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VA Information Resource Center

Data Issues Brief

May, 2001

1. VHA Websites Must Comply With Americans with Disabilities Act (ADA)

Section 508 of the Americans with Disabilities Rehabilitation Act Amendments requires that Federal departments and agencies ensure that electronic and information technology is accessible to people with disabilities-- unless an undue burden would be imposed on the department or agency. This Section focuses primarily on Federal pages on the Internet and the Intranet, but also includes guidance for disseminating information, using computer hardware and software. VA must be in compliance by June 2001.

VHA Web pages must comply with VA Directive and Handbook 6102, Internet/Intranet Services (go to Web site: [REDACTED], then scroll down to Directive 6102). The directive requires VA to maintain a central database that identifies all Web sites and the person/s responsible for the content and technical aspects. This information can be submitted electronically to: [REDACTED]

The General Accounting Office (GAO), as part of their review of security and privacy concerns relating to VA's Web activities, has cautioned VA to ensure that Internet Web pages do not contain persistent cookies and that the Privacy Act Statement is posted on every page. VHA's Office of Information (OI) is developing guidance, additional information and directions for reporting compliance. If you need further information, please contact Diane Huber, Computer Specialist, OI, Enterprise Strategy at e-mail: diane.huber@med.va.gov.

2. Comparability Between ICD-9 and ICD-10

The Centers for Disease Control and Prevention (CDC) recently issued a *National Vital Statistics Report* (NVSS) entitled, "Comparability of Cause of Death Between ICD-9 and ICD-10: Preliminary Causes." The report, which can be found at: <http://www.cdc.gov/nchs>, describes "the effects of implementing the Tenth Revision of the *International Classification of Diseases* (ICD-10) on mortality statistics for selected causes of death effective with deaths occurring in the United States in 1999. The report also describes major features of the ICD-10, including changes from the ICD-9 in classification and rules for underlying causes of death. Results of this study, although preliminary, are

essential to analyzing trends in mortality between ICD-9 and ICD-10.” Additional information regarding the ICD-10 can be found at: <http://www.cdc.gov/nchs/icd9.htm>. Subscriptions to the NVSS can be obtained by contacting the National Center for Health Statistics at (301) 458-4636.

3. Opportunities for Projects Using Secondary Data Available at NIAAA

The National Institute on Alcohol Abuse and Alcoholism (NIAAA) invites applications to support the secondary analysis of existing data sets relevant to developing a knowledge base to improve the delivery of services for alcohol-related problems, including both treatment and preventive interventions. Research objectives of this program announcement include these areas: (1) determining the effects of various financing and reimbursement mechanisms on alcohol-related health care program availability, accessibility, delivery, organization, content, quality, and outcomes; (2) assessing sources of variation in access to, and utilization of, treatment and prevention interventions for alcohol-related problems; (3) examining the possible impact of managed care on alcohol treatment and prevention services; and (4) evaluating the cost, cost-effectiveness, cost-benefit, and cost-utility of alcohol-related treatment and prevention services. More information can be found at <http://grants.nih.gov/grants/guide/pa-files/PA-00-100.html>. Deadlines for application submission are: June 1, 2001; October 1, 2001; and February 1, 2002.

4. VHA Meta Data Registry (MDR) Team Convened

The VHA Meta Data Registry (MDR) User Group held its first meeting via conference call on May 4, 2001. By way of background, the MDR is being developed to provide a national repository of information about VHA databases. This information about national data, referred to as “meta data,” will help improve data quality by providing insight into data redundancies, data usage, and dependencies as well as direction for future database development. The MDR effort is led by the VHA Office of Information.

The VHA Meta Data Registry is a Web-based, centralized repository. It stores and maintains industry-wide or organizationally adopted data standards, as well as information about the data elements in VHA databases that have been imported and optionally mapped and matched to those data standards. The Registry provides for the monitoring of the population and standardization process and has functionality that facilitates the collection of the metadata from business process owners, database designers, and user requirements groups. Researchers are invited to visit the Web site: [REDACTED] to see Version 1.0. Diane Cowper from VIREC is a member of the MDR User Group representing Research Service. If you have any comments or suggestions about the MDR tool, please e-mail her at: cowper@research.hines.med.va.gov.

Data Issues Briefs are developed by the staff of the VA Information Resource Center (VIREC) for the purpose of informing and updating VA researchers on current and pending happenings and changes regarding health data, databases, and medical informatics. *Data Issues Briefs* are produced on a monthly basis and are distributed through e-mail subscriptions. Previous releases are posted and available on the VIREC Web site at <http://www.virec.research.va.gov>. If you wish to receive future issues direct, please send an e-mail message to the VIREC at virec@research.hines.va.gov or call 708-202-2413. If you have any suggestions or comments about the *Data Issues Briefs*, please e-mail Diane C. Cowper, Editor, at cowper@research.hines.med.va.gov.