

Application to Transmit Death Data via the PA EDRS Bridge

This form is to be used by applicants responsible for reporting deaths in Pennsylvania who are interested in integrating a case management product with Pennsylvania's Electronic Death Registration System (EDRS). To be considered for integration through the PA EDRS Bridge, the applicant must be using a software product that has received approval from the Bureau of Health Statistics and Registries (BHSR) for integration. The applicant must also adhere to the onboarding and reporting requirements listed below.

APPLICANT INFORMATION

| | |
|-----------------------------|--|
| FACILITY NAME: | |
| FACILITY ADDRESS: | |
| CONTACT INFORMATION: | |
| NAME: | |
| TITLE: | |
| EMAIL ADDRESS: | |
| PHONE NUMBER: | |

SOFTWARE INFORMATION

| | |
|-----------------------------------|--|
| COMPANY NAME: | |
| SOFTWARE NAME AND VERSION: | |
| CONTACT INFORMATION: | |
| NAME: | |
| TITLE: | |
| EMAIL ADDRESS: | |
| PHONE NUMBER: | |

ONBOARDING AND REPORTING REQUIREMENTS

- The applicant shall participate in a virtual kickoff meeting with BHSR and the software company to onboard the facility for EDRS Bridge Integration
- The applicant shall participate in an approximate 30 to 40-day monitoring period once connectivity through the PA EDRS Bridge has been established for the facility.
- The applicant shall provide BHSR with images of the "Certificate of Death" reporting forms (H105.143 Rev. 11/17) generated directly from the software for cases transmitted through the PA EDRS Bridge. These images will be used for data auditing purposes as outlines below:
 - The applicant will self-audit the first 10 cases transmitted. If any issues are identified during the self-audit, the applicant will immediately halt transmitting any further cases through the PA EDRS Bridge until the issue is identified and resolved. In addition, the applicant will notify BHSR of its findings. If no issues are identified, the applicant will transmit these images to BHSR for auditing purposes. Each case must be audited within on day of transmittal.
 - Once the first 10 cases are audited successfully, the applicant will proceed to week 1 of standard auditing. During week 1, the applicant will audit a minimum of five cases* or 10 percent of all cases transmitted (whichever is higher). These cases will be selected by the applicant who will conduct a self-audit on the cases before transmitting the images to BHSR.
 - During weeks 2 to 4 of standard auditing, the applicant will provide BHSR with the total number of cases transmitted for the previous week. BHSR will conduct a random sampling of cases for auditing purposes. This random sampling will consist of a minimum of five cases** or 10 percent of all cases transmitted (whichever is higher). BHSR will provide a list of cases to the applicant who must provide the images within two business days to BHSR for auditing purposes.
- The applicant shall halt any transmittal of files through the PA EDRS Bridge as soon as any data quality issue associated with transmittal of the file through the PA EDRS Bridge has been identified. The applicant shall immediately revert to direct entry of data into EDRS until the issue with transmitting the cases has been resolved
- The applicant shall report all deaths in accordance with the PA Vital Statistics Law.

* If an applicant transmits less than five cases during week 1, the auditing period will be extended until the applicant has transmitted 5 cases.

** If an applicant transmits less than five cases a week during weeks 2 to 4, the difference will be audited in the following week(s) until the applicant has transmitted 15 cases.

AUTHORIZED REPRESENTATIVE OF THE APPLICANT

An authorized representative of the applicant must sign the assurance statement listed below stating that the applicant agrees to the onboarding and reporting requirements listed above.

I have thoroughly reviewed the onboarding and reporting requirements which are incorporated herein and I shall adhere to the requirements set forth therein.

NAME:

TITLE:

SIGNATURE:

DATE:

Submit this completed form to the following:

Pa. Department of Health
Bureau of Health Statistics and Registries
Business Workflow Unit

Fax: 717-772-3258

Email: RA-DHVRBUSWORKFLOW@pa.gov