

2018 Current Fiscal Year Report: National Committee on Vital and Health Statistics

Report Run Date: 06/18/2019 09:47:06 PM

1. Department or Agency

Department of Health and Human Services

2. Fiscal Year

2018

3. Committee or Subcommittee

National Committee on Vital and Health Statistics

3b. GSA Committee No.

965

4. Is this New During Fiscal Year?

No

5. Current Charter

01/16/2018

6. Expected Renewal Date

01/16/2020

7. Expected Term Date

8a. Was Terminated During Fiscal Year?

No

8b. Specific Termination Authority

8c. Actual Term Date

9. Agency Recommendation for Next Fiscal Year

Continue

10a. Legislation Req to Terminate?

Not Applicable

10b. Legislation Pending?

Not Applicable

11. Establishment Authority Statutory (Congress Created)

12. Specific Establishment Authority

42 U.S.C. 242k

13. Effective Date

07/23/1974

14. Committee Type

Continuing

14c. Presidential?

No

15. Description of Committee Scientific Technical Program Advisory Board

16a. Total Number of Reports 6

16b. Report Date

Report Title

12/13/2017 Health Information Privacy Beyond HIPAA: A 2018 Environmental Scan of Major Trends and Challenges

01/10/2018 Vital Records and Vital Statistics in the United States: Uses, Users, Systems, and Sources of Revenue

05/21/2018 Summary Report: Next Generation Vital Statistics - A Hearing on Current Status, Issues, and Future Possibilities

07/23/2018 CIO Forum Summary Report

09/14/2018 Health Terminologies and Vocabularies Environmental Scan

09/14/2018 Health Terminologies and Vocabularies Expert Roundtable Summary

Number of Committee Reports Listed: 6

17a. Open 9 **17b. Closed** 0 **17c. Partially Closed** 0 **Other Activities** 0 **17d. Total** 9

Meetings and Dates

Purpose

Start

End

The NCVHS virtual meeting of the Population Health Subcommittee convened to discuss follow up work on the NCVHS September 11-12, 2017, Next Generation Vital Statistics Hearing. Two reports from the hearing were discussed and refined: "Next Generation Vital Statistics: A Hearing on Current Status, Issues, and Future Possibilities," and the report commissioned by NCVHS, "Vital Records and Vital Statistics in the United States: Uses, Users, Systems, and Sources of Revenue." In addition, the Subcommittee discussed topics and projects to be considered for the 2018 workplan. 11/28/2017 - 11/28/2017

The NCVHS virtual meeting of the Privacy, Confidentiality and Security Subcommittee convened to address two overarching agenda items: discussion and refinement of a draft report commissioned by the Committee, "Health Information Privacy and Security Beyond HIPAA: A 2018 Environmental Scan of Major Trends and Challenges"; and obtaining input from a panel of invited experts to further inform the draft environmental scan research being conducted on the Committee's behalf. The agenda also included discussion of privacy-related topics under consideration for the 2018 workplan. 11/28/2017 - 11/28/2017

The NCVHS virtual meeting of the Standards Subcommittee convened to consider the Subcommittee's workplan and big picture milestones for three possible projects in 2018: 1) a Chief Information Officer (CIO) Forum to further inform the Subcommittee's development of recommendations for a "Predictability Roadmap" to improve the update, adoption and implementation process for health care administrative standards and operating rules; 2) the challenge of patient identification and matching for healthcare providers and patients; and 3) potential guidance pertaining to the prior authorization transaction. In addition, CMS provided a briefing to the Subcommittee on the New Medicare Card Project. 11/29/2017 - 11/29/2017

The full Committee deliberated and voted to approve the report, "Health Information Privacy Beyond HIPAA: A 2018 Environmental Scan of Major Trends and Challenges," to inform work on the "Health Information Privacy and Security Beyond HIPAA" project. This effort included an exploration of challenges that extend beyond HIPAA and the range of policy options that may be available to the Department related to privacy, security and access measures to protect individually identifiable health information in an environment of massive electronic data exchange. The Population Health Subcommittee focused on Next Generation Vital Statistics in follow up to its September 11-12, 2017 hearing and subsequent analyses conducted following the hearing. The purpose of the main project was to assess the current state of the national vital statistics system (NVSS) to address concerns regarding sustainability and viability of the system infrastructure. The Committee discussed concerns regarding decreased access to county and community-level data and potential plans to conduct work to address the issue. The Committee also discussed the Predictability Roadmap as part of the Standards Subcommittee's project to identify possible approaches to improve the predictability and improvements in the adoption of, and processes related to, updating standards and operating rules for electronic administrative transactions (e.g. claims, eligibility, electronic funds transfer); health terminology & vocabulary development, maintenance, and dissemination processes; and mapping out activities and timelines for the Committee's 2018 work. 01/09/2018 - 01/10/2018

The NCVHS Subcommittee on Standards convened a virtual hearing to seek input from the health care industry regarding updated versions of standards from the National Council for Prescription Drug Programs (NCPDP) – specifically, version F2 and Version 10 of the Subrogation standard for Medicaid. The Subcommittee obtained input from stakeholders for the costs and benefits of implementing the updated versions of the two pharmacy standards: NCPDP F2 and pharmacy subrogation, and to understand how they would reduce existing barriers to the use of standards, or mitigate burdens. On January 9, 2018, the DSMO submitted a letter to NCVHS recommending the adoption of two National Council of Prescription Drug Program (NCPDP) updates to the adopted retail pharmacy standards. 03/26/2018 - 03/26/2018

These updates include: 1) an update to the retail pharmacy standard, the NCPDP Telecommunication and Batch standard version D.0., which was adopted in 2009. The update would be NCPDP Telecommunication and Batch standard version F2, which would enable eligibility verification, claims, services, information reporting, prior authorization (for pharmacy), and pre-determination of benefits; and 2) an update to the Medicaid subrogation standard, also adopted in 2009, to expand subrogation to all payers, including Medicare Parts C and D. The updated subrogation standard is the Batch Standard version 10, and replaces version 3.0. It will enable all payers to conduct a uniform process to support compliance with requirements for recovery of federal, state and other plan overpayments, mitigating manual processes currently in place.

The Committee discussed and approved a letter to the Secretary, in tandem with a summary report of the hearing held September 2017 on critical issues facing the U.S. Vital Registration and Vital Statistics Systems. In addition, a letter to the Secretary regarding the Committee's recommendations resulting from the March Standards Subcommittee Hearing on NCPDP Updates was discussed and approved for submission. The Office of the National Coordinator (ONC) gave an update and the Committee discussed its collaboration with ONC and its advisory committee HITAC as part of fulfilling the stipulation to coordinate outlined in the 21st Century Cures Act. The Subcommittee on Standards briefed the Committee on its upcoming CIO Forum as part of the Subcommittee's project to identify approaches to improve predictability and improvements in the adoption and processes related to updating standards and operating rules for electronic administrative transactions (e.g., claims, eligibility, electronic funds transfer). The Committee reviewed and refined the agenda and plans for the July expert roundtable examining health terminology and vocabulary development, maintenance, and dissemination processes. They also presented the most current draft environmental scan report of the health terminologies and vocabularies landscape and discussed feedback and input for the next version. The Committee continued development of its Health Information Privacy & Security Beyond HIPAA project focusing on clinical registries as well as personal devices that produce patient-generated health data (PGHD), as use cases. An outside expert, Jon Neiditz, with Kilpatrick Townsend & Stockton LLP, was invited to provide an overview on the new European General Data Protection Regulation (GDPR). Soma Stout with the Institute for Healthcare Improvement/100 Million Healthier Lives discussed recent developments with on the NCVHS Measurement Framework Implementation Work. The Committee also received updates from the HHS Office of Civil Rights and CMS regarding recent developments resulting from the initial wave of the Medicare Card Project roll out.

05/15/2018 - 05/16/2018

The Subcommittee on Standards held a CIO Forum as part of the process to draft recommendations to the HHS Secretary for improving the update, adoption and implementation process for health care administrative standards and operating rules. This meeting was part of the Standards Subcommittee 18 month process of engagement with industry and stakeholders. In August 2017, NCVHS held a dialogue with the Standards Development Organizations (SDOs) to identify an initial set of draft action steps and recommendations. The next step towards finalizing recommendations for the Secretary was to convene a group of Chief Information Officers (CIOs) who work with the standards and operating rules as end users, with health care leaders from various fields of health care technology. During this Forum, held on May 17, 2018, the CIOs and health care industry leaders provided information based on their expertise and direct experience with changing business and technology needs specifically as these pertain to the standards that have been adopted under HIPAA such as claims, eligibility, referrals and authorizations. Some participants shared their experience using the standards day-to-day, and to increase efficiencies within their organizations. Other participants shared their experience implementing or seeing innovative technology being used for the exchange of electronic health care information. During the second part of the Forum, participants engaged in an open discussion about the Subcommittee's draft "Predictability Roadmap" themes and developed additional suggestions for action items and recommendations for the Secretary.

05/17/2018 - 05/17/2018

NCVHS convened an expert roundtable meeting, in conjunction with the NIH National Library of Medicine (NLM) in order to: 1) Assess strengths, weaknesses and gaps in the U.S. health terminology and vocabulary (T/V) environment; 2) Consider areas for near term improvement in the development, maintenance, dissemination and adoption of named code sets; 3) Discuss opportunities for improved governance, coordination and communication across terminology and vocabulary developers and their stakeholders; 4) Identify top priority gaps in the U.S. health terminology and vocabulary coverage; and 5) Envision a roadmap for introducing improvements over the next decade. The Committee identified key experts in the field to provide extensive input to the Standards Subcommittee as it studied these questions and finalized an Environmental Scan report of the current state of the U.S. health terminology and vocabulary (T/V) environment. With this information, the Committee intends to draft recommendations to the HHS Secretary outlining actions that HHS might take to improve development, dissemination, maintenance, and adoption of standards.

07/17/2018 - 07/18/2018

The Committee deliberated, achieved consensus and approved two reports, “Health Terminologies and Vocabularies Environmental Scan,” and “Health Terminologies and Vocabularies Expert Roundtable Meeting Summary.” On the afternoon of the first day, three panels of experts provided input to the Committee regarding strategies and resources to increase access to small area data, and in general, the challenges in making relevant sub-national level health data more readily available—the session was organized by the Subcommittee on Population Health. The co-chairs of the Subcommittee on Standards presented Draft Recommendations for the Predictability Roadmap as part of the Subcommittee’s project to identify possible approaches to improve predictability and improvements in the adoption and processes related to updating standards and operating rules for electronic administrative transactions (e.g., claims, eligibility, electronic funds transfer). The Privacy, Confidentiality & Security Subcommittee presented use cases for its “Health Information Privacy and Security Beyond HIPAA” project that highlight the intersection of the regulated and unregulated domains, and proposed a model that depicts the opportunities to address risks to individually identifiable information through improved stewardship – for consideration by the full Committee. Finally, the Committee launched into planning for its 13th Report to Congress, a congressionally-mandated report that is due in 2019.

09/13/2018 - 09/14/2018

Number of Committee Meetings Listed: 9

	Current FY	Next FY
18a(1). Personnel Pmts to Non-Federal Members	\$36,000.00	\$33,000.00
18a(2). Personnel Pmts to Federal Members	\$0.00	\$0.00
18a(3). Personnel Pmts to Federal Staff	\$686,684.00	\$742,774.00
18a(4). Personnel Pmts to Non-Member Consultants	\$0.00	\$0.00
18b(1). Travel and Per Diem to Non-Federal Members	\$45,091.00	\$46,797.00
18b(2). Travel and Per Diem to Federal Members	\$0.00	\$0.00
18b(3). Travel and Per Diem to Federal Staff	\$0.00	\$0.00
18b(4). Travel and Per Diem to Non-member Consultants	\$10,440.00	\$7,669.00
18c. Other(rents,user charges, graphics, printing, mail, etc.)	\$489,180.00	\$494,155.00
18d. Total	\$1,267,395.00	\$1,324,395.00
19. Federal Staff Support Years (FTE)	4.52	4.92

20a. How does the Committee accomplish its purpose?

The Committee accomplishes its purpose by holding hearings, conducting workshops and roundtables to obtain input from relevant health and health care data stakeholders, conducting analyses and environmental scans, and issuing recommendations to the HHS Secretary, as well periodic reports to Congress. NCVHS accomplishes its work through its Subcommittees on Standards; Population Health; Privacy, Confidentiality and Security; the Review Committee; and the Executive Subcommittee. Subcommittee co-chairs organize public meetings and hearings to obtain industry and stakeholder input, analyze input, draft recommendations and submit findings, guidance, and specific recommendations for the full Committee to approve for submission to the HHS Secretary.

20b. How does the Committee balance its membership?

Committee membership is representative of a wide range of perspectives relevant to national health information policy. Members work in a broad range of fields: health policy,

health statistics, electronic data interchange (EDI) of health care information, electronic health records (EHRs), privacy, confidentiality, and security of electronic information, population-based public health, purchasing or financing health care services, health care delivery systems, integrated computerized health information systems, health services research, quality measurement, patient safety, consumer interests in health information, health data standards, epidemiology, and the provision of health services. Sixteen of the 18 members are appointed by the HHS Secretary to terms of 4 years each. Two additional members are selected by Congress.

20c. How frequent and relevant are the Committee Meetings?

The Committee convenes the full membership 3 times a year; Subcommittees and Workgroups meet 3-5 times per year. The Committee is “specifically directed by law,” and covers a broad range of issues that encompass national health information policy.

20d. Why can't the advice or information this committee provides be obtained elsewhere?

Expertise and advice from non-Federal professional disciplines is necessary to address the complex health information policy and statistical/methodological issues and concerns confronting the Department.

20e. Why is it necessary to close and/or partially closed committee meetings?

N/A

21. Remarks

Membership Note: Raj Chanderraj, MD resigned from the Committee on September 12, 2017, prior to the end of his official four-year term. Thus, he was not included in the FY 2018 report. Membership Note: Members Cornelius, Goss, and Stead all were reappointed in October 2016 as indicated in the database. If this is not reflected in the FY17 report, it is solely due to data entry error on our part. The entry for field "Agency Recommendation" is "Continue." The next field "Legislation to Terminate" should be "N/A." However, since that is not an option offered by the database, "None" is the entry we used. As noted, the primary charge to the Committee is to make recommendations to the HHS Secretary. Additionally, the Committee is to inform decision making about data policy by HHS, states, local governments and the private sector. In FY 2018, the Committee's letter to the Secretary on vital records and statistics systems highlighted the significance of these systems to inform government officials, especially in light of events such as the opioid crisis. The Committee noted that more Federal attention needs to be paid to this critical national infrastructure. Federal leadership is needed to work more closely with states, jurisdictions and Federal agencies to improve access to timely data as

well as to ensure sustainability of the individual systems that collect these data. As one step, CDC is now considering encouraging states to use the “model law” to increasing consistency across jurisdictions. The Committee, in collaboration with NIH/National Library of Medicine (NLM), conducted an Environmental Scan of Health Terminologies and Vocabularies. This report surfaced the need to increase the understanding that redundant health terminologies present a barrier to interoperability. NLM is using the Committee’s report to inform the process of aligning health vocabularies. The Committee’s letter to the Office of the National Coordinator, on the proposed U.S. Core Data for Interoperability (USCDI) expansion process and emerging data classes, suggested criteria for judging the readiness of a data class for adoption. The testing and evaluation processes in the revision were consistent with this input. The Committee convenes diverse public and private stakeholders for the purpose of gathering information to formulate recommendations to the Secretary. For example, this year the Committee convened a Chief Information and Innovation Officer (CIO) Forum to get feedback as part of its work to develop a Predictability Roadmap for standards related to HIPAA Administrative Simplification regulations. These participants, the people who must implement changes, agreed on the types of change needed to increase the benefit of adoption of standards and reductions in barriers to their implementation. Through this dialogue, these leaders in essence came to a shared understanding of the types of changes needed within the industry. A ripple effect of this work is that, through this understanding, leaders who met as a group with the Committee will bring new thinking within their organizations, which will increase implementation of data standards and ultimately, interoperability of data. The healthcare community, consisting of a wide range of stakeholders, also is influenced by NCVHS’s work. For example, US News & World Report’s Healthiest Community Survey, the Institute for Healthcare Improvement (IHI) 100 Million Healthier Lives, and the AETNA Community Challenge based their population health data work on the NCVHS Measurement Framework for Community Health and Well-being. The Committee’s observation that a global, integrated approach to comprehensive population health measurement was missing from the field, and its work to stimulate such an approach through development of a framework, is having a tangible impact nationally.

Designated Federal Officer

Rebecca Hines Health Scientist, OPBL, NCHS

Committee Members	Start	End	Occupation	Member Designation
Cohen, Bruce	09/13/2015	06/01/2019	Massachusetts Gaming Commission	Special Government Employee (SGE) Member
Cornelius, Llewellyn	10/16/2016	10/15/2020	Athens School of Social Work, Univ of GA	Special Government Employee (SGE) Member
Coussoule, Nicholas	09/13/2015	06/01/2019	BlueCross BlueShield of Tennessee	Special Government Employee (SGE) Member

Goss, Alexandra	10/16/2016	10/15/2020	Imprado/Dynavet Solutions	Special Government Employee (SGE) Member
Kloss, Linda	09/14/2015	06/01/2019	Kloss Strategic Advisors, Ltd	Special Government Employee (SGE) Member
Landen, Richard	09/10/2015	06/01/2019	Retired	Special Government Employee (SGE) Member
Love, Denise	12/15/2014	12/14/2018	Nat'l Assoc. of Health Data Organizations (NAHDO)	Special Government Employee (SGE) Member
Mays, Vickie	12/22/2014	12/21/2018	UCLA Dept of Psychology & Health Services	Special Government Employee (SGE) Member
Monson, Jacki	01/24/2017	01/23/2020	Sutter Health	Special Government Employee (SGE) Member
Phillips, Jr., Robert	09/14/2015	06/01/2019	American Board of Family Medicine	Special Government Employee (SGE) Member
Rippen, Helga	09/10/2015	01/02/2018	Alertgy	Special Government Employee (SGE) Member
Ross, David	12/15/2014	12/14/2018	Public Health Informatics Inst./ Task Force for Global Health	Special Government Employee (SGE) Member
Stead, William	10/16/2016	10/15/2020	Vanderbilt Univ Medical Ctr	Special Government Employee (SGE) Member
Strickland, Debra	01/20/2017	01/19/2020	Conduent	Special Government Employee (SGE) Member
Thorpe, Roland	02/08/2017	02/07/2020	Johns Hopkins Bloomberg School of Public Health	Special Government Employee (SGE) Member

Number of Committee Members Listed: 15

Narrative Description

The National Committee on Vital and Health Statistics (NCVHS) advises the Department of Health and Human Services (HHS) on health data, statistics, privacy, national health information policy, and the Department's strategy to best address these issues. A key aspect of this work involves advising the Secretary on HHS's implementation of provisions established in health care-related legislation. For the Health Insurance Portability and Accountability Act (HIPAA), the Committee specifically advises HHS regarding adoption of standards, identifiers, and code sets for administrative transactions; privacy and security; a periodic Report to Congress; and assists and advises HHS in the implementation of the Administrative Simplification provisions of HIPAA, informing decision-making on HHS data policy, states, local governments and the private sector. As stipulated in the Patient Protection and Affordable Care Act (ACA), the Committee provides advice and guidance regarding operating rules and is designated as the official Review Committee for health care transactions – consisting of standards and operating rules – and advises HHS on opportunities to improve standardization and uniformity in a number of areas. With passage of the 21st Century Cures Act, the Committee coordinates with ONC and the HITAC on national policy for electronic health records (EHRs) standards and administrative data standards; the Committee has worked with the previous Health IT Policy Committee on privacy and security of information entered and stored in EHRs. The Committee has advised the Secretary on standards for ePrescribing under the Medicare

Modernization Act (MMA).

What are the most significant program outcomes associated with this committee?

Checked if Applies

- Improvements to health or safety
- Trust in government
- Major policy changes
- Advance in scientific research
- Effective grant making
- Improved service delivery
- Increased customer satisfaction
- Implementation of laws or regulatory requirements
- Other

Outcome Comments

The Committee is charged with assisting and advising the HHS Secretary on health data, statistics, privacy, and national health information policy, and providing guidance to the Department to develop strategies to address these issues. Trust in government by facilitating communication with the public – this is accomplished through hearings to receive testimony from expert representatives, stakeholders, health care industry, and the public. NCVHS works closely with the healthcare industry as it formulates recommendations on implementation of HIPAA administrative simplification. NCVHS staff regularly update the website to make information clear and accessible to the public. NCVHS meetings, reports and recommendations are also widely and effectively distributed to interested audiences through electronic media such as GovDelivery to provide updates about Committee activity and meeting announcements. All of the Subcommittees recognize the importance of empowering consumers and patients to both manage their health information and work in partnership with their healthcare providers. Implementation of laws, initiatives or regulatory requirements— NCVHS is statutorily charged with responsibility for providing advice on implementing the Health Insurance Portability and Accountability Act administrative simplification provisions and ePrescribing provisions of the Medicare Prescription Drug, Improvement and Modernization Act. It also was named in the Patient Protection and Affordable Care Act (ACA) to provide input to the rulemaking process for additional standards and operating rules. Carrying out its congressionally-mandated roles related to HIPAA and ACA, NCVHS provides advice and guidance to the Department on an ongoing basis. NCVHS has been instrumental in providing input to the Department at both the proposed and final rule-making stages for every regulation associated with HIPAA, including standards for electronic transactions and code sets, privacy and security. NCVHS advises the Department on process and

substance in the development and implementation of health data standards. The Committee works with HHS and the health care industry to identify and evaluate existing industry standards for adoption, develop workable rules, and encourage the participation of all segments of the health industry with implementation of HIPAA standards. NCVHS has contributed to the development of a number of guidance and standards documents issued by the Department. As a result of passage of the 21st Century Cures Act, the Committee significantly increased coordination with ONC and the Health Information Technology Advisory Committee (HITAC) in 2018 on new data standards policies to ensure that any new policies issued by HHS take into account NCVHS recommendations.

What are the cost savings associated with this committee?

Checked if Applies

- None
- Unable to Determine
- Under \$100,000
- \$100,000 - \$500,000
- \$500,001 - \$1,000,000
- \$1,000,001 - \$5,000,000
- \$5,000,001 - \$10,000,000
- Over \$10,000,000
- Cost Savings Other

Cost Savings Comments

Not applicable

What is the approximate Number of recommendations produced by this committee for the life of the committee?

242

Number of Recommendations Comments

This fiscal year the Committee produced six reports and three letters of recommendation. The life time sets of recommendations from the Committee, including FY 2018 products, is $239 + 3 = 242$.

What is the approximate Percentage of these recommendations that have been or will be Fully implemented by the agency?

30%

% of Recommendations Fully Implemented Comments

Over its sixty-five year history and the restructuring of the organization to respond to HIPAA, NCVHS reports and recommendations have received serious attention and consideration from the Department.

What is the approximate Percentage of these recommendations that have been or will be Partially implemented by the agency?

60%

% of Recommendations Partially Implemented Comments

Three sets of findings and recommendations were submitted to the Secretary this fiscal year through letters submitted from October 2017–September 2018. The recommendations were informed by 6 reports issued by the Committee. The Committee continued to provide guidance regarding administrative simplification standards, operating rules, availability of vital statistics and population health data, and growing privacy, confidentiality and security health data issues. The Committee has been a steady influence in providing guidance and support for the administrative simplification process as reflected in the updates and briefings this fiscal year with letters and reports focused on improving the process for updates to administrative standards, operating rules, as well as interoperability. Because the Committee’s purview is broad – spanning the range of issues involved in national health information policy – it would not be feasible to fully implement all recommendations put forth. Many of the recommendations pertain to aspects of health information policy over a long period of time, i.e., decades. Implementation of these recommendations usually requires consensus and collective activity from multiple agencies and components of the Department. As stipulated in its Charter, the Committee regularly interfaces with stakeholders in the field and takes their input into account in development of reports and recommendations.

Does the agency provide the committee with feedback regarding actions taken to implement recommendations or advice offered?

Yes No Not Applicable

Agency Feedback Comments

The Department responds as appropriate to the Committee, most frequently with a letter that outlines plans to address the issues raised. In addition, the HHS Executive Staff Director and other HHS leadership regularly attend Committee meetings to provide updates for the Committee and to guide its focus. During these meetings, HHS leadership outline the Department’s strategic objectives and areas of special consideration in light of the Committee’s guidance and recommendations and inform the Committee’s next steps as appropriate. The Committee periodically presents recommendations at HHS Data

Council meetings.

What other actions has the agency taken as a result of the committee's advice or recommendation?

	Checked if Applies
Reorganized Priorities	<input type="checkbox"/>
Reallocated resources	<input checked="" type="checkbox"/>
Issued new regulation	<input checked="" type="checkbox"/>
Proposed legislation	<input type="checkbox"/>
Approved grants or other payments	<input type="checkbox"/>
Other	<input checked="" type="checkbox"/>

Action Comments

Clarified and amended guidances issued; some policies and programs revised as appropriate.

Is the Committee engaged in the review of applications for grants?

No

Grant Review Comments

Not applicable

How is access provided to the information for the Committee's documentation?

	Checked if Applies
Contact DFO	<input checked="" type="checkbox"/>
Online Agency Web Site	<input checked="" type="checkbox"/>
Online Committee Web Site	<input checked="" type="checkbox"/>
Online GSA FACA Web Site	<input checked="" type="checkbox"/>
Publications	<input checked="" type="checkbox"/>
Other	<input checked="" type="checkbox"/>

Access Comments

1) DFO is Rebecca Hines and HHS Executive Staff Director is Sharon Arnold. Contact information for both is readily available online. 2) The HHS and CDC websites provide information on Committee activities on an ongoing basis. 3) The NCVHS Homepage www.ncvhs.hhs.gov is regularly updated and maintained. Links to live internet broadcasts of meetings are easily accessible as well as archived meeting recordings. The site includes access to transcripts, minutes, agendas, reports, as well as background information, such as the Charter and Committee membership. NCVHS primarily uses

WebEx to broadcast meetings online and provides clear and immediate access to PowerPoint presentations, and letters being considered for action are posted in time for public review during deliberations. 4) See GSA FACA Website. 5) The public can subscribe to NCVHS electronic mail distribution to receive announcements about upcoming meetings and notification of new recommendations and reports posted to the NCVHS website. Committee members present at professional meetings and associations to engage with relevant stakeholders within the health care data standards and public health data industries. 6) NCVHS Letters and Recommendations, FY 2018: • September 14, 2018 – Report: Health Terminologies and Vocabularies Environmental Scan • September 14, 2018 – Report: Health Terminologies and Vocabularies Expert Roundtable Report • July 23, 2018 – Report: CIO Forum Summary Report • May 21, 2018 - Letter to the Secretary: US Vital Registration and Vital Statistics System Recommendations—Critical Challenges and Opportunities • May 21, 2018 – Summary Report: Next Generation Vital Statistics—A Hearing on Current Status, Issues, and Future Possibilities • May 17, 2018 - Letter to the Secretary: NCVHS Recommendations on National Council for Prescription Drugs Programs (NCPDP) Pharmacy Standards Updates • March 15, 2018 - Letter to ONC: Proposed U.S. Core Data for Interoperability (USCDI) expansion process and emerging data classes • January 10, 2018 – Report: Vital Records and Vital Statistics in the United States: Uses, Users, Systems, and Sources of Revenue • December 13, 2017 – Report: Health Information Privacy Beyond HIPAA: A 2018 Environmental Scan of Major Trends and Challenges