



Cooperative Agreement Corner



Our Cooperative Agreement with the National Association for Public Health Statistics and Information Systems (NAPHSIS) supports activities for jurisdictions. Upcoming opportunities are provided below.

VSCP Directors Webinar

The VSCP Project Directors Webinar occurs on the second Wednesday of each month at 2 p.m. Eastern. You can forward this invitation to others in your office who might be interested; however, you cannot forward your approved registration, as each attendee must register separately. The next VSCP Project Directors Webinar will be July 9, 2025, at 2 p.m. Eastern. You can [register on Zoom](#) to join the webinar.

How the CDC's Data Modernization Initiative and VRHS Accreditation align to strengthen Vital Records--Webinar

Join us on Tuesday August 5, 2025, at 2:00 p.m. Eastern for an engaging session exploring the powerful intersection between the CDC's Data Modernization Initiative (DMI) and the Vital Records/Health Statistics (VRHS) Accreditation Program. Learn how aligning with accreditation standards not only supports continuous quality improvement but also advances your jurisdiction's readiness for real-time, high-quality data delivery. This webinar will unpack the newly released DMI-VRHS Crosswalk, showing how your everyday operations are already contributing to national modernization goals — and how small steps can

lead to big improvements in data quality, interoperability, and public health impact. [Register on Zoom](#) to join this webinar.

Field Services Special Interest Group

What questions do you have regarding field services and data quality? Want to hear about best practices in training your providers? Do you need guidance on quality assurance programs? If so, the Field Services Interest Group monthly meetings can be a great resource. Hear from jurisdictions sharing their experiences and lessons learned in dealing with their internal and external partners on various field services, data quality improvement, and training topics. The Field Services Interest Group meets on the 4th Tuesday of every month at 3 p.m. Eastern. Email hq@naphsis.org to join the monthly call.

Systems Special Interest Group

Come ask your technical peers about how they grapple with adjusting their vital records systems to meet the needs of vital records, data partners, and interoperability with other systems. The Systems Special Interest Group meets on the last Thursday of every month at 3 p.m. Eastern. Email systems@naphsis.org to join the monthly call.

Statistics Special Interest Group

The Statistics Special Interest Group meets on the last Wednesday of every month at 2 p.m. Eastern. This is an opportunity to gather virtually each month to discuss topics of interest related to public health statistics. Please email us at hq@naphsis.org if you are interested in participating.

Birth Data Quality Special Interest Workgroup (BDQW)

The BDQW meets on the first Thursday of every other month at 2 p.m. Eastern. This workgroup discusses data quality topics related to natality. If you are interested in assessing and improving the quality of vital statistics birth and fetal death data, contact NAPHSIS at hq@naphsis.org.

2024 Data Year Close-Out

The following table includes the 2024 contract closeout and draft 2024 file release dates. Note that to include a jurisdiction's most current information in the file release, all corrections and final file deliverables are due no later than the target dates listed. The target dates are highlighted in red, as are the contract closeout dates and the dates for final updates. The dates for final updates are subject to change and may be earlier, depending on the quality of the national file.

2024 Death File

(States) Contract closeout for 2024 deaths	May 1, 2025
(States) Last date 2024 death file updates accepted	June 26, 2025
(DACEB) Pause medical processing for data quality review	July 24, 2025
(DACEB) Release final 2024 file to Hyattsville and resume medical processing	September 25, 2025

2024 Fetal Death File

(States) Contract closeout for 2024 fetal deaths	May 1, 2025
(States) Last date 2024 fetal death file updates accepted	July 24, 2025
(DACEB) Release final 2024 fetal death file to Hyattsville	August 21, 2025

Vital Statistics Modernization Community of Practice

The NVSS [Modernization Community of Practice \(NVSS CoP\)](#) is a shared space for learning and innovation. It provides a forum for jurisdictions and their partners to collaborate in the modernization space.



The NVSS Modernization CoP proudly hosted the 1st formal NCHS-organized testing event of 2025 on June 2nd-3rd. The focus was on advancing jurisdictional capabilities to exchange mortality & natality data using FHIR. We are excited to report

that 18 of 57 (32%) jurisdictions participated in the testing event, with twelve (12) jurisdictional Vital Records Offices and their respective technical partners as testers. These included Alabama, American Samoa, California, Louisiana, Mississippi, Missouri, New Hampshire, Pennsylvania, Utah, Virginia, Washington, and Wyoming.

Additionally, we had the valuable participation of seven (7) jurisdictions as observers, including Alaska, Georgia, Michigan, Minnesota, New York, and Oregon and Wisconsin. Their insights and feedback were instrumental in the success of the event.

Key takeaways from the testing event include:

- The jurisdictions came prepared.
- They were able to help one another more effectively.
- CTE, SAMS, and STEVE resources were readily available and on call during the testing event, which helped resolve connectivity issues swiftly.
- California successfully tested for the first time.
- New Hampshire and Wyoming successfully tested data exchange with natality.
- New Hampshire and Wyoming also tested Fetal Death data exchange, which was the first time fetal death has been tested using FHIR.
- No bugs requiring code fixes were identified, and there were no blocking issues with the libraries, canary, or the IGs that would prevent a VRO from completing the tests, indicating the maturity of the software libraries in supporting current workflows.

Jurisdictions should remember that pre-certification and certification are essential steps in the NVSS FHIR Certification Pathway. The primary aim of the pre-certification process is to ensure that a jurisdiction is fully prepared for certification. A well-executed pre-certification effort should facilitate a smooth final certification process.

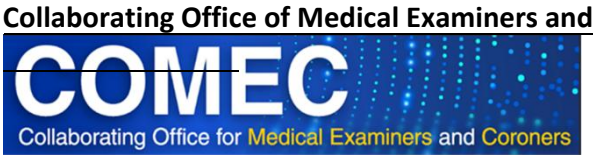
Jurisdictions are encouraged to sign up for FHIR validation by emailing the NVSS mailbox, contacting CTE

through the #deathonfhir stream on Zulip (chat.fhir.org), or selecting the self-service option available on GitHub. Please note that while FHIR validation is optional, it is highly recommended for successful pre-certification. The primary goal of FHIR validation is to assess the jurisdiction's ability to analyze the structure of FHIR messaging and generate FHIR records in accordance with the VRDR IG standard.

NVSS encourages jurisdictions to utilize our peer-to-peer connection to share announcements that may benefit the Community of Practice, such as job vacancies and upcoming conferences. Please feel free to send these announcements to the NVSS mailbox. Recordings of the main Community of Practice meetings and technical support meetings are available in the meeting proceedings section of the [NVSS Modernization Community of Practice SharePoint site](#). Users can access the certification and pre-certification documents through the 'quick links' option.

CTE encourages all jurisdictions to post any technical questions related to the Mortality or Natality workflow in the #DeathonFhir stream on [Zulip](#) chat. When you post an issue, please include as much relevant information as possible, including any attachments. For programmatic problems, such as needing assistance with your SAMs account, please email nvssmodernization@cdc.gov. Additionally, the minutes from the NVSS Modernization Community of Practice Weekly Office Hours meetings are posted weekly in the NVSS CoP Office Hours stream on Zulip.

We extend our special thanks to our technical partners MITRE, NAPHSIS, Ruvos, and CTE for their continued collaboration in our modernization efforts. Their invaluable contributions have been crucial to the success of our regular meetings and organized testing events.



[COMECEC](#) works to strengthen ties between medical examiners and coroners (MEC) and public health, as a

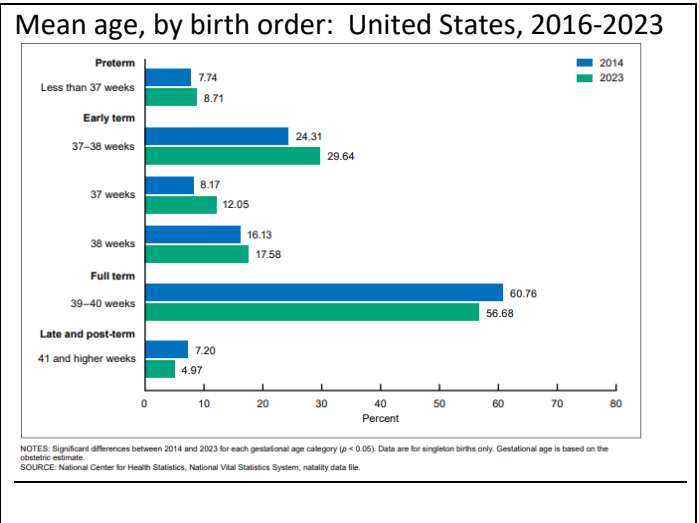
resource for MEC offices, and assist public health researchers and practitioners engaging with MECs. CDC established COMEC in 2022 in recognition of the important role of medicolegal death investigation (MDI) for public health. If you want to receive monthly announcements from COMEC, please email MDI@CDC.GOV.

Disaster-Related Investigation and Certification Training

CDC in partnership with a technical group of medical examiners, coroners and death investigators, developed a new online, self-paced training focused on supporting the identification, investigation and certification of disaster-related deaths titled [Improving Processes for Determining and Reporting Disaster-Related Deaths](#). Free CE/CME are available for this training. Stay tuned for additional disaster-related resources from CDC that will be shared here.

Notable Publications/Data Briefs

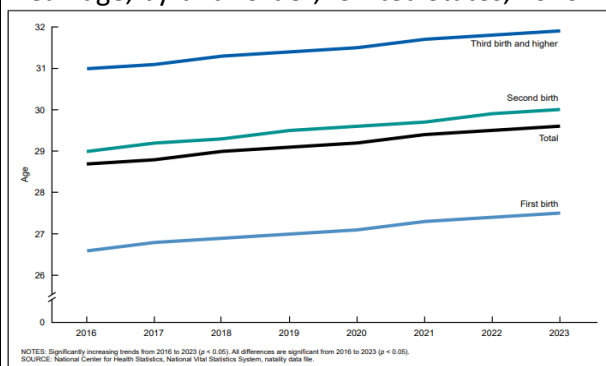
Trends in Early-term Singleton Births in the United States, 2014-2023



This report was published in June and can be found at <https://www.cdc.gov/nchs/data/hestat/hestat104.pdf>. It presents final birth data on trends in early-term (37 and 38 completed weeks of gestation) singleton births from 2014 to 2023. The percentage of early-term births rose 22%, from 24.31% to 29.64% with increases seen for all maternal age groups. The percentage of early-term births for which labor was induced rose 77% from 2014 to 2023.

Trends in Mean Age of Mothers: United States, 2016-2023.

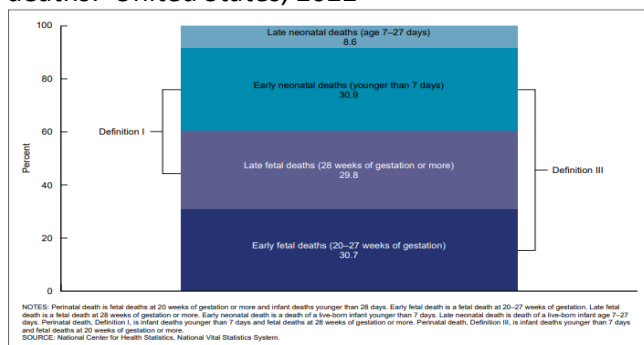
Mean age, by birth order; United States, 2016-2023



This report was published in June and can be found at <https://www.cdc.gov/nchs/data/nvsr/nvsr74/nvsr74-09.pdf>. It shows the mean age of mothers at first birth in the United States increases 0.9 years, from 26.6 to 27.5 from 2016 to 2023. The mean age increased for all racial and ethnic groups and all levels of urbanicity, from large metropolitan counties to rural counties.

Change in the Primary Measure of Perinatal Mortality for Vital Statistics

Percent distribution of components of perinatal deaths: United States, 2022



This report was released in June and can be found at <https://www.cdc.gov/nchs/data/nvsr/nvsr74/nvsr74-05.pdf>. Beginning with the 2023 data year, the National Center for Health Statistics (NCHS) will use a different, expanded measure of perinatal mortality for standard publications.

This measure, Definition III, includes fetal deaths at 20 weeks of gestation or more and infant deaths younger than 7 days. Definition III replaces Definition I (fetal deaths at 28 weeks of gestation or more and infant deaths younger than 7 days), which has been used in NCHS reports since the 1980s. This change is being made due to the implementation of national reporting of all fetal deaths at 20 weeks of gestation or more as of 2014, allowing for the use of Definition III, which more fully represents the perinatal events most likely to be affected by similar factors. This report describes the reason for this change and compares trends in perinatal mortality rates based on Definition I and Definition III from 2014 to 2022 and differences in the two measures by maternal race and Hispanic origin, age, and state of residence for 2022.

Vital Staff Spotlights

Jurisdictions may add as many names as they would like to our NCHS Newsletter mailing list! Just send a note to George Tolson at gct1@cdc.gov

Roseann Giorgianni departed her position as State Registrar and VSCP Project Director in Rhode Island.

Zuheil Figueroa was appointed Acting State Registrar and VSCP Project Director in Rhode Island.

Nadine Smith departed her position as State Registrar and VSCP Project Director in Louisiana.

Jemimah Mickel was appointed State Registrar and VSCP Project Director in Louisiana.

Dr. Margaret Warner, former Director of the Collaborating Office of Medical Examiners and Coroners at NCHS, has retired. Carri Cottengim will be serving as Acting Director until a permanent Director is named.

[Click here for previous newsletter issues](#)