## **Vital Records Modernization Project Update**

Pursuant to the 2004 Iowa Acts, Chapter 1175, the General Assembly required the Iowa Department of Public Health (IDPH) to submit a report no concerning the status of the vital records modernization project, the fees collected, and a target date for completion. For clarity, the Bureau of Vital Records was renamed the Bureau of Health Statistics following a department reorganization in the spring of 2004.

## Status of the Vital Records Modernization Project

Iowa Code Chapter 144 authorizes the IDPH to register, collect, preserve, amend, and certify vital statistics records, and perform related activities including data processing, analysis, and publication of statistical data derived from such records. Those vital statistic records collected by IDPH include births, deaths, fetal deaths, adoptions, marriages, dissolutions, annulments, and related data. The state has been actively collecting vital statistics records since July of 1880.

The vital records modernization project was enacted in 1993 Iowa Acts, chapter 55, section 1, and has been reauthorized in subsequent Iowa Acts. The modernization project is currently extended in statute through June 30, 2005. During the 1998 legislative session, the IDPH was given the option of forgoing future general fund appropriations to the Bureau of Health Statistics with the understanding that it would be allowed to retain fees deposited in the modernization fund for operation of the bureau. Since 1998, the Bureau of Health Statistics has used fees deposited in the modernization fund for operations and to support of the full automation of vital statistics records.

The following are major modernization activities conducted by the Bureau of Health Statistics since 1993.

*Historical Data Capture*: In 1996, the bureau embarked on the process of capturing data from historical records and bringing them into a common electronic database. To date the bureau has captured in electronic format information for marriage and death records back to 1954 and birth records to 1930. This database currently contains 5,345,882 records, however, there are 800,000 records remaining that still need to be resolved. Much data cleaning is required in order to convert the final 800,000 records; the bureau will most likely proceed with data cleaning and capturing the remaining records during state fiscal year 2005.

*Electronic Birth Certificate*: Work began on establishing an electronic birth certificate (EBC) in 1994. On January 1, 1995, 28 hospitals representing 80 percent of the state's births began filing birth certificates electronically. There are currently 96 hospitals filing electronic birth certificates representing 97 percent of the births. This client server system is still functioning in the hospitals. However, it is based on 1995 technology and is prone to operational problems. EBC will be an ongoing process of keeping an

electronic system operating that best serves the reporting facilities and birth parents. Additionally, the bureau is obligated to report data in a format prescribed by the National Center for Health Statistics, which requires frequent updates to the EBC.

The Bureau of Health Statistics is now working on a web-based EBC, which will replace the current client server application. Hospitals complain about struggling to find a computer old enough to run the software, and regular updates to their network applications have far outpaced the EBC system's capabilities. The bureau is undergoing the process of identification and evaluation of the business needs for the system, the existing technology, and the appropriate level of security. The Center for Congenital and Inherited Disorders and the IDPH's Newborn Hearing Screening Programs are included in the system redesign with the goal of integrating these three programs for the collection of data and for the convenience of the reporting facilities. The new system will include automated reporting of the birth registration fees, moving the process from the current paper based reporting to electronic generation. Our goal is to have a new EBC in place for the calendar year 2006, so IDPH can best serve our hospital customers and continue to meet our obligations to the National Center for Health Statistics.

*Electronic Death Certificate*: The web-based system created for the EBC will also support electronic filing of death certificates (EDC). Our tentative plan is to have EDC in place and operational by 2007. Once this occurs, funeral directors will be able to report deaths in a much more timely manner than the current paper system. This should also benefit our customers who need a death certificate for insurance purposes. Additionally, the State Medical Examiner's Office will have access to and cross-referencing capabilities with the EDC.

*Electronic Marriage Certificate*: Electronic marriage certificates (EMC) will also be supported by the web-based filing system. The Bureau of Health Statistics hopes to have the EMC in place and operational by 2008. Once operational, the EMC should benefit our customers (clergy and newlyweds) through ease in reporting and expedited distribution of marriage certificates.

*Request Tracking*: The bureau identified a need for an automated request tracking system, which would meet the accounting requirements of the state auditor's office. In 2000, an automated system was implemented that tracks all requests for services received via phone, in person, or in the mail and the corresponding fees collected for each service. The system allows the bureau to print a report at the end of each workday, which lists the requests for services and fees collected. Fees are then reconciled with each report.

Service	Fee	Retained	General Fund
Certified Copy	\$15	\$9	\$6
Commemorative B/M	\$35	0	\$35
Automatic Birth Certificate	\$15	\$9	\$6

## **Fees Collected**

Birth Registration	\$15	0	\$15
Adoption	\$15	\$9	\$6
Adoption Registry	\$25	\$25	0
Revelation of Co. Adoption/Divorce	\$15	\$9	\$6
Paternity Establishment	0	0	0
Paternity Registry	\$15	\$9	\$6
Rescission of Paternity	\$15	\$9	\$6
Legal Change of Name	\$15	\$9	\$6
Foreign Adoption	\$15	\$9	\$6
Establishing a Delayed Certificate	\$15	\$9	\$6
Current Correction (<1yr)	0	0	0
Certificate Amendment (>1YR.)	\$15	\$9	\$6
Disinterment Permit	0	0	0
Military Verification	0	0	0
Death Certificate for Veteran (1)	0	0	0
Court Determination of Paternity	0	0	0

\*\* In addition to the fees deposited in vital records modernization fund, over \$1 million were deposited in the state general fund through vital records activities.

## **Project Completion**

The vital records modernization project is an ongoing effort. It is difficult to estimate when the project will be complete because collection and maintenance of vital records is not a static process. The bureau follows people through birth, marriage, and death. Additionally, technology continues to advance, and with the advances comes increased customer expectations. As the state registrar, our customers expect convenient access to their individual records and to be able to report vital records data (hospitals, clergy, and funeral directors) with relative ease. To ensure Iowans are being served efficiently the state registrar must continue to evolve as much as resources will allow.

For example, the same technology the bureau employed for the EBC in 1995 is no longer a viable option for most hospitals. These types of situations in which our technologies become outdated will undoubtedly continue to occur on a regular basis. Furthermore, maintenance of electronic databases and reporting systems is essential to program efficiency and effectiveness.

As mentioned earlier in this report, the Bureau of Health Statistics does not receive an appropriation from the general fund for its vital records functions. Fees retained by the bureau fund daily operations, analysis of data, maintenance of existing databases and software, and the development of new databases and software. If the statutory authority to retain fees for the operation of our vital records system were to end, the program would once again revert to relying upon a general fund appropriation to serve the needs of Iowans.

For further questions please the Bureau of Health Statistics at (515) 281-6762.