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Patrick McConnon, M.P.H.
Executive Director
Council of State and Territorial Epidemiologists
2872 Woodcock Boulevard, Suite 303
Atlanta, Georgia 30341-4015

Dear Mr. McConnon:

Thank you for your letter regarding the Council of State and Territorial Epidemiologists (CSTE) position statement entitled "Improving External Cause Coding in Hospital Discharge Data." The Centers for Disease Control and Prevention's (CDC) National Center for Health Statistics (NCHS) and the National Center for Injury Prevention and Control (NCIPC) are very pleased to assume a leadership role in promoting the improvement of external cause coding in hospital discharge and emergency room data. As you know, inadequate external cause coding of hospital discharge data has been a long-standing problem that is seriously limiting injury surveillance efforts. In addition to lack of coding of injury records, as documented in the position statement, the high frequency of unspecified codes is a serious problem.

The Workgroup for External Cause Coding Improvement (WECCI) includes injury data experts from CDC's NCIPC and NCHS. In addition to discussing the CSTE statement, these Centers, along with WECCI and other external injury experts, are working together to prepare a report that provides recommendations for practical strategies for improving E-coding.

The *Morbidity and Mortality Weekly Report (MMWR)* office has approved the preparation of a Reports and Recommendations (*R&R*) article. The *MMWR R&R* is an appropriate publication because it will reach the intended audience of national and state public health professionals, policymakers, professional organizations, insurance industry, and nonprofit organizations who focus on injury and violence prevention. The *R&R* will address the current status of external cause coding in the states; challenges to improving external cause of injury coding; benefits of external-cause-coded data; and recommended strategies for improving coding.

In addition, we plan to work with other federal agencies affected by this issue such as the Agency for Healthcare Research and Quality, the Centers for Medicare and Medicaid Services, the National Highway Traffic Safety Administration, the Public Health Data Standards Consortium, and the National Uniform Billing Committee (of which NCHS is a member) to explore means of improving external cause coding in administrative datasets. Activities could include convening a federal agency summit, creating a federal agency taskforce, facilitating a federal agency workgroup, or contacting appropriate federal agency leadership.

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We appreciate your interest and hope this information will be helpful to you.

Sincerely,


Julie Louise Gerberding, M.D., M.P.H.
Director