**Frequently Asked Questions and Answers for the**

**Hepatitis Case Notification Message Mapping Guide version 1.0**

Updated: March 1, 2016

1. **Question: What is the Hepatitis Case Notification Message Mapping Guide (MMG) version 1?**

**Answer:** This Hepatitis MMG describes the content (e.g., data elements and valid values) and message mapping specifications used to communicate information in Hepatitis Health Level 7 (HL7) case notifications to CDC.

The Generic Individual Case Notification MMG version 2 needs to be used with the Hepatitis MMG (and any other disease-specific MMG), in order to construct a complete case notification message for nationally notifiable diseases and conditions.

The Hepatitis MMG includes a worksheet titled “Hepatitis Core” which specifies the common data elements for all Hepatitis case notifications. In addition, disease-specific data elements for acute Hepatitis A, B, C, chronic Hepatitis B and C, and perinatal Hepatitis B are specified on separate worksheets within the Hepatitis MMG.

**For example, in order to send a case notification of acute Hepatitis A, the data elements referenced in the following artifacts are needed:**

1) Generic Individual Case Notification Message Mapping Guide version 2, and
2) Within the Hepatitis MMG, the “Hepatitis Core” worksheet and the “Hepatitis A” worksheet.

**Hepatitis D Note**: Hepatitis D is now incorporated as a data element question within the Hepatitis B data elements, since Hepatitis D is found in conjunction with Hepatitis B.

**Hepatitis E Note**: In order to send a case notification for Hepatitis E, the data elements referenced in the following artifacts are needed:

1. Generic Individual Case Notification Message Mapping Guide v2
2. Within the Hepatitis MMG, only the “Hepatitis Core” worksheet in the Hepatitis Case Notification Message Mapping Guide v1
3. **Question: What is the PHIN Messaging Guide for Case Notification Reporting HL7 Version 2.5.1?**

**Answer:**  This document specifies the structure and methodology for the use of the Health Level 7 (HL7) Version 2.5.1 Unsolicited Result Message (ORU^R01) that supports the electronic interchange of any nationally notifiable condition message from public health entities to the CDC. The PHIN Messaging Guide must be used in combination with the MMGs to understand how to create and send HL7 case notifications.

1. **Question: Who is the intended audience for the Hepatitis MMG?**

**Answer:** The intended audiences for this document are the state and local reporting jurisdictions authorized to use the HL7 V2.5.1 case notification message specification for transmitting their data to CDC.

**4) Question: Which conditions should be reported to CDC using the Hepatitis MMG?**

**Answer:** As of February 2016, the following is the list of Hepatitis-specific event codes for *MMWR* year 2016 that may be used with the Hepatitis Case Notification version 1 MMG. Note that the information below was abstracted from the official source document for the 2016 event codes titled “2016 National Notifiable Diseases Surveillance System Event Code List which is on the NNDSS web site (see: <http://wwwn.cdc.gov/nndss/message-mapping-guides.html>). In the future, please refer to the official annual event code lists for the conditions and event codes which should be used for sending case notifications to CDC, including for hepatitis.

|  |  |
| --- | --- |
| **Event Code** | **Description** |
| 10110 | Hepatitis A, acute |
| 10100 | Hepatitis B, acute |
| 10101 | Hepatitis C, acute |
| 10104 | Hepatitis B, perinatal |
| 10105 | Hepatitis B, chronic |
| 10106 | Hepatitis C, chronic |
| 10103 | Hepatitis E, acute |

**5) Question: Which Generic version 2 MMG data elements should be reported to CDC using the Hepatitis MMG?**

**Answer:** All the Generic version 2 MMG data elements the reporting jurisdiction collects should be sent in the Hepatitis case notification v1 messages. These Generic version 2 data elements are needed for national surveillance across all the nationally notifiable diseases and conditions. The Hepatitis program is particularly interested in analyzing data for the following Generic data elements, if available.

|  |  |
| --- | --- |
| **PHIN Variable ID** | **Description** |
| INV165\* | MMWR Month |
| INV166\* | MMWR Year |
| INV169 | Condition Code |
| DEM115 | Birth Date |
| DEM126 | Country of Birth |
| DEM113 | Subject’s Sex |
| DEM152 | Race Category |
| DEM165 | Subject Address County |
| DEM162 | Subject Address State |
| DEM155 | Ethnic Group Code |
| INV128 | Hospitalized |
| INV136 | Diagnosis Date |
| INV137 | Date of Illness |
| INV145 | Subject Died Due to this Illness |
| INV146 | Deceased Date Due to this Illness |
| INV177 | Date First Reported to the Public Health Department |
| INV178 | Pregnancy Status |
| INV2001 | Age at Case Investigation |
| INV2002 | Age Units at Case Investigation |

\*Please note the very specific guidelines for creating MMWR Month and Year.

<http://wwwn.cdc.gov/nndss/document/MMWR_Week_overview.pdf>

**6) Question: When the Generic v2 MMG is revised, what impact will this have on Hepatitis case notification messages?**

**Answer:** The Hepatitis case notification version 1 MMG will continue to use Generic MMG version 2.0 until the Hepatitis MMG 1.0 is revised and the version number iterated. Therefore, a scenario will exist where the Generic MMG has iterated to version 2.1 or 3.0 and the Hepatitis MMG v1.0 implementation will require Generic MMG v2.0 elements to continue to be sent. When the Hepatitis MMG v1.0 is revised it will then adopt the most current iteration of the Generic MMG.

**Data Element Specific Frequently Asked Questions**

**7) Question: Can the data element INV637 (“Prior to the onset of symptoms, was the patient incarcerated for longer than 24 hours) in the MMG be mapped to a data element in the reporting jurisdiction’s surveillance information that does not specify a duration of more than 24 hours?**

**Answer:** No. We are asking for specific exposures that would not be present in a quick trip in and out of the facility. The definition of incarceration does not in itself provide a length of time or setting that would allow us to be sure they had adequate exposure to the rest of the incarcerated population to consider it a risk.

8) **Question:** **Which date should we use for data element INV843 (If patient had a negative hepatitis-related test in the previous 6 months, please enter the test date)—the specimen collection date or the date of the negative HBsAg result which was 6 months prior to the HBV diagnosis?**

**Answer:** Normally these dates only differ from each other by a day or so. Given the period of interest is 6 months, it is okay to use either the specimen collection date or the date of the negative HBsAg result. Document this assumption in the implementation notes within your own database installations.

**Case Definition Frequently Asked Questions**

9) **Question:** **Where do** **anti-HCV positive/HCV RNA negative** **individuals fit into the 2016 hepatitis C case definition?**

**Answer**: The anti-HCV positive result indicates exposure to HCV sometime in the past. The HCV RNA negative results indicates no active infection. Therefore, these tests indicate resolved HCV. A case with these test results do not indicate a current case of acute or chronic HCV so it is not notifiable to CDC’s National Notifiable Diseases Surveillance System.

**References**

2016 National Notifiable Diseases Surveillance System Event Code List; Centers for Disease Control and Prevention; Office of Public Health Scientific Services; Center for Surveillance, Epidemiology and Laboratory Services; Division of Health Informatics and Surveillance.

PHIN Messaging Guide for Case Notification Reporting HL7 Version 2.5.1, Release 3.0.

PHIN Vocabulary Access and Distribution System (PHIN VADS): https://phinvads.cdc.gov