**NMI eSHARE**

**Questions and Answers**

**2/18/16**

**Q: To submit Arboviral disease case notifications, should jurisdictions use ArboNet as well as the HL7 Arboviral version 1.3 disease case notification message when it is complete?**

**A:** For now, jurisdictions should continue to send Arboviral disease case notifications to CDC through the mechanism they currently use:  XML upload or data entry to ArboNET or the Arboviral v1.2 HL7 disease case notification message currently in production.

Jurisdictions should NOT send Zika virus disease data through the National Electronic Telecommunications System for Surveillance (NETSS) file submission format.

Once Arboviral v1.3 is implemented, CDC will provide technical assistance to help jurisdictions using the v1.2 message to update to the v1.3 message and to help other jurisdictions implement the v1.3 message.  After jurisdictions are onboarded to Arboviral v1.3, they will stop sending human case notifications through the current routes.

**Q: What is the status of the HL7 STD Message Mapping Guide?**

**A:** The HL7 STD Message Mapping Guide is pilot test-ready, and the NMI technical assistance teamwill begin working with STD pilot jurisdictions soon. We expect to finalize the STD and Congenital Syphilis MMGs in late summer or early fall 2016.

**Q: Is it correct to include Zika data in the current Arboviral disease case notification message?**

**A:** Yes. Jurisdictions using the HL7 Arboviral v1.2 disease case notification message should send Zika notifications with the Nationally Notifiable Disease (NND) Event Code for variable INV169 (Notifiable Condition) = 11726 and ARB001 (Type of Virus) = 50471002 [SNOMED CT Code].

**Sample HL7 Segment:**

OBR|1|""|CAS10002000GA01^NBS^2.16.840.1.114222.4.5.1^ISO|PERSUBJ^Person Subject^2.16.840.1.114222.4.5.274|||20160105161538743|||||||||||||||20160105161657716|||F||||||**11726^Zika virus disease^2.16.840.1.114222.4.5.277**

OBX|12|CWE|ARB001^Arbovirus^2.16.840.1.114222.4.5.232 ||50471002^Zika virus (organism)^2.16.840.1.113883.6.96||||||F

**Q: Can all jurisdictions participate in NMI Technical Assistance?**

**A:** Yes, all jurisdictions will have the opportunity to participate. The requirement to implement HL7 case notification messages, starting with the priority guides, and the availability to request technical assistance are both in the Epidemiology and Laboratory Capacity for Infectious Diseases (ELC) Cooperative Agreement. Jurisdictions may choose to implement available HL7 case notification messages on their own as well. Either way, CDC will work with jurisdictions to monitor progress through the quarterly ELC Health Information Systems calls.

**Q: Is technical assistance system dependent?**

**A:** No. All jurisdictions can receive technical assistance for HL7 case notification message implementation. Jurisdictions using NBS will receive most of their technical assistance from the NBS team. Jurisdictions that do not use NBS will receive technical assistance from APHL.

**Q: Will there be a cost associated with technical assistance? Will funding be provided to help with this process?**

**A:** No, there is no cost to the jurisdictions for technical assistance. Funding provided in the Health Information Systems component of the ELC Cooperative Agreement is intended to help jurisdictions implement the messages. When technical assistance is requested, jurisdictions will be prioritized based on their readiness and ability to conduct HL7 case notification message implementation activities.

**Q: When will all jurisdictions be able to adopt the new MMGs?**

**A:** Once an MMG is finalized (Stage III), all jurisdictions will be invited to adopt the finalized MMG, go through onboarding, and send case notification messages to CDC through the MVPS. We expect that the first MMGs (which are Gen v2 and Hepatitis) will be finalized and available for use in spring this year and that TA and onboarding for these conditions will be opened for non-pilot jurisdictions in summer.