the former New Hampshire Registrar. This allowed Mr. Sirc to inform the symposium about New Hampshire's experience. Mr. Sirc first hired Mr. Wurtz because he was a funeral director, and Mr. Sirc wanted Mr. Wurtz's ideas about improvements in the vital records registration processes. Originally, Mr. Wurtz would give a year of his time in this endeavor, but today is Mr. Wurtz's last full-time day in this endeavor thirty-four years later. In Cuba, Mr. Sirc discussed sheets of paper, to ABC/ADC/AMC, to VRV 2000, to NHVRIN, to NHVRIN*Plus* and the mobile app and HL7 FHIR enhancements, and the attendees were blown away. The CDC gives to Mr. Wurtz a dashboard of indicators each month; the national lag between time of death and the time the CDC receives it is thirty-five days whereas New Hampshire's lag is less than three days because of technology.
- Dr. Laflamme asked if the members of the Committee could have a copy of that presentation; Mr. Wurtz answered in the affirmative.
- Mr. Wurtz continued that Mr. Sirc created the legislation which created the Fund and the Committee because Mr. Sirc was tired of having no money to do things. Mr. Wurtz said that without this Fund, he does not know where DVRA would be today; Ms. Piecuch offered that DVRA would be where other state vital records agencies are which had wished that they would have done this.
- Mr. Wurtz said he has recently returned from the National Association of Medical Examiners annual meeting, although Dr. Duval did not attend. The Committee

did not need to approve Mr. Wurtz's travel expenses because the latest contract with the CDC gave Mr. Wurtz the funds to travel to venues like that and to the Coroners Association next year and to the Funeral Directors Association annual meeting. Venues like that enable DVRA to get the message out. When Mr. Wurtz travels, he does so with complete confidence that there is a funding source to support that, which adds tremendous credibility when dealing with the CDC. The CDC believes in DVRA, as demonstrated by the fact that the CDC has provided two million dollars' worth of contracts in the last five years; Ms. Piecuch offered that this was a testament to Mr. Wurtz and his team.

13. Old Business:

- Ms. Piecuch said that the grant preservation was already addressed while discussing the budget. At the next meeting, it will be better known how things stand regarding the budget and contracts with CNSI; from there, a grant preservation project may be explored.
- Ms. Piecuch said that all the clerks are now on the QuickStart program. Ms. Piecuch asked if there was a problem with invoicing after the switch from SOSKB to QuickStart; Mr. Cloutier said that Ms. Nancy Swett may have better knowledge of the answer to that question. Mr. Wurtz said that himself and Ms. Swett have received correspondence which said that QuickStart is easy to use. Both Mr. Wurtz and Ms. Swett are constantly monitoring the responsiveness from the clerks and the aging reports to see who has not paid. Mr. Wurtz follows up with them every month. Three municipalities have received a shut-off notice if they do not comply; Mr. Wurtz also sends shut-off notices to those towns' selectmen because someone else needs to see those notices. DVRA has the obligation to perform the due diligence of who is using the programs and sending in the monies as the law says.

14. New Business:

- Dr. Laflamme said the Division of Public Health Services needs out-of-state birth and death records of New Hampshire registrants. Ms. Virginia Rowe and Ms. Wendy Kizer work very hard to enter those out-of-state records, although some states send to DVRA records using an archaic process. Mr. Wurtz said that the first project Ms. Cheney discussed was the bi-directional transfer of data through STEVE to/from the CDC and the other appropriate jurisdictions. Dr. Laflamme asked when the process of a state depositing within DVRA's database, thus no lag in data entry, turn on; Mr. Wurtz and Ms. Cheney said they are working on that right now. Ms. Cheney said that yesterday's teleconference addressed FHIR in the Inter-Jurisdictional Exchange (IJE) agreement, and in January's Connect-A-

Then there should be a demonstration of this. Mr. Wurtz said that automation is the number one priority in the newest contract. Ms. Cheney said that STEVE has a bucket of IP address and DVRA's security firewalls will not accept those incoming IP addresses. Mr. Bentzler said that the process of transmitting data was changed in the change from STEVE 1.0 to STEVE 2.0, which is why it has taken a while for other states to come on board.

- Dr. Laflamme indicated the 2017 resident death file is not complete yet and asked what the target date for its completion is; Mr. Wurtz answered the spring of 2019. Mr. Cloutier asked if the change from STEVE 1.0 to STEVE 2.0 made that delay; Mr. Wurtz answered in the affirmative. Mr. Wurtz added that Ms. Rowe and Ms. Kizer are probably keying those out-of-state records today, and DVRA has a low number of staff right now.
- Mr. Rainier asked the Committee could do anything to speed up the process of completing the 2017 resident file. Dr. Laflamme asked if there was a short-term solution. Ms. Piecuch asked if DVRA has staffing issues because of the holidays or because DVRA has a low number of personnel now. Mr. Wurtz said that DVRA has slots which are funded and vacant, but attempts are being made to fill them. Mr. Cloutier added that the labor grades for those positions are not very high, and in this labor market there are not as many applicants as there could be.
- Ms. Piecuch asked if the positions posted; Mr. Wurtz answered in the affirmative. Mr. Wurtz has forty applications on his desk for one particular position, but he does not want to pursue thirty-nine of them. Mr. Wurtz surmised that many people at hospitals who enter birth records are usually the most recently hired people; Ms. Piazza countered that it was not that case at her hospital. Mr. Wurtz often hears that hospitals hire new people who are placed in medical records and tasked with collecting birth data; if they are good the hospitals keep them, whereas if they are not good the hospitals dismiss them. Mr. Wurtz continued that collecting birth data should not be the litmus of a new employee's competence. Dr. Laflamme stressed that Ms. Rowe and Ms. Kizer work hard and do their jobs well. Mr. Wurtz believes that the Committee funds one of those data-entry positions.

15. Next meeting & adjournment:

- Ms. Piecuch said the next meeting is scheduled for Friday March 29.
- Mr. Burford moved to adjourn, and Ms. Bottai seconded; a vote was taken and all were in favor. Meeting adjourned at 11:51.