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I. Comprehensive Sets of Options:

Comprehensive Set A:

1. **easy, equitable access for the public that is straightforward and uncomplicated.**

See option for need #4 related to equitable access.

NOTE: These options don't need legislation to be implemented.

Option for straightforward and uncomplicated.

- 1.A Prepare and disseminate communication on how to order vital records that is customer focused. The primary means of communication with customers is via the web. The web site needs to be clear and designed with the customer or public perspective. Gather input from customers and the public on the website, if possible. Information needs to be available in different languages and following ADA standards. Determine if having a Facebook page, Instagram or X account is a good option for providing information on how to order vital records.
- 1.B Review VitalChek ordering web pages on a regular basis to make sure the information for ordering Oregon vital records is updated. Ensure the contract with VitalChek has clear language on how orders that can't be processed quickly are addressed. The process needs to minimize the amount of time problems orders stay with VitalChek. These orders need to be forwarded to Oregon Vital Records timely. This will allow faster resolution and minimize the orders getting lost in the VitalChek queues.

- 1.C Request that all county vital records websites have specific information and consistent information on how to order vital records per policy and law. Provide standard language for web sites that is customer/public focused.
- 1.D Provide links on state website to county vital records web sites.

2. consistent and clear standards, policies, and laws (connects to easy public access)

NOTE: These options don't need legislation to be implemented.

- 2.A This need is related to the development of the standards, policies, and laws. These are developed at the state level under ORS 432 and OAR 333-011 with input from partners and the community. Standards and policies should reflect the law. All the standards, policies and laws should be gathered and reviewed for consistency. Standards and policies should be updated as needed. A Vital Records policies and law reference area on the web and intranet should be developed so that there is one reference place for these. The policies should be reviewed annually and updated when new laws are implemented.
- 2.B The Vital Statistics administrative rules (OAR 333-011) should be revised to be written in "plain English" and to streamline many of the areas that have been troublesome. This is a time-consuming project. It was initiated in 2019, and significant progress was made by the State Vital Records office. The work that was done in 2019 can be used. However, there will need to be some significant shifting of priority projects **or** additional staffing resources at the state to oversee this project. Additional staffing resources are estimated for an Administrative Specialist 2 rule coordinator is \$172,000 for a biennium.

3. timely registration of birth and death records.

The options differ for births and deaths.

Births: Under current law all births that occur in a facility must be file electronically. In June 2024, 99.6% births were electronic. Currently the median number of days for registering births is 4.0. The law is 5 days. However the primary challenge is related to births not getting registered timely because Voluntary Acknowledgment of Paternities (AOPS) are not being processed timely or not being sent to the state timely. Births that have pending AOPS are not registered until the AOP is processed.

NOTE: These options don't need legislation to be implemented.

Options:

- 3.A Examine workflow process at the state and have births automatically register even those with pending AOP. Certificates can then be issued and SSN etc. received. A new certificate can be exchanged when the second parent is added after the AOP is processed.
- 3.B In cases where the hospitals don't get birth records started in OVERS, require hospitals to have separate reporting of births that is shared with the state weekly or as requested that is then compared with OVERS to make sure the births are started. This is already in law.

- 3.C** Communicate directly with Hospital administration when facilities don't have timely registration of births. This is being done now.

Deaths: In June 2024, 88% death records were fully electronic.

NOTE: The first 3 options do not need legislation to be implemented. The 4th does need legislation to be implemented.

Options:

- 3.E** Communicate on an annually basis with hospital administrators that all deaths that occur in a hospital must be entered in OVERS as stated in law.
- 3.F** Determine which medical certifiers are continuing to complete paper records and partner with local funeral home to encourage medical certifiers to get on OVERS. Have the CHS Partner Services team offer to provide in person or virtual training on how to use OVERS. Also provide information on training provided by CDC on how to complete the cause of death portion of a death record. This is currently being done.
- 3.G** Develop trainings for funeral homes and set up a Funeral home workgroup. CHS plans to do this in 2025.
- 3.H** Establish law requiring all death records for deaths that occur in Oregon be completed in OVERS. There should be some option to allow the State Registrar to determine exceptions – for example home burial.

4. for counties to be able to issue certificates regardless of place or date of event.

Providing counties the ability to issue certificates regardless of the place or time of the event would require a change in law and regulation, OVERS system modifications, changes in all workflow processes at the state and county, changes in procedures, and changes in funding at the state and county.

Implementation of such a significant change would not be feasible until 2027 or 2028 depending on how the implementation is funded.

Regardless of what option is chosen, the following would need to be done:

- A project would need to be initiated. A project of this size would take two to three years to implement and would require a Project manager and staffing resources dedicated at the state and counties. Estimated cost for the state for a Project Manager is \$239,000 and a Program Analyst is \$198,000 a biennium. County staff would need to be dedicate to the project as well and would depend on the level of staff assigned to the project and how much time. It is likely each county office would need to dedicate .25 or .5 FTE to work on this project and if the salary is equivalent to similar position at the state the county cost could be \$43,000 to \$86,000 a biennium.

- ORS 432 and OAR 333-011 would need be amended to allow county vital records offices to issue birth and death certificates for events that occurred outside of their county for any date of event. This would require legislation.
- An analysis of what OVERS system functions would need to change would need to be completed and the costs to make those system changes would need to be determined. Based on current knowledge of OVERS, it is likely the 6-month issuance date and the county event requirements are coded into the system. Changing the code can only occur twice a year, requires a contract amendment and full regression testing of the system. A rough estimate to make the coding change in OVERS is \$200,000 and the estimated staffing cost completing the requirements, specifications and overseeing testing is \$100,000. Testing would need to occur in each county to ensure correct implementation. This is likely a one-time cost. The estimated cost to the county would be covered in the FTE cost noted for the overall project.
- Review and analysis of all policies, procedures, workflow, forms, communication, web site would need to be done to determine what would need to be updated to reflect the new law. After identifying what needed to be updated, those changes would need to be made. The analysis and changes would need to be made by state staff and by staff in each county. Additional staffing would need to be dedicated to accomplishing this at a Program Analyst level at \$198,000 full time a biennium for the state and a similar cost for each county since each county would need to dedicate staff to complete this. This is likely one-time cost. The estimated cost to the county would be covered in the FTE cost noted for the overall project.
- A detailed analysis of work process changes and cost of those changes needs to be completed to ensure counties understand what is expected to meet this need successfully. Currently all births the counties issue are issued from OVERS and 88% of the deaths are now available to issue from OVERS. If issuance of births and deaths regardless of date of event is implemented at the county level, counties will need to ensure that all laws, rules and procedures are following for eligibility and identification. Currently 90%-100% of the birth records issued at the county are issued to parents since the child is under 6 months old. If counties can issue birth records for events that occurred from 1903 to present, the orders will be from anyone eligible to order the record under ORS 432.380. Eligibility and identity of the person ordering the records must be verified to ensure that the person getting the birth record is allowed to get it under law and they are who they say they are. In addition, the customer often needs to be contacted to provide additional documentation or information. This additional screening and follow up takes time.

This is also the case for death certificates. Most death records issued by the county are to funeral homes and likely to funeral directors that are regular customers; so establishing eligibility and identification is relatively easy. If death records are issued by the county for any date of event (1903-present), orders will be received by anyone eligibility under ORS 432.380. Establishing eligibility often requires additional documentation that must be reviewed. This additional screening and follow up takes times.

The increase in time it takes to do this additional screening and follow up is estimated to be 15 minutes per order when eligibility and identity can be easier determined with the documents provided. For orders where there must be review of complex documents, referencing guidelines, and communicating with the customer via mail or email the order may take up to 60 minutes per order. This additional time needs to be considered by each county along with the extra staffing costs to do the work.

- Staffing needs and workflow processes improvements at the state to be able to support successful implementation of this need must be examined. Since counties will not have electronic access to all vital records until all records are in the system, they will need to contact the state to provide records that are on paper or on microfilm. This will require changes in work process and likely require additional staffing. The state may also need to dedicate staff to provide “help desk” support solely for the counties to provide assistance on eligibility and screening. It is likely one FTE at the state would be needed to provide support to the counties at an estimated cost of \$137,000 a biennium.
- A thorough analysis of the funding implications of providing access to all births and deaths for issuance regardless of location or time of event must be done. Currently counties are limited to only issuing birth and death records for events in their county and within six months of the event. This has been in law since 1997. Currently, the county and the state get the entire fee for any birth or death certificates that they issue.

This fee distribution made sense when county vital records offices were doing many of the tasks that are now being done automatically or by the state. County Vital Records offices no longer register paper birth records, complete amendments to birth records, or notarize AOPS. All birth records issued at the county are issued electronically. Registration of hybrid death records now only accounts for 10% of death records, though it does vary geographically. Amendments done on death records at the county level can only be done on the paper/hybrid records registered by the county. Many counties opt not to do these amendments and will rely on the state to complete them. Therefore, the different vital records tasks that must be done at the county level has declined dramatically in the past 18 years. The tasks done in the past at the county are now completed electronically in OVERS or are done at the state. All training and technical support is provided by the state.

The cost to maintain the vital records system used by the counties is covered entirely by the state. Currently, counties provide no support for the vital records and statistics system that they need to issue certificates and generate revenue from the sale of those certificates. If counties can issue birth and death certificates regardless of location and date of event and they get the full fees, there will be a significant loss of funds at the state. The exact loss would need to be determined with a detailed analysis. If 30% to 40% of the records currently issued at the state is shifted to the counties the loss in revenue at the state is estimated to range from \$1.7 million to \$2.3 million in one biennium. This is equivalent to 11% to 15% loss in revenue. An amount of loss in revenue would require significant cutbacks in expenditures often requiring cuts in staff. Staff cuts would range from 11 to 15 FTE. Such a significant cut would prevent the state from being able to maintain the basic system as required by law and needed by the counties.

There needs to be some sharing of fees between the county and the state or direct support from the counties if this need is going to be met. The amount that the counties would need to cover would depend on which option is chosen to meet this need. See #8 for more analysis. It should be noted that the counties will need to support the system even if no changes are made.

Options

NOTE these options would require legislation.

- 4.A Counties issue birth and death certificates for 1 year instead of 6 months regardless of where the event occurs. This option would reduce the loss of revenue at the state. Assuming 30% to 40% of the records issued at the state within 1 year of the event is shifted to the counties. The estimated loss at the state would be \$384,000 to \$512,000 in one biennium. This option would still set up competition among counties. It also does not meet the spirit of equitable access to all vital records throughout the state. Customers would still need to go to the state to get death and birth records if the date of the event was over one year.
- 4.B The workgroup has identified that current methods for ordering certificates varies among the counties, is duplicative, confusing to the public and is not equitable. Rather than focusing on the type of event (birth or death), the place of the event and location of the event, it may be best to examine the method of ordering when trying to meet this need and many of the other needs proposed by the workgroup.

This option proposes the following:

- 4.C Counties only provide in-person ordering for births and death regardless of date or location of event. The state vital records office closes in-person issuance. This means that anyone can go in person to any county to get their vital record. This option still sets competition among the counties. The counties would get the fees for the records or a portion (see need #8). The state would not offer in-person orders.
- 4.D Mail in orders, internet, and phone orders are only offered and completed at the state. Counties do not take mail, internet or phone orders for vital records. This removes duplicative ordering methods throughout the state and provides one stop shop for mail, internet and phone orders.

This option would still require additional resources at the state to provide paper or microfilm records and provide real time assistance on eligibility documentation and identification. In-person counter staff at the state could be shifted to provide this support.

Having the state take over all mail, phone and internet orders would eliminate the different ordering options at the counties which are inconsistent across counties and tend to be confusing for customers. Counties that have established contracts with internet vendors would have to end their contracts but would no longer have the costs to maintain that contract. Workflow processes at the county would need to be examined to see what changes would need to be made with customers, especially funeral homes who order via mail or fax.

There would still be a loss of revenue at the state since in-person customers could get birth or death records for any date of the event. However, if fee sharing or direct payment was established with the county, the loss may not be as great.

The estimated loss in revenue at the state is \$1.1 million. Staff who currently work the counters would shift to providing county support described above and to support county issuance of records not in OVERS. However, this loss is still significant impacting basic operations of the vital records system needed by the state and counties to do their work.

6. **for all death certificates to be fully electronic.**

See Need #3

7. for all records to be fully electronic, with access to all old and new records, in an effective, functional and modernized system. (a) This electronic system needs to be interoperable, meaning accessible in all interconnected systems.

This need has multiple options.

See need #4 for access to all old and new records.

See need #3 for all new records to be fully electronic.

NOTE: These options don't require legislation.

Old records fully electronic: The goal is to have all 6.5 million vital records available to be issued from OVERS. The following records currently are **not** in OVERS to be issued.

Long form births 1903-2008
Death 1903-2006
Marriage 1925-2016
Divorces 1926-2016
Fetal deaths 1919-2008

- 7.A** These records are on paper or microfilm. There are also amended records that have been relocated that are currently not in OVERS. Converting all these records to electronic form and adding them to OVERS is a large project and is considered an IT project which requires special oversight and governance. This project could take 1 to 2 years to complete. Currently Oregon has an enterprise contract with a records management company that does this work. Therefore, an RFP would not be needed. The cost is unknown. However, an estimate of \$200,000 per biennium has been budgeted by the State for this project. The project has not been started due to staffing capacity and other priorities. The State would need additional staffing to manage and staff the project. Cost estimates for a Project Manager at \$239,000 and Office Specialist at \$138,000 a biennium. These would be one-time costs.

this electronic system needs to be interoperable, meaning accessible in all interconnected systems.

- 7.B** The goal of the Center for Health Statistics is to implement data interoperability with different systems to collect birth and death data using HL7 FHIR standards by July 1, 2029. This is an ambitious goal and can only be achieved with extra funding to modernize OVERS and support the project needed to work with different external partners to establish interoperability.

In 2021, CHS received ELC Cares Act Data modernization (DM1) funding in the amount of \$1.35 million to implement interoperability standards for death data. Another grant of \$1.38 million was awarded in August 2023 to implement interoperability for birth data. These funds end in July 2027. No additional federal money is expected. This funding only covers establishing interoperability between the state vital records system and the National Center for Health Statistics. Interoperability using HL7 FHIR standards still needs to be developed between data sources and the state vital records system. Other data sources include EHRs for birth and death, the State Medical Examiners system for death, and the Funeral home systems for death. Establishing interoperability for each system is considered a separate IT project requiring project management and staffing in addition to

new functionality for OVERS. Cost estimates for each project range from \$500,000 to \$1 million a biennium. See need #8 for more details on funding options.

8. sustainable and equitable funding to support the system.

The Center for Health Statistics receives revenue from three primary ongoing sources – Vital Records fees, Government Agencies and Federal contracts. The actual revenue from these primary sources was \$14.80 million during in the 21-23 biennium. Vital records fees provided 60% and Federal funds 10%. The remaining 30% came from Oregon Government Agencies, such as the Division of Child Support and Oregon Department of Human Services (ODHS), that use vital records to conduct their business. In 2021, CHS received ELC Cares Act Data modernization (DM1) funding in the amount of \$1.35 million to implement interoperability standards for death data. Another grant of \$1.38 million was awarded in August 2023 to implement interoperability for birth data, known as DM2. These funds end in July 2027. No additional federal funding for expanding interoperability is expected. Inclusion of the DM1 grant funds in the 21-23 biennium increases the total revenue for CHS to \$16.15 million. A savings of \$3.81 million from the 19-21 biennium increased the revenue in 21-23 to \$19.96 million.

The estimated cost to operate and maintain the vital records and system and complete federal grant and contract requirements for the state in 23-25 is \$20.70 million. The increase accounts for staffing COLAs but all other expenses remain constant. Revenue estimates are anticipated to be the same since they have been relatively consistent over the past couple of years. Revenue is estimated to be \$24.28 million in the 23-25 biennium, which provides a \$3.58 million surplus at the end of the biennium. As good stewards of state resources, we are expected to have at least equivalent of 3 months of expenditures in savings. The estimate savings for 23-25 is equivalent to 4 months of expenditures.

Projected revenue vs cost for future biennia 25-27 and 27-29 reveal that expenditures will exceed revenue by \$1.46 million in 25-27 and \$6.21 million in the 27-29 biennium. Additional revenue will be needed just to maintain the vital records and statistics system that is needed by the county and the state.

Funding options include:

- 8.A Fees increase** (This option requires following the legislative process and rule changes for fees): A vital records fee increase will be needed just to maintain the current work, much less modernize. A fees increase was approved by the 2015 legislature and went into effect in 2016. The previous fee increase was in 2003. Unfortunately, basic projections with different fees options that don't consider additional staffing, reclassifying positions and additional money for OVERS modernization show that even a \$10 fee increase (40%) will not provide enough revenue to remove the deficit by the end of the 27-29 biennium. CHS should not propose a fee increase or other options funding increases until the HB 2420 workgroup publishes options required under the bill to determine equitable access to vital records and fees throughout the state. The workgroup has been meeting monthly since December 2023. The report is to be presented to the Legislative Assembly by January 1, 2025. Based on the timing of the workgroup report and preparation needed for implementing a fee increase, the earliest fee increase can be in place is 2028.
- 8.B Increase government agencies payment:** The amount the government agencies pay for services will need to increase. However, CHS should not continue to rely solely on government agencies to fill the funding gap.

- 8.C County Vital Records support:** Financial support from County Vital Records offices to maintain and operate the state vital records and statistics is needed. County Vital Records offices use the state system to issue vital records locally and get the entire fee for the certificates they issue. These offices also rely on the state to provide technical support and training. Currently, counties provide no support for the vital records and statistics system that they need to issue certificates and generate revenue from the sale of those certificates. County support is needed even if there is no change in the law related to the six months date of event or place of event. Support from the county can be in the form of fee sharing or a set amount annually or biennially. A funding formula would need to be determined in cooperation with PHD and CLHO.
- 8.D Consider general funds** to cover the revenue for Oregon Department of Human Services Office of Children’s Advocates generates from the registration and issuance of birth records under ORS 417.825. ODHS receives \$1 for each birth registered and \$1 for each birth certificate issued. This is a cost to the state and the counties. This is equivalent to approximately \$80,000 a biennium for the registration of the records and \$240,000 a biennium for certificates issued at the state for a total of \$320,000 a biennium. County Vital Records offices also pay the \$1 certificate issued. This option would require legislation.
- 8.E General funds** (This option requires official request from Agency for General Funds or legislation): Additional funding options need to be explored to accomplish interoperability and getting older records fully electronic. These are large IT projects that require funding over a few biennia to completed; but would not likely be needed at the same level once implementation is completed. Such projects may be conducive to allocation of general fund money during the project period. General funds could also be dedicated to funding the one-time project for getting all older records fully electronic.

9. to be adequately staffed with adequately trained employees with adequate classification.

NOTE: These options don’t require legislation.

- 9.A** Develop comprehensive training on all aspects of vital records and the vital records system that is available to new employees at the state and counties. Comprehensive training would need to be in numerous modules and likely take up to 8-16 hours total. The training should be made available as live remote or self-paced. The training would need to be updated as needed. The training should be mandatory for all employees.
- 9.B** The classification of staff working at the state and county vital records offices do not match the complexity of the work that must be done. The state is currently working on reclassifications of staff to ensure we are providing accurate and timely vital records to Oregonians and collecting timely and accurate information needed to examine health inequities.
- 9.C** Information on the skills and competencies needed for a successful Vital Records office that are proposed in the Public Health Accreditation Board Vital Records and Statistics standards should be reviewed and shared with administrators of the vital records offices to explain what level of staffing is needed for the vital records offices. This, along with information on the importance of their work, should be shared. The process to reclassify staff likely differs among the counties so each county would need to determine if and how they can be done. The state can provide the information to the counties. This would need to be coordinated through CLHO for most counties since Vital records

offices at the county are administered by the LPHA. This option would need to be coordinated based on what option is chosen to propose to the legislature since the roles of the county vital records office may change depending on which options are proposed.

11. better oversight and accountability for following the laws and procedures of the Vital Records.

NOTE: These options don't require legislation.

- 11.A** Ensure that information on the laws, policies and procedures are accessible and updated (see need #2). Develop and provide comprehensive training on vital records processes (see need #9). Require all new vital records staff to take the training and current staff take a refresher training every other year. Review the PHAB Vital Records metrics to determine which one can be used for vital records at the state and county to ensure a functioning vital records and statistics system. These would complement the triennial tool.
- 11.B** Conduct annual check ins with each vital records office to review performance and compliance. These would be virtual for counties that are not having an in-person triennial review. This would require additional staffing resources at the state at the Program Analyst level on \$172,000 a biennium.
- 11.C** Another option is to have mandatory monthly or every other month County vital records trainings review procedures and laws, answer questions and get feedback for potential changes or process improvements.

Comprehensive Set B:

B.1 Birth records proposal: Birth facilities and midwives who submit birth records required to scan and attach in the Oregon Vital Events Registration System (OVERS) the Acknowledgment of Paternity (AOP) and birth worksheets. Amendments staff authorized to establish paternity and correct typographical errors based on these electronic documents.

Background: Currently the physical AOP is mailed to the state vital records office by the birth facility. Once received, it is reviewed to ensure it is legally sufficient and only then can the birth record be registered. AOPs are sometimes lost in the mail or delayed, or we discover that a facility forgot to send them. State and county offices cannot issue a birth certificate with the father listed until the AOP is received and processed, and families often need this as quickly as possible for establishing insurance. When a family discovers errors on their birth certificate, they contact the state who reaches out to the birth facility to have them verify what was on the original worksheet the parents filled out. If the original worksheet agrees with the requested change (the error was made when entering information from the worksheet into OVERS) then the birth facility enters an amendment to change the information to match the worksheet and the state vital records office approves it. Otherwise, the state provides instructions to the family for what is legally required to make the change.

Considerations: AOPs that are pending approval due to being in transit and birth certificate errors that need resolved are the largest barriers to timely registration of birth certificates. The processes are confusing, error prone, and inefficient. Families sometimes contact birth facilities directly asking for changes that should not be made, and birth information specialists have at times made these unauthorized changes. It's time consuming for state Amendments staff to contact the hospital to have them check the original worksheets – sometimes requiring multiple requests. It's time consuming for staff at the birth facilities to verify information on the worksheets and enter in an amendment when needed. County vital records staff get caught in the middle – they are unable issue the certificates families have ordered as they await AOP processing or an amendment, and face questions and frustration from families about processes that are beyond their control.

Effect on identified needs: Expected strong positive effect on **#3 (birth registration timeliness)**. Also a positive effect on **need #1 (easy equitable access)** as families would have less barriers to getting an accurate birth certificate. AOPs are only for unwed parents so there is an inherent inequity when this process isn't efficient. Anecdotally, birth certificate errors may be more common when there are language barriers, or parents are part of a non-dominant culture. For example, birth facilities not understanding cultural norms around double last names and entering them incorrectly. Positive effect on **#2 (consistent and clear policies)** as the process for correcting errors would be simplified and no longer involve birth facility staff since Amendments can verify the worksheet and make corrections without involving them. Positive effect on **#7 (modern electronic system)** as the AOP and worksheets would be stored securely, electronically, and accessibly rather than being spread across facilities on paper. This would be a good bridge step towards eventual direct integration with Electronic Health Records. Positive effect on **#8 (sustainable equitable funding) and #9 (adequate staffing)** as it would increase efficiency of Amendment specialists at the state vital records office and County vital records staff who face questions from families. Positive effect on **#11 (oversight and accountability)** as with birth facility staff no longer entering amendments there would not be the chance of them entering changes they shouldn't or altering the worksheet inappropriately. If they fail to attach the AOP we will know and be able to hold them accountable immediately rather than assuming they mailed it and not being aware that it hasn't been sent until the record is noticeably delayed.

Fiscal: Analysis would be needed. OVERS changes may be needed to grant birth facilities permission to attach documents to the record, but the core functionality already exists, so this is expected to be a minor change. Cost savings expected due to significantly less administrative burden for one state Amendment specialist and moderately less administrative burden for all county vital records staff who process birth records. Birth facility impact on staff time is expected to be a net positive as they will have new responsibility (scan and attach documents), but they will no longer need to check worksheets at the request of Amendments staff or enter amendments. Scanning and attaching is not expected to be a burden as most facilities medical records offices will already have the capability to scan documents.

Death records proposal: Add enforceable penalties (such as progressively increasing fines or reporting to licensing board) for facilities, medical certifiers, or funeral directors who consistently or egregiously fail to meet the law for required timeliness of vital record submission. Evaluate current law to ensure it is clear who may certify a record (many people) and who is ultimately responsible if it isn't done (one person or facility).

Background: Timelines for the submission of vital records are outlined in law – ORS 432.130 - 5 days for birth and death records with medical certification for death records completed within 48 hours of the certifier having access to the record. These timelines are often not followed, and there is realistically no enforcement mechanism when the timelines are met. Sometimes medical certifiers when asked to certify a record will question what will happen if they don't, and the honest answer is that the state vital records office has no recourse. Certifiers will often argue that someone else is more qualified than them to certify the record, a certifier will be on vacation, or they will agree to certify but then delay doing so for weeks or months. In the meantime, families cannot get death certificates to resolve their loved one's financial obligations or in some cases intern the decedent such as when the decedent's final resting place will be out of country.

Considerations: When visiting funeral homes around the state, failure of medical certifiers to certify electronically, in a timely manner has been the #1 concern in virtually every visit. This is usually identified as a need for medical certifiers to certify electronically (see **#6 fully electronic death records**) but the heart of the issue is timely certifying. Certifying electronically is faster and more efficient, but even if certification is done electronically if the certifier isn't motivated to certify the problem will remain. Without the ability to enforce timeliness requirements, there is a risk that moving to a fully electronic system will compound timeliness problems in some cases as certifiers (especially those out of state or who rarely sign) will need to be convinced to certify and go through the process of signing up for and learning to use the electronic system rather than just completing the paper record. For enforcement of timeliness requirements to be effective, the law needs to be very clear which entity or person is responsible for certification (the recipient of the penalty) while not limiting the pool of people who can certify (those who could certify but are not ultimately the responsible certifier such as an associate who has access to the medical record). Current law exists (ORS 432.075, ORS 432.133) but should be evaluated. Additional staffing may be needed for enforcing penalties depending on the complexity of requirements and penalties. It is not intended that every instance of a late record be penalized, but that there is recourse in cases of egregious or consistent lack of regard for the law. Any collected fines may go to support the vital records system, or it may be desired that they go to another program such as the Indigent Burial Fund to avoid any appearance of impropriety or conflict of interest.

Effect on identified needs: Expected strong positive effect on **#3 (death record registration timeliness)**. Positive effect on **(#1 easy equitable access)** and **(#2 consistent clear policies and laws)** as families can get faster access to death certificates and responsibilities and enforcement of them becomes clear and complete. Positive effect on the ability of counties to issue certificates as they face less delays in the registration of the records. This would mitigate an aforementioned concern for **#6**

(**fully electronic death records**) as just because the method of certifying is efficient does not mean a certifier will use it. That also ties in with **#7 (modern electronic system)**. If the penalty is a fee and it is retained by vital records that would have a positive effect on (**#8 sustainable funding**). However, it could have a negative effect on **#8 (sustainable funding)** and **#9 (adequate staffing)** if the enforcement requirements or processes are consuming of staff time.

Fiscal: Analysis would be needed. Effects are likely to vary greatly depending on penalties, enforcement process and requirements, appeals options, and if the penalty is a fine, where the collected funds go. If enforcement requires a lot of work and collects very little it could be a burden on state vital records as staff time is further stretched.

Comprehensive Set C:

C.1 **Proposal: Add law that clearly requires all death certificates to be submitted electronically unless authorized by the State Registrar.**

Background: Since 2006, most death certificates are entered directly into OVERS by the funeral director. If the medical certifier uses OVERS, they complete their medical certification in OVERS and the record is quickly registered and available for issuance. When this happens, we refer to the process as “fully electronic”. If the medical certifier does not use OVERS, the funeral director enters their portion directly into OVERS and prints it onto special paper. The medical certifier then completes their medical certification on the physical paper. The medical information must then be manually entered into the electronic system by state staff. These records are called “hybrid” or “drop to paper” records and the process is inefficient. Transporting paper death records back and forth to certifiers and getting them to complete their certification is a large drain on the time and resources of funeral homes and without automated warnings for common errors these records often require amendments to fix errors. In very rare cases, the entire death record is completed on paper (most commonly when a family member is the “acting funeral director” and there is no licensed funeral director) and we refer to these as “fully paper” records. Virtually every licensed funeral director uses OVERS. Since implementation, funeral directors report that they were required to use OVERS though it’s unclear whether that came from Vital Records or the Mortuary and Cemetery Board. Their understanding was that medical certifiers would also be required to use the system but that did not happen. The only requirement in law is that if a facility has more than 10 deaths in a year, they must certify records in OVERS (ORS 432.133(5)). Many ongoing efforts are made by the state vital records office and funeral directors to encourage medical certifiers to use OVERS and improvement has been made. Roughly 87% of records are now certified electronically.

Considerations: Although use of OVERS has steadily increased, we are approaching a late adoption stage where remaining certifiers are unlikely to be persuaded to use OVERS. Some have argued that the State Registrar has the power to unilaterally implement a requirement that all records be fully electronic due to ORS 432.010(3) “Each report, record or other document required by this chapter shall be on a form or in a format prescribed by the State Registrar of the Center for Health Statistics.” However, that action would likely be met by opposition from medical certifiers and potentially contentious litigation to determine if this is an overreach. It would be ideal for the law to clearly make the requirement, with an ability for the State Registrar to authorize exceptions. Approved exceptions would be important to make allowances for special cases – for example when a family does not employ a licensed funeral director, and a family member acts as the funeral director to submit a death record. It would likely be a larger delay and barrier if they had to be enrolled in and trained to use an electronic system than for the record to be completed on paper. There may also be cases where a certifier is in a neighboring state and rarely certify Oregon death records, where completing a paper record is less of a barrier than signing up for

and learning to use the electronic system. If electronic certification is required but there is no mechanism for conclusively identifying a responsible medical certifier and enforcing their legal duty to certify in a timely manner, the requirement will be ineffective at best. In some cases, it may slow down certification if a medical certifier must be convinced to certify the record and sign up for OVERS. See my proposal for **#3 (timely death registration)** for a way to address this. If fully electronic death registration is required, it will be critical to find ways to sign medical certifiers up quickly and efficiently for OVERS, train them in using it, and change their access when they switch facilities. Special consideration will need to be given to certifiers in neighboring states, locum providers, and certifiers who otherwise change locations frequently or would only certify an Oregon death record very rarely.

Effect on identified needs: Electronic medical certification would become near-universal **#6 (fully electronic death)** with only rare common sense exceptions granted by the State Registrar. If implemented in conjunction with enforcement mechanisms for certifiers to meet timeliness standards, certificates would be registered faster, with less errors, and the near elimination of complicated processes necessary for registering physical records. Counties would no longer need to regularly review paper death records which would streamline their responsibilities. State vital records staff would no longer need to manually enter handwritten medical information in OVERS and would need to query certifiers less for errors. Families would be able to get accurate death certificates much faster to resolve their business. Funeral home staff would need to do less driving physical records around and spend less time contacting medical certifiers. Data quality would improve as certifiers can be guided using notifications, prompts, and spell checks to catch common problems. This would result in positive impacts on **#1 (easy equitable access)**, **#2 (consistent and clear laws and policy)**, **#3 (timely death registration)**, and **#7 (fully electronic modern system)**. Process efficiencies should result in staff time gains, positively affecting **#8 (sustainable funding)** and **#9 (adequate staffing and classification)**. It would be easier to perform quality control and accountability for legal and data quality standards, **#11 (oversight and accountability)**. Negative impacts of this proposal could include overwhelming the OVERS Help Desk phone line or OVERS onboarding process, as well as trainers as new users need to be added quickly and there is likely to be a large uptick in rare or one-time users. Administration of the OVERS system may become much more difficult, affecting **#8 (sustainable funding)** and **#9 (adequate staffing)** without accounting for this. If electronic certification is required, and there is no enforcement mechanism for timeliness added, there is a risk that certifiers will become more likely to refuse to sign as needing to do it electronically becomes an additional barrier for them. This would negatively impact **#1 (easy equitable access)** and **#3 (timely death registration)**.

Fiscal: Analysis would be needed. Effects are likely to be complex and would vary depending on if timeliness enforcement mechanisms are also implemented. Changes to OVERS may be needed to implement automated or batch changes to users (if for example it becomes necessary to get certifier data from licensing agencies to enable fast onboarding of certifiers). More staffing for OVERS and training may be needed. Even though only roughly 13% of records are non-electronic, those represent certifiers who have barriers to electronic certification that could include unfamiliarity with technology, frequent changing of facilities, or an infrequent need to certify a death record so this will be far more than a 13% increase in work. However, reductions in physical records will also be more efficient for some county and state positions. It will be difficult to project what the cumulative fiscal impact will be.

Comprehensive Set D:

D.1 **Proposal: Request General Funds for vital records modernization projects. Proposal for first project is scanning/digitization of all paper and microfilm records without entry into electronic system or attaching of individual images in electronic system.**

(See also the proposal for birth records in Set B which is similarly applicable)

Background: Vital records are stored in different formats. For birth, records 2007 and later are entered directly into the electronic system (OVERS). For Death, records 2006 and later are entered directly into OVERS. Records registered prior to this are generally stored on microfilm or paper. In some cases, the most basic information has been entered into OVERS but the full original document is on microfilm or paper. Some records are housed at the Oregon State Archives. Amending or issuing a certificate from microfilm or paper records is extremely time consuming as it requires staff to manually pull a paper record from the correct boxes or locate the record on microfilm and adjust several settings to obtain a legible copy. Working with these records requires being on-site which doesn't allow remote work or issuance by county staff and there are limited microfilm readers available. Digitization of these records could take several forms. Most comprehensively, the data from each paper/microfilm record would be typed into OVERS and a scanned image of the record attached electronically. Another option would be for the microfilm/paper to be scanned so that staff may access an image or collection of images on a secure shared drive and amend or issue them without the need to be on-site and pull the physical record. However, the OVERS record for the person would not have certificate information typed directly in or the individual image of the record.

Considerations: Fully entering all vital records information into OVERS or individually attaching every image to an electronic record would be extremely time consuming and costly. Over time, a greater percentage of records requested will have been after 2006/2007 when records started to be entered directly into OVERS so the demand for records stored on microfilm/paper will fall. In considering cost vs. benefit the best first phase is for all records to be scanned so that there is a digital image that staff can access on a secure shared drive. This avoids the most time-consuming aspects (data entry or attaching images) while still providing the biggest benefits (efficiency and eliminating the need to physically access the documents). If secure access to the files can be arranged, county staff would be able to access these records to issue them and state staff could be hired from a wider geographic area of Oregon. Electronic backups would also be easier to store than microfilm backups or paper. This would not be as ideal as attaching the images in OVERS, because you would need to locate the image in a very large image or a folder of several images but would be a good first phase. Other future projects could include attaching images or data entering them, as well as full interoperability of new records by developing data exchange with hospital electronic health records.

Effect on identified needs: Strong positive effect on **#7 (modern electronic system)** as it would enable basic remote access to old records. Positive effect on **#1 (easy equitable access)** as records could be issued faster and by staff working remotely. Enables **#4 (counties to be able to issue certificates regardless of date of event)** as otherwise there is no way for them to do so. The effect on **#8 (sustainable funding)** is dependent on funding being secured for this project. This cannot be accomplished without additional funding, likely through one-time General Funds. It cannot be done by existing staff. If the project is expected to occur with existing staff, it will have a detrimental effect on **#9 (adequate staffing and classification)** as staff are stretched further beyond what their time allows and their compensation justifies.

Fiscal: Analysis would be needed. It is unknown how much a digitization-only project would cost. If it is only moderately more expensive to also have images also attached in OVERS, it would likely be worth the cost of taking that extra step. Setting up and maintaining a secured shared drive is an additional cost. If counties or Tribes need access to the shared drive with the record images the cost will increase as they will likely need a data or security agreement, state system logins, and a VPN. In that case it may be more cost effective for images to be attached in OVERS. If counties can issue microfilm/paper records their funding could increase as they can issue more records, but this would cause state funding to decrease so fee sharing would be needed for the system to be maintained.

Comprehensive Set E:

Comprehensive system realignment proposal (addresses needs #1, #2, #4, #8, #9, #11)

Proposal: Overhaul vital records responsibilities to accomplish the following

- E.1** Eliminate confusion and duplication by creating a single place for submitting electronic, phone, and mail orders while preserving local in-person service
- E.2** Enable local in-person ordering of all records and in-person issuance of a wider range of records
- E.3** Create flexibility to accommodate differences between counties in funding, goals, and staff capacity
- E.4** Equitably fund the system through fee sharing
- E.5** Realign responsibilities to play to the strengths of the county (in-person access/fast issuance of straightforward orders) and state (processes that are highly technical or best centralized)
- E.6** Preserve the ability of funeral homes to get quick local issuance of recent records

This would be accomplished by changing law to allow the following system realignment:

Regardless of date or place of event, customers can order in person at the county. If the order is straightforward¹ (a funeral home ordering a death record or parent ordering a birth record) and is in OVERS, the county issues the certificate. If it's not in OVERS (pre 2006/2007 records on microfilm or paper)² or it's not straightforward (requiring eligibility documents or correspondence) the order cannot be immediately issued. The county enters the order, and the state reviews it and mails it to the customer. If an expedite is needed, the customer can pay for that service just like mail, internet or phone orders. All records would have fee sharing – if counties review and issue the order they get a larger portion of the fee than if they only enter the order and the state reviews it.³ The state would close its front counter as it duplicates the role of local county offices.⁴

All phone, internet, and mail orders would go through the state rather than the counties also accepting orders through these routes.⁵

Funeral homes may order in-person from any county vital records office exactly like any other customer, or by mail/phone/internet through the state exactly like any other customer. The state will activate an OVERS module that allows funeral homes to enter their orders directly into OVERS if they wish. There is a small vendor fee for this service and the order is paid for using a credit card. Once the order is

entered, if it is on microfilm the state issues the record. Otherwise, the county where the event took place would issue it (with fee sharing).⁶

Considerations:

1. Further specialized training could be provided to county staff so that they can issue more complex orders instead of sending them to the state for review. This would come with much more oversight and would be intended for counties that focus solely on vital records and want to take on a greater share of orders. This allows counties where staff have many different responsibilities and need to maintain expertise in several programs to still issue vital records without needing to know the complex case guidelines.
2. Once microfilm and paper records are digitized if county staff have access to the records, it may be possible to transition to county staff being able to issue these records as well in the future. See **#7 (fully electronic modern system) proposal**.
3. Counties would have access to many more of the straightforward orders that are most profitable, though with fee sharing. This reduces pressure on the state to be issuing certificates to keep the system funded. It allows counties to take on more orders that they are comfortable with, and they would no longer need to deal with complex cases that require a level of training and expertise that is more suited to state staff who are dedicated to only vital records work and have closer access to the State Registrar for review of unique cases. Funeral homes would have choice in who they order from in-person.
4. Realigning state staff to be focused less on in-person services may be accompanied by changes to maximize the number of positions that can be done remotely (e.g. one person performing all tasks that can be done remotely and one person doing only in-office tasks rather than two people performing a mix of tasks). Increasing the number of positions that can be done remotely expands the state's hiring pool beyond the Portland Metro area, accessing a talent pool that includes county vital records staff and creating a more geographically diverse workforce. This also helps with oversight and training, as state staff living outside the Portland Metro area can be local resources to their county vital records office. This may also help Continuity of Operations Planning, as a disruption in the Portland Metro area will affect a smaller percentage of state vital records staff.
5. This would create a "one stop shop" as no matter how you are ordering there is only one correct route – one website and ordering portal to be maintained, one phone number, one address to mail orders to, one office you would go to for in-person ordering. Currently the fragmentation of processes causes confusion as customers sometimes mail orders to the state thinking they sent them to the county. The duplication of routes is wasteful – for example 36 different online ordering options would need to be developed, paid for, and vetted if every county had an online option to order rather than it being centralized. Differences in the processes causes confusion and complication for customers. When the state is backlogged and it is needed, it may be possible to invite counties to issue straightforward phone/internet/mail orders and get a share of the fee. This flexibility may also be utilized in cases where there are large, sudden shifts in county issuance (such as a large funeral home deciding to take all their business to a 'competing' county).
6. This allows funeral home staff to still place an order and get quick, local issuance without needing to order in-person or know processes that are unique to each county. It would increase consistency and oversight across the state. If there's an ID attached to an OVERS login or an authentication quiz this may allow ID requirements to be streamlined. This also simplifies ordering and billing processes as funeral home staff won't have to keep track of each county's processes or be billed separately. They would either pay for all orders at time of service and eliminate billing or be billed only by the state. The

downside of this one-stop-shop simplicity for funeral homes is that they would no longer be able to simply fax or email an order form to a county and be billed. If that convenience is more important than eliminating the county-to-county differences in processing and billing, this could be changed.

Background: In the current system, the division of responsibility for issuance of vital records between the county and state is by time of event and place of event. Counties can only issue for the first six months, in the county where the event took place. The state issues any record that occurred anywhere in Oregon at any time. Records prior to 2006/2007 are on microfilm or paper rather than in OVERS.

The state vital records office maintains the vital records system: registering records, amending them, administrating OVERS, performing statistical analysis, training, and providing oversight and technical support. The system is funded solely through fees for services that are performed at the state, such as issuing certificates. County vital records offices do not fund the system – they currently keep the fees they earn for issuing certificates with none of the income going to support the system they depend on.

The state has a front counter where they issue certificates in-person. The state also accepts orders via the mail, which must be manually entered into OVERS. Orders are also accepted by internet or phone, which are facilitated by a third-party vendor, VitalChek. Funeral home staff can order by any of these routes, but typically order by emailing or faxing an order form and are billed.

Each county has their own processes, forms, etc. for accepting orders which are received in a variety of ways – in-person, by mail, internet, and phone. Funeral home staff may also fax or email orders. Most counties do not have a way to accept internet orders, but some have developed their own online ordering portals. This requires extensive planning and investment on their part, and review and oversight by the state vital records program. The result is duplication of investment, and confusion as there are many different routes customers can take to submit an order. In many cases a customer will mail a county order form to the state.

Funeral home staff need to keep track of differences in processes between counties they order from and are billed separately by each one. ID is required for every order, though funeral home staff have been allowed to keep theirs on file with a county they commonly use. This means that each county must individually maintain their own file of IDs which is duplicative and inefficient. Billing funeral homes can be a challenge – nonpayment and out of date billing addresses are an issue.

Effect on identified needs: Very strong positive effect on **#1 (easy equitable access)** as there would not be confusing parallel procedures for ordering records – instead there would be a one stop shop where for each method of ordering there is one correct route. In-person ordering would be expanded as any record could be ordered in-person at a county office (though not necessarily issued same day). Funeral homes would no longer need to keep track of ordering and billing procedures that vary from county to county. There would no longer be confusion related to whether a customer ordered from the county or the state. Positive effect on **#2 (consistent policies and laws)** as there would no longer be different procedures from county to county for funeral home staff to keep track of. Customers ordering by mail/internet would not have different procedures or policies when ordering from state or county like they currently do. Oversight of compliances with laws, rules, and policies would be simplified. This proposal would partially enable **#4 (county issuance regardless of place of date of event)** as customers could order any record in-person at the county. Until paper and microfilm records are digitized, issuance of those older records would still need to be facilitated by the state, but this sets the stage for counties to be able to

issue those records as well once they are digitized. Funeral home staff would be able to order death certificates in-person at their local county office for deaths that occurred in distant counties, and using the OVERS ordering portal could order certificates for deaths in their county online for pickup locally. This allows flexibility, while minimizing the risk of counties competing with distant larger counties or being held hostage by large funeral homes who threaten to take their business elsewhere. This proposal would make fundamental changes to **#8 (sustainable and equitable funding)** that will be complex and difficult to predict. It would result in counties beginning to invest fiscally in the vital records system that they utilize. A more efficient, straightforward system should result in savings. If billing funeral homes can be eliminated or centralized that should result in less administrative costs for processing those invoices. This proposal directly and indirectly affects **#9 (adequate staffing, training, and classification)**. County staff will not be required to learn much more technical eligibility determinations (which they will realistically not get increased compensation for doing) as they will only be issuing straightforward orders to funeral homes and parents. County staff that want to take on this additional expertise will have the opportunity to do so, with formal training that could be used as evidence for them to make the case that they deserve increased compensation for their expertise. With the state focusing less on in-person services more state positions can be staffed by people who work fully remote. This allows the state to do more recruiting statewide, increasing workforce diversity and utilizing the expertise of county vital records staff. This proposal protects and improves **#11 (oversight and accountability)** by mitigating the risk of having several online ordering platforms that all need to maintain confidentiality and compliance. It centralizes orders in ways that make it easier to ensure that they're processed in a consistent manner that meets the law. This realignment allows for greater oversight and accountability by improving the efficiency of oversight (centralizing, standardizing, and clearly delineating responsibilities) rather than by requiring many additional positions. As the state does less in-person work they can hire and develop local experts. This means in addition to a Triennial Review every three years, non-Portland Metro counties may have a state staff person living in their county that could spend time in their office providing hands on training on occasion.

Fiscal: Extensive analysis would be needed, and the complexity of the changes would make it difficult to forecast. At least two fee sharing proportions would need to be used – one for when the county is just entering an order and one for when they review and issue the order. Straightforward orders that would be issued by the county are services that are a net positive (quick to issue, money is made even taking to account staff time spent). Many services the state provides are likely a net negative (they cost more staff time than the fee we take in covers). Care would need to be taken in developing this proportion to ensure that the state vital records system we all depend on remains funded and functional. It may be necessary to revisit the formula for the fee sharing regularly especially during the first few years as order volumes shift in response to changes. Work orders to change OVERS functionality would need to be developed and paid for to implement this – changing the place and date of event restrictions on counties, turning on funeral home ordering, and developing a way for counties to access orders submitted through the module. Funeral home staff ordering records would need to enter their order into the OVERS module which is more time consuming than filling out an order form. They would also need to pay a vendor fee. If they enter an order incorrectly and it needs to be voided, that fee would be nonrefundable. Counties that have already invested in electronic ordering options would lose that investment if they were no longer used. However, preventing other counties from needing to each individually develop their own would be a significant saving overall.

II. Collation of Options Generated by the HB 2420 Workgroup

The Vital Records System needs:

1. easy, equitable access for the public that is straightforward and uncomplicated.

- 1.A Allowing the public to order vital records where geographically makes sense to them, without county restrictions. This will be an advantage for families and funeral homes when they want to order in person, this usually happens when they need their certificates right away and want to avoid the mailing time.
- 1.B Giving the public the flexibility to order a vital record that has surpassed 6 months from the day of the event at any county would make their process more convenient. People move throughout their life and being limited to a single county is not efficient. The only limitation would be if the record is very old, and it is not in an electronic form.
- 1.C Make sure state and county websites clearly state the prices for birth and death records as well as the estimated processing time.
- 1.D Make sure customers have a reliable way to track their orders especially if there is an amendment that needs to be done.
- 1.E Have clear and detailed instructions on the website for how to have an order expedited.
- 1.F There should be only one birth certificate order form to cover the birth range of 1903 to current, this would be less confusing to the public.
- 1.G A price increase from the current prices of \$25.00 and \$30.00. A price increase to \$40.00 could assist with improving the vital records system. This price increase for both birth and death certificates could be beneficial if the state is able to create electronically certified copies of birth and death records. With a certified electronic copy, the need would go down for paper copies, as people would be less likely to lose or have a record stolen, thus the price increase could be justified.
- 1.H Have an online fillable form.
- 1.I Provide an easy-to-locate phone number that people could call (and speak with a live person) if they need help or clarification on the process. to make it even easier for people unfamiliar with the ordering process.
- 1.J State and Counties to provide easy to read and understand information.
- 1.K Redesign the website.
- 1.L Each county works with area community partners to connect public to vital record resources.

- 1.M** Allow the public to obtain records in their county of residence even if the event happened somewhere else.
- 1.N** Remove the 6-month restriction.
- 1.O** Give access to local county registrars.
- 1.P** Clear instructions, clear communication for accessing vital records while providing a variety of options.
- 1.Q** Accessibility for everyone in a modern system but not leaving anyone behind, putting in place and providing a full range of options; using a cell phone or computer or to walk-in or mail a physical form.
- 1.R** Have clear standards and policies for proving and maintaining eligibility rules and policies.
- 1.S** Improving the communication and a variety of options for providing access to the records with clear communication that includes instructions for everyone - the public and the partners about how and where to get records.
- 1.T** Having updated websites.
- 1.U** Have better technology.
- 1.V** Have better synchronicity and reliability in VitalChek. When requesting older death certificates through VitalChek, the tracking is not accurate. It will show that an order has been processed when it has not.
- 1.W** To have easier public access for records over 6 months or from other counties when things overlap, better technology could help expedite the process.
- 1.X** Have an online option from the state for people to use online, while still receiving people who prefer to come in person.
- 1.Y** Provide a one-stop shop: Whether customers are requesting a record from the state or the county, they could send it to the same place by mail or online, and not have to keep track of where they need to order from or how they will be billed for the order and what methods of payment are accepted. In the current system, each county has a different system for ordering records and different methods for billing and payment options that they offer. Some have electronic options. Customers can order electronically through the state through VitalChek.
- 1.Z** Offer options for people who want to come in-person or send things in the mail.
- 1.AA** Offer electronic ordering especially if transportation or childcare is a barrier.
- 1.BB** Offer different payment options for easier access. A lot of younger people do not have credit cards, they use methods like Venmo, CashApp, or Zelle. Being able to accommodate them would make for easier access.
- 1.CC** Make clearer and more streamlined eligibility and other requirements for people requesting records as well as for registrars requesting records.

- 1.DD** Create an Ombudsman type of role, so if the app can't process the complexity, you have someone who can step in. This person could investigate why it didn't order or why it isn't being issued and figure out if it is a problem with access or a requirement that is determined by law.
- 1.EE** Allow printing certificates for longer than six months while acknowledging the revenue that is generated from the state vital records.

2. consistent and clear standards, policies, and laws (connects to easy public access)

- 2.A** Streamline laws regarding who can order records.
- 2.B** Have the same order form across all counties.
- 2.C** Have an online fillable form.
- 2.D** Have a User-friendly website with resources for all parties involved in the process.
- 2.E** For the public, simple to read and printable flyers with concise information for the services they need.
- 2.F** Having the state and counties regularly maintain their websites with any updates would keep the public abreast with the most recent information.
- 2.G** A public phone line that has a state employee who can assist individuals that are not computer savvy and need instruction. As well as assist individuals who have a more complicated familial connection which can prevent someone from obtaining a birth or death record.
- 2.H** As far as who is legally "allowed" to acquire a death certificate; it is pretty straight-forward regarding family members. The gray-area that should be addressed is those needing a death certificate for "legal purposes", i.e., ex-spouses with young children. There should be clear guidelines on how to request a death certificate in the event that the requestor is not a family member or legal representative, but still has a valid need.
- 2.I** State to review and update laws, policies, & standards
- 2.J** Provide updated information to counties in a timely manner
- 2.K** Standards and policies should reflect the law.
- 2.L** All the standards, policies and laws should be gathered and reviewed for consistency.
- 2.M** Standards and policies should be updated as needed.

- 2.N A Vital Records policies and law reference area on the web and intranet should be developed so that there is one reference place for these.
- 2.O The policies should be reviewed annually and updated when new laws are implemented.

3. timely registration of birth and death records.

- 3.A Require all registrations to be electronic.
- 3.B Legislation needs to be implemented in Oregon to enforce medical certifiers, hospitals, birth centers, and funeral homes to become fully electronic. This is so necessary for timeliness through the process, especially when amendments are needed. Enforcing electronic entries will also prevent mistakes (and time correcting those mistakes) since some handwritten documents are impossible to read.
- 3.C Somehow make AOP (affidavit of paternity) pending process quicker.
- 3.D Make all death records electronic.
- 3.E Put in place a law that mandates birth and death records must be electronically registered within a specific time period and if not, some type of consequence needs to come into play, such as an imposed fine on the individual doctor or the facilities administration.
- 3.F Most times when a death certificate gets held up in the registration process, it is due to the physician not completing the death certificate in a timely manner. When this happens, the funeral home often must call the physician's office to follow up (sometimes, more than once.) This could be helped by informing physician's offices of the current Oregon statute that states "medical certifiers have 48 hours to complete the record after having received access to it". For those physicians that repeatedly take a week or more to sign, a phone call or official letter from a Vital Records Rep explaining the statute may help. There are currently no consequences for physicians not following the statute.
- 3.G State to increase sufficient staffing to process Affidavit of Paternity (AOP) in a timelier manner
- 3.H More hospital staff trainings on the completion of AOP's to prevent delays
- 3.I More State involvement to enforce or penalize doctors for untimely signing of death certificates
- 3.J Have set rules and training of what is expected followed by possible fines if not complied with.
- 3.K Birth facilities and midwives who submit birth records required to scan and attach in the Oregon Vital Events Registration System (OVERS) the Acknowledgment of Paternity (AOP) and birth worksheets. Amendments staff authorized to establish paternity and correct typographical errors based on these electronic documents.

- 3.L** Add enforceable penalties (such as progressively increasing fines or reporting to licensing board) for facilities, medical certifiers, or funeral directors who consistently or egregiously fail to meet the law for required timeliness of vital record submission. Evaluate current law to ensure it is clear who may certify a record (many people) and who is ultimately responsible if it isn't done (one person or facility).
- 3.M** require that all records be electronic and all reporting to be electronic, when errors happen, they could be quickly corrected.
- 3.N** Put in place a law, with a mechanism to enforce penalties for exceeding timelines. Even with electronic records, it doesn't mean that people will use it and certify records in a timely manner.
- 3.O** Being automatically enrolled in OVERS when doctors get their medical licenses. Automatic registration for medical examiners.
- 3.P** If hospitals would attach the birth worksheet and paternity paperwork in OVERS, it would remove barriers to parents getting certificates and correcting errors.
- 3.Q** Birth facilities and midwives who submit birth records required to scan and attach in the Oregon Vital Events Registration System (OVERS) the Acknowledgment of Paternity (AOP) and birth worksheets. Amendments staff authorized to establish paternity and correct typographical errors based on these electronic documents.
- 3.R** For death records: Add enforceable penalties (such as progressively increasing fines or reporting to licensing board) for facilities, medical certifiers, or funeral directors who consistently or egregiously fail to meet the law for required timeliness of vital record submission. Evaluate current law to ensure it is clear who may certify a record (many people) and who is ultimately responsible if it isn't done (one person or facility).

4. for counties to be able to issue certificates regardless of place or date of event.

- 4.A** Allowing the public to order vital records where geographically makes sense to them. This will help families when they want to order in person. This occurs when they need the record right away and want to avoid the mailing time.
- 4.B** giving the public the flexibility to order a vital record that has surpassed 6 months from the day of the event at any county would make their process more convenient. People move throughout their life and being limited to a single county is not efficient. The only limitation would be if the record is very old, and it is not in an electronic form.
- 4.C** If counties had access to all records that might lighten the load for the state.

- 4.D** This would appear to be a coding and IT process. A county would need to be able to type in the county of birth or death as well as dates over 6 months old in order to electronically access the information.
- 4.E** As far as counties issuing records regardless of **Place** of event: does this need outweigh the associated costs of implementing an entirely new technology system to connect all counties?
- 4.F** In regard to counties issuing records regardless of **Date** of event: It would be helpful if counties were able to issue records for a bit longer than the current 6-month standard. Funeral homes sometimes receive requests for death certificates past the 6-month rule. While Funeral homes will not order on the family's behalf indefinitely, a slightly longer grace period, say up to a year, would allow Funeral Homes to better accommodate the families they serve.
- 4.G** The State would need to initiate and implement County access to records in OVERS across the State of Oregon and change the laws currently in place to remove the 6-month issuing time limit and allowing counties to issue up to age 2-4 years old
- 4.H** Allow the public to obtain records in their county of residence even if the event happened somewhere else
- 4.I** remove the 6-month restriction
- 4.J** give access to local county registrars, with training and more regular check-ins from the state.

6. for all death certificates to be fully electronic.

- 6.A** Legislation needs to be implemented in Oregon to enforce medical certifiers, hospitals, birth centers, and funeral homes to become fully electronic. This will streamline the work we do (OHA, counties, funeral homes, hospitals, birth centers) making the process more efficient, including the communication among all parties involved. This time-saving measure will enhance the promptness and quality of our work and the vital records that we issue.
- 6.B** Require all registrations to be electronic.
- 6.C** This is slowly becoming the reality. More physicians are utilizing the OVERS system, and all funeral homes already have access. The way to ensure all records become fully electronic, though, would require some sort of mandate or statute; and a solid date set as to when doctors would have to switch to fully electronic records.
- 6.D** This will need to be implemented and mandated at the State level

- 6.E Maybe a law or rule that all practicing providers in or neighboring states need to be registered when they start practicing medicine in any of these areas.
- 6.F Implement something like how Washington state has a law that requires all death certificates to be done electronically, and maybe this is reinforced and regulated by their medical board who licenses medical examiners.
- 6.G require all medical examiners to use OVERS and make everything electronic. This will be a huge lift to work on removing barriers and encountering some resistance and issues with out of state providers, and providers who sign hybrid records. It is a huge lift to get people signed up, but a lot of people are excited about it, and a lot of work has already been done to remove barriers.
- 6.H Create accountability to require providers to use OVERS
- 6.I go around the state to visit each geographic region to encourage accountability and partnership with the state and the Funeral Homes and the medical certifiers.

7. for all records to be fully electronic, with access to all old and new records, in an effective, functional and modernized system. (a.) this electronic system needs to be interoperable, meaning accessible in all interconnected systems.

- 7.A Getting funding through grants and a fee increase for hiring new staff and offering adequate training. This would take time, but becoming fully electronic will definitely benefit OHA Vital records work since now, it isn't simple to retrieve old records. Also, when this is implemented, all counties would be able to process birth and death certificates regardless of the date of birth or death (old and recent).
- 7.B Vital records systems could be interoperable with the appropriate technology and systems. The main challenge is funding, since it needs to be available to modernize this work, which will be expensive and take a lot of time.
- 7.C Pass a law that requires all doctors to go electronic - no more full paper or hybrid
- 7.D Use Interns or Work Study Students to assist with getting old records into the system.
- 7.E Ask legislature for funding to update OVERS
- 7.F Apply for grant funding to assist with the cost of system modernization.
- 7.G When doctors, midwives etc., earn their medical licenses they must automatically be registered in OVERS, through the facility they are working in. Maybe a part of new hire paperwork with the hospitals, HR...

- 7.H** The idea of a legislative grant to assist in the modernization of the system; however, it might be important to add that additional funding for future growth of the system be made available. As stated in question #1, a fee increase would be viable.
- 7.I** Perhaps requesting a one-time grant from the State (for the additional labor/cost) for this project would be beneficial.
- 7.J** Great option for Counties back to 2010 to help generate additional revenue. Older records (prior to OVERS) and archived records should still be handled at the State level.
- 7.K** investigate a new system, set up process, staffing, plan with completion dates, and most importantly funding
- 7.L** Request General Funds for vital records modernization projects. Proposal for the first project is scanning/digitization of all paper and microfilm records without entry into the electronic system or attaching of individual images in the electronic system.
- 7.M** Get all older records into the electronic system
- 7.N** Ensure the electronic system has security measures and ways to ensure access, in case of a security breach, complications with firewalls and security systems blocking access, and how this could present difficulties for IT staff in small counties with less resources.

8. sustainable and equitable funding to support the system.

- 8.A** Fee sharing / Fee increases – if a county issues a certificate after the first six months, a portion of the fee could go to the State.
- 8.B** Getting funding through grants and a fee increase.
- 8.C** Increase the cost of certificates. State gets a portion (example: Increase to \$30, state gets \$5, and county keeps \$25)
- 8.D** Counties pay an annual fee for use of the system (like OCVR the state voter registration system) and have full access to the system.
- 8.E** If the counties are able to issue records after the current 6-month limitation and there was a certificate fee increase, the state could charge the counties a percentage fee, based on how many certificates were sold in a quarter, in this way the state would still reap some revenue for certificates issued past the current 6-month limitation.
- 8.F** Because the Vital Records division receives no money from the State general fund, the option that is apparent is the income from fees collected. This is currently “basically” sufficient for the time being. Raising fees for records is always an option, though Oregon is already on the upper end of what states charge for vital records.
- 8.G** State to charge Counties \$1 fee per order issued from OVERS to help support the operational and maintenance cost of OVERS

- 8.H** Think about a percentage-based system, for example monthly invoices, this month you printed 100 certificates and the percentage back to the state is 5% or that so now the state will bill you for that amount. $100(\$25\text{each}) = \$2500 * 5\% = \$125$ goes back to the state or whatever percentage we decide is reasonable.
- 8.I** A creative option for funding could be to ask the legislature (across one or two sessions) for a one-time grant to modernize the system. This has not been done in the past. This would provide the resources to get the older records in the system and make it fully electronic for all partners. A fee increase may be a viable solution for maintaining the system (but separate from the legislative ask to modernize)
- 8.J** A creative option for funding could be to ask for general fund dollars is a creative approach that requires a careful balance, asking for a grant for immediate upgrade versus staffing (not for staffing on an ongoing basis) A one-time grant approach could be really effective.
- 8.K** Creating something like the Indigent Disposition Fund. Increase the fees and distribute a portion to the state and to the county, or something along those lines. Could be more sustainable.
- 8.L** Getting general fund money
- 8.M** Service reductions or reallocation of different services or a combination of sorts, but there is already an issue or turnover and burnout
- 8.N** Setting up some sort of fee sharing, but that would be splitting the same amount if there is not a fee increase.
- 8.O** Create a financial structure for counties to cover some financial support of the system. At present, counties issue certificates out of the OVERS system and they rely on the registration, the amending, the statistics, the training – all of the different supports provided by the state, but without any financial support in exchange for any of these services. This is the fundamental issue with the shift to where certificates are being issued, but if that funding shifts from the state to the counties, the system would no longer be supported. If this happened, then the counties wouldn't be able to issue certificates either because none of those records would be getting registered or amended and there wouldn't be any staff training.
- 8.P** Fee sharing of all certificates (so counties could issue for a year), or some sort of mechanism for the counties to invest would be a way to make sure these changes would be less impactful to the overall system.
- 8.Q** Keeping it to the county where the event occurred would be a good way to ensure stability and sustainability because it would diffuse potential competition between small and large counties and the state. For instance, if a large county was being favored to issue certificates, a smaller county may have to lay off employees if they have one main customer who decided to take their business to a larger county.
- 8.R** Devise a way to share funding for the system as a whole
- 8.S** Asking the legislature to fund a one-time grant to modernize the system (relating to #7 to have all records fully electronic)
- 8.T** Come up with ways to share the maintenance of the system with the understanding that the state maintains the system and the state provides all the resources for the counties and the counties don't support the system.

9. to be adequately staffed with adequately trained employees with adequate classification.

- 9.A** To be adequately staffed an assessment of workload and level of responsibilities is needed in order to avoid undue stress and burnout. Classification would depend on the level of specialization, but unfortunately, when resources are scarce, compensation is not always adequate, and it is difficult to change.
- 9.B** Trainings should come from different sources, always offer guidance and time to stay up to date with changes.
- 9.C** All our staff are cross trained
- 9.D** Perhaps the standard classification the state implements in regard to the skills and experience necessary in order to do the work, needs to be the same for the counties. A uniform standard that would bring the level of training up to a higher standard. The counties work for the state in a roundabout way. If changes are implemented to allow more robust offerings to the public, then the training of the county staff needs a higher standard of requirements.
- 9.E** The issue here is that the wage offered for the ‘entry level’ positions isn’t especially desirable for people living in the Portland area. Therefore, there is a difficulty in recruiting and retaining quality people. If it is not possible to request a salary increase, would it be possible to make the job more appealing by offering a telecommuting option?
- 9.F** This should be dealt with internally at each County to determine their needs and the State should be available to help as needed
- 9.G** Increase pay
- 9.H** Offer incentives
- 9.I** More cross training so it does not fall all on one employee.
- 9.J** A creative solution could be to address fees with a modernized system with electronic official certification of a vital record: With an electronically certified record, customers would not have to purchase paper copies (this is being explored across the nation) This would improve access and help customers with costs because they wouldn’t have to have a hard copy being moved around in the mail, instead the electronic certified records could work with everyone everywhere

11. better oversight and accountability for following the laws and procedures of the Vital Records.

- 11.A Create live webinars for new users, so they are able to ask questions and virtually meet OHA staff and other counties' staff members.
- 11.B Provide once a year training in the form of live webinars as well.
- 11.C Between Triennial Reviews, OHA should visit counties once a year, this would be an informal visit to discuss what's working, and what challenges we are experiencing. There is a value in in-person meetings, despite the challenges that this would entail, the effort could generate vast benefits.
- 11.D The triennial review is a great tool for the counties as far as accountability and understanding the laws. However, it seems that perhaps a yearly review could be a more effective way to implement training and accountability. The counties would be more connected to the needs of the state, and it would assist the counties in maintaining that higher standard of classification.
- 11.E The monthly Matters of Record is a great tool for understanding procedures and what the state is needing from the different groups that are involved in issuing birth and death records. It could be utilized more by the funeral homes.
- 11.F Having a county liaison to reach out to has been very helpful when needing to understand procedures, as it is an immediate solution.
- 11.G There are already statutes in place for death records that aren't currently enforced. (i.e., physicians being required to sign-off in a timely manner – currently the statute states 48 hours- but this rarely happens.) Someone available from the Vital Records division to oversee this and contact “repeat offenders” would be helpful on our end.
- 11.H Counties should have direct access/contact to the State for immediate assistance
- 11.I have representatives go out to partners around the state to provide information and answer questions
- 11.J Review process that is more frequent than the triennial reviews

III. Suggestions for Tribal Intergovernmental Relations

The Tribes need:

- a. to have better access and a better system for access to Birth and Death certificates.
 - b. a liaison who understands the Tribes to facilitate communication.
 - c. to be recognized as a government to ensure easy access and processing.
- Dedicate staff at the state to work with the OHA Tribal Liaison office to coordinate a Vital Records and Statistics tribal workgroup to review explore options to establish Vital Records offices for Tribes, to improve collaboration with county vital records offices to help support Tribes in registered vital events and accessing certified copies of records, and determining what tribal records can be registered as vital events at the state. This workgroup should include County Clerks as well since marriage records are also an important record.
 - Better utilization of the Public Health Division Tribal Liaison and more involvement with them in vital records may be helpful.
 - An ongoing workgroup of vital records partners that includes a representative from the Tribes may also be advantageous, these may not require legislative involvement.

IV. Other Ideas Outside the Scope of the HB 2420 Workgroup

5. reciprocity with neighboring states.

- Not sure a county vital records department needs this function. It has been easier to direct a person born in a particular state, to get their birth certificate from that state.
- Working with death records only, we rarely see a need to work with other states. On the rare occasion that we handle a deceased that passed in a different state, we enlisted a funeral home from that state to be our liaison to acquiring death certificates. (I feel this question would be better answered by others on this panel.)
- This is a great option for the State to issue records from other bordering states, which would also help supplement their revenue
- Come up with some sort of MOU with that state that would allow us to print certificates out of their system, possible login access to their system with training and privileges for them to do the same out of our system? Not sure how many rules I broke by just thinking it is that simple.
- Unfortunately, Oregon can't provide vital records for events that occurred in another state. States can only issue certificates for the events that occurred in that state. There is current reciprocity with neighboring states for funeral homes who have reciprocal licenses with Washington as approved by the Oregon Mortuary and Cemetery Board. Medical certifiers who are licensed in neighboring states can sign death records. Option: Provide information to partners where they can find information on ordering vital records from other states. This does not require legislation.
- Alignment of our laws with neighboring states isn't feasible. Medical certifiers of neighboring states can certify Oregon death records. If death records are fully electronic it may be advantageous to partner with licensing agencies in neighboring states to obtain funeral director or medical certifier information to help expedite signing people up for OVERS when needed and probably does not require legislation.

10. easier access to OVERS with a longer time-out on the login.

- IT would need to set time-out parameters for those users that are granted permissions to be working in OVERS. Depending on their account level and permissions, hopefully a longer log in session for those working hours in OVERS.
- Giving the option to OVERS' users to adjust the time before the system times them out. I am sure the short time allowed now is for protection of private information. If users are allowed to adjust their time, they can assess their work needs and similarly they can determine the time depending on their physical office, the ones that work alone or in a private space could adjust to a longer time.
- Whatever the longest time-out is allowed should be applied 😊
- This would be more convenient for the majority of OVERS users. If the IT requirements don't prevent this, it may be an easy adjustment to make. (Not knowing the internal workings of the system myself, I would inquire to the IT department as to if this would be possible.)
- Implemented at the State level
- Sounds like an adjustment in the system.

- Examine Office of Information Systems requirements for timing out of OVERS and determine if the time can be increased without causing performance issues. This does not require legislation.
- Login time-outs are likely governed by Office of Information Security best practices. Especially if death records are fully electronic, easier access to OVERS will be needed. It may be advantageous to partner with licensing agencies in Oregon and neighboring states to obtain funeral director or medical certifier information to help expedite signing people up for OVERS when needed. This may not require legislation.

12. more immediate communication for staffing and delays.

- If I am understanding this need well, I would say that in our county day to day vital records operations, I would like to see a live chat to communicate with OHA when questions arise. Emails and phone calls are effective means of communication, but we sometimes need immediate needs to talk to them.
- If there were staff at the state that could generate a bi-monthly email indicating trends, such as how long it is taking for AOP pending's to be filed, or any other helpful and immediate information.
- If I am understanding this correctly, this essentially means that if there will be delays in orders, amendments, etc. due to staffing issues, that it would be beneficial to communicate this to the requestors. This could be easily implemented with an announcement on the Vital Records webpage, or in an email, if and/or when delays become significant.
- Better communication from the State for delays
- Counties should have direct access/contact to the State for immediate assistance
- Ensure the county vital records offices have information on how to access the web pages where the timeliness of processing records, especially amendments, is updated monthly. Detailed information based on the type of amendment is on the main Amendments home page (add link here). This does not require legislation.
- The web pages are being redesigned to be more customer oriented. Information on timeliness of processing for the public and partners will be easier to find.
- There are existing avenues (newsletters, listserv emails, every-other-month county workgroups) for communication. Further improvements in communication can be addressed without legislation.

V. Appendix: Compilation of All Options Generated in the Workgroup Meetings and Written Contributions

The Vital Records System needs:

1. easy, equitable access for the public that is straightforward and uncomplicated.

- Allowing the public to order vital records where geographically makes sense to them, without county restrictions. This will be an advantage for families and funeral homes when they want to order in person, this usually happens when they need their certificates right away and want to avoid the mailing time.
- giving the public the flexibility to order a vital record that has surpassed 6 months from the day of the event at any county would make their process more convenient. People move throughout their life and

being limited to a single county is not efficient. The only limitation would be if the record is very old, and it is not in an electronic form.

- Make sure state and county websites clearly state the prices for birth and death records as well as the estimated processing time.
- Make sure customers have a reliable way to track their orders especially if there is an amendment that needs to be done.
- clear and detailed instructions on the website for how to have an order expedited.
- There should be only one birth certificate order form to cover the birth range of 1903 to current, this would be less confusing to the public.
- A price increase from the current prices of \$25.00 and \$30.00. A price increase to \$40.00 could assist with improving the vital records system. This price increase for both birth and death certificates could be beneficial if the state is able to create electronically certified copies of birth and death records. With a certified electronic copy, the need would go down for paper copies, as people would be less likely to lose or have a record stolen, thus the price increase could be justified.
- Have an online fillable form?
- provide an easy-to-locate phone number that people could call (and speak with a live person) if they need help or clarification on the process. to make it even easier for people unfamiliar with the ordering process,
- State and Counties to provide easy to read and understand information
- Redesigned website
- Each county works with area community partners to connect public to vital record resources
- Allow the public to obtain records in their county of residence even if the event happened somewhere else
- remove the 6-month restriction
- give access to local county registrars.
- Clear instructions, clear communication for accessing vital records while providing a variety of options.
- Accessibility for everyone in a modern system but not leaving anyone behind, putting in place and providing a full range of options; using a cell phone or computer or to walk-in or mail a physical form
- have clear standards and policies for proving and maintaining eligibility rules and policies.
- Improving the communication and a variety of options for providing access to the records with clear communication that includes instructions for everyone - the public and the partners about how and where to get records.
- Having updated websites

- Have better technology
- have better synchronicity and reliability in VitalChek. When requesting older death certificates through VitalChek, the tracking is not accurate. It will show that an order has been processed when it has not.
- to have easier public access for records over 6 months or from other counties when things overlap, better technology could help expedite the process.
- Have an online option from the state for people to use online, while still receiving people who prefer to come in person.
- Provide a one-stop shop: Whether customers are requesting a record from the state or the county, they could send it to the same place by mail or online, and not have to keep track of where they need to order from or how they will be billed for the order and what methods of payment are accepted. In the current system, each county has a different system for ordering records and different methods for billing and payment options that they offer. Some have electronic options. Customers can order electronically through the state through VitalChek.
- offer options for people who want to come in-person or send things in the mail.
- Offer electronic ordering especially if transportation or childcare is a barrier.
- offer different payment options for easier access. A lot of younger people do not have credit cards, they use methods like Venmo, CashApp, or Zelle. Being able to accommodate them would make for easier access.
- Make clearer and more streamlined eligibility and other requirements for people requesting records as well as for registrars requesting records.
- Create an Ombudsman type of role, so if the app can't process the complexity, you have someone who can step in. This person could investigate why it didn't order or why it isn't being issued and figure out if it is a problem with access or a requirement that is determined by law.
- Allow printing certificates for longer than six months while acknowledging the revenue that is generated from vital records
- Some counties are already offering online requests for birth and death certificates. This is working well for the public and it has been effective. Families can order records from a computer, iPad or their phones. For applicants who do not want to use electronics, they can come into the office for in person assistance. Some county offices have kiosks, and they take the time to guide families through the process.
- The six-month mark or the limitation of the location is a barrier for some people. Problem: It's hard to tell people who have come to a county office from a long distance that they can't process their request.
- Regarding accessibility to records, there is criteria as to who has access. These criteria probably won't change, but the navigation may be the issue. This is an important distinction to consider for equitable access. It could be a challenge for older Oregonians to use an electronic system, so we need to keep this generation in mind with the navigation in order to meet the goal of equity. The criteria may be fairly firm, but the navigation has the potential to create easy, equitable access for all with a wide range of options.

- When a death occurs, the funeral home assists families in acquiring death certificates. We also often receive calls from people inquiring about how to get a death certificate, and we are happy to assist.
- Regarding deaths that happened some time ago, when a funeral home isn't immediately involved, a quick Google search will bring up how to order a vital record in Oregon. (The options are clearly outlined, and there are many: by phone, via Vitalchek online, in person, or by mail.)

2. consistent and clear standards, policies, and laws (connects to easy public access)

- Streamline laws regarding who can order records.
- Have the same order form across all counties.
Have an online fillable form?
- Have a User-friendly website with resources for all parties involved in the process.
- For the public, simple to read and printable flyers with concise information for the services they need.
- Having the state and counties regularly maintain their websites with any updates would keep the public abreast with the most recent information.
- A public phone line that has a state employee who can assist individuals that are not computer savvy and need instruction. As well as assist individuals who have a more complicated familial connection which can prevent someone from obtaining a birth or death record.
- As far as who is legally “allowed” to acquire a death certificate; it is pretty straight-forward regarding family members. The gray-area that should be addressed is those needing a death certificate for “legal purposes”, i.e., ex-spouses with young children. There should be clear guidelines on how to request a death certificate in the event that the requestor is not a family member or legal representative, but still has a valid need.
- State to review and update laws, policies, & standards
- Provide updated information to counties in a timely manner
- Standards and policies should reflect the law.
- All the standards, policies and laws should be gathered and reviewed for consistency.
- Standards and policies should be updated as needed.
- A Vital Records policies and law reference area on the web and intranet should be developed so that there is one reference place for these.
- The policies should be reviewed annually and updated when new laws are implemented.

3. timely registration of birth and death records.

- Require all registrations to be electronic.
- Legislation needs to be implemented in Oregon to enforce medical certifiers, hospitals, birth centers, and funeral homes to become fully electronic. This is so necessary for timeliness through the process, especially when amendments are needed. Enforcing electronic entries will also prevent mistakes (and time correcting those mistakes) since some handwritten documents are impossible to read.
- Somehow make AOP (affidavit of paternity) pending process quicker.
- Make all death records electronic.
- Put in place a law that mandates birth and death records must be electronically registered within a specific time period and if not, some type of consequence needs to come into play, such as an imposed fine on the individual doctor or the facilities administration.
- Most times when a death certificate gets held up in the registration process, it is due to the physician not completing the death certificate in a timely manner. When this happens, the funeral home often must call the physician's office to follow up (sometimes, more than once.) This could be helped by informing physician's offices of the current Oregon statute that states "medical certifiers have 48 hours to complete the record after having received access to it". For those physicians that repeatedly take a week or more to sign, a phone call or official letter from a Vital Records Rep explaining the statute may help. There are currently no consequences for physicians not following the statute.
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- Add enforceable penalties (such as progressively increasing fines or reporting to licensing board) for facilities, medical certifiers, or funeral directors who consistently or egregiously fail to meet the law for required timeliness of vital record submission. Evaluate current law to ensure it is clear who may certify a record (many people) and who is ultimately responsible if it isn't done (one person or facility).
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- For death records: Add enforceable penalties (such as progressively increasing fines or reporting to licensing board) for facilities, medical certifiers, or funeral directors who consistently or egregiously fail to meet the law for required timeliness of vital record submission. Evaluate current law to ensure it is clear who may certify a record (many people) and who is ultimately responsible if it isn't done (one person or facility).

4. for counties to be able to issue certificates regardless of place or date of event.

- Allowing the public to order vital records where geographically makes sense to them. This will help families when they want to order in person. This occurs when they need the record right away and want to avoid the mailing time.
- giving the public the flexibility to order a vital record that has surpassed 6 months from the day of the event at any county would make their process more convenient. People move throughout their life and being limited to a single county is not efficient. The only limitation would be if the record is very old, and it is not in an electronic form.
- this “need” is part of solving #1 – easy, equitable access.
- If counties had access to all records that might lighten the load for the state.
- This would appear to be a coding and IT process, I am imagining. A county would need to be able to type in the county of birth or death as well as dates over 6 months old in order to electronically access the information.
- As far as counties issuing records regardless of **Place** of event: does this need outweigh the associated costs of implementing an entirely new technology system to connect all counties?
- In regard to counties issuing records regardless of **Date** of event: It would be helpful if counties were able to issue records for a bit longer than the current 6-month standard. Funeral homes sometimes receive requests for death certificates past the 6-month rule. While Funeral homes will not order on the family's behalf indefinitely, a slightly longer grace period, say up to a year, would allow Funeral Homes to better accommodate the families they serve.
- The State would need to initiate and implement County access to records in OVERS across the State of Oregon and change the laws currently in place to remove the 6-month issuing time limit and allowing counties to issue up to age 2-4 years old
- Allow the public to obtain records in their county of residence even if the event happened somewhere else

- remove the 6-month restriction
- give access to local county registrars, with training and more regular check-ins from the state.

5. reciprocity with neighboring states.

- Not sure a county vital records department needs this function. It has been easier to direct a person born in a particular state, to get their birth certificate from that state.
- Working with death records only, we rarely see a need to work with other states. On the rare occasion that we handle a deceased that passed in a different state, we enlisted a funeral home from that state to be our liaison to acquiring death certificates. (I feel this question would be better answered by others on this panel.)
- This is a great option for the State to issue records from other bordering states, which would also help supplement their revenue
- Come up with some sort of MOU with that state that would allow us to print certificates out of their system, possible login access to their system with training and privileges for them to do the same out of our system? Not sure how many rules I broke by just thinking it is that simple.
- Unfortunately, Oregon can't provide vital records for events that occurred in another state. States can only issue certificates for the events that occurred in that state. There is current reciprocity with neighboring states for funeral homes who have reciprocal licenses with Washington as approved by the Oregon Mortuary and Cemetery Board. Medical certifiers who are licensed in neighboring states can sign death records. Option: Provide information to partners where they can find information on ordering vital records from other states. This does not require legislation.
- Alignment of our laws with neighboring states isn't feasible. Medical certifiers of neighboring states can certify Oregon death records. If death records are fully electronic it may be advantageous to partner with licensing agencies in neighboring states to obtain funeral director or medical certifier information to help expedite signing people up for OVERS when needed and probably does not require legislation.

6. for all death certificates to be fully electronic.

- Legislation needs to be implemented in Oregon to enforce medical certifiers, hospitals, birth centers, and funeral homes to become fully electronic. This will streamline the work we do (OHA, counties, funeral homes, hospitals, birth centers) making the process more efficient, including the communication among all parties involved. This time-saving measure will enhance the promptness and quality of our work and the vital records that we issue.
- Require all registrations to be electronic.
- This is slowly becoming the reality. More physicians are utilizing the OVERS system, and (as far as I am aware) all funeral homes already have access. The way to ensure all records become fully electronic, though, would require some sort of mandate or statute; and a solid date set as to when doctors would have to switch to fully electronic records.

- This will need to be implemented and mandated at the State level
- Maybe a law or rule that all practicing providers in or neighboring states need to be registered when they start practicing medicine in any of these areas.
- Implement something like how Washington state has a law that requires all death certificates to be done electronically, and maybe this is reinforced and regulated by their medical board who licenses medical examiners.
- require all medical examiners to use OVERS and make everything electronic. This will be a huge lift to work on removing barriers and encountering some resistance and issues with out of state providers, and providers who sign hybrid records. It is a huge lift to get people signed up, but a lot of people are excited about it, and a lot of work has already been done to remove barriers.
- Create accountability to require providers to use OVERS
- go around the state to visit each geographic region to encourage accountability and partnership with the state and the Funeral Homes and the medical certifiers.

7. for all records to be fully electronic, with access to all old and new records, in an effective, functional and modernized system. (a.) this electronic system needs to be interoperable, meaning accessible in all interconnected systems.

- Getting funding through grants and a fee increase for hiring new staff and offering adequate training. This would take time, but becoming fully electronic will definitely benefit OHA Vital records work since now, it isn't simple to retrieve old records. Also, when this is implemented, all counties would be able to process birth and death certificates regardless of the date of birth or death (old and recent).
- Vital records systems could be interoperable with the appropriate technology and systems. The main challenge is funding, since it needs to be available to modernize this work, which will be expensive and take a lot of time.
- Pass a law that requires all doctors to go electronic - no more full paper or hybrid
- Use Interns or Work Study Students to assist with getting old records into the system.
- Ask legislature for funding to update OVERS
- Apply for grant funding to assist with the cost of system modernization.
- When doctors, midwives etc., earn their medical licenses they must automatically be registered in OVERS, through the facility they are working in. Maybe a part of new hire paperwork with the hospitals, HR...
- The idea of a legislative grant to assist in the modernization of the system; however, it might be important to add that additional funding for future growth of the system be made available. As stated in question #1, a fee increase would be viable.

- Perhaps requesting a one-time grant from the State (for the additional labor/cost) for this project would be beneficial.
- Great option for Counties back to 2010 to help generate additional revenue. Older records (prior to OVERS) and archived records should still be handled at the State level.
- investigate a new system, set up process, staffing, plan with completion dates, and most importantly funding
- Get all older records into the electronic system
- Ensure the electronic system has security measures and ways to ensure access, in case of a security breach, complications with firewalls and security systems blocking access, and how this could present difficulties for IT staff in small counties with less resources.

8. sustainable and equitable funding to support the system.

- Fee sharing / Fee increases – if a county issues a certificate after the first six months, a portion of the fee could go to the State.
- Getting funding through grants and a fee increase.
- Increase the cost of certificates. State gets a portion (example: Increase to \$30, state gets \$5, and county keeps \$25)
- Counties pay an annual fee for use of the system (like OCVR the state voter registration system) and have full access to the system.
- If the counties are able to issue records after the current 6-month limitation and there was a certificate fee increase, the state could charge the counties a percentage fee, based on how many certificates were sold in a quarter, in this way the state would still reap some revenue for certificates issued past the current 6-month limitation.
- Because the Vital Records division receives no money from the State general fund, the option that is apparent is the income from fees collected. From what I understand, this is currently “basically” sufficient for the time being. Raising fees for records is always an option, though Oregon is already on the upper end of what states charge for vital records.
- State to charge Counties \$1 fee per order issued from OVERS to help support the operational and maintenance cost of OVERS
- Think about a percentage-based system, for example monthly invoices, this month you printed 100 certificates and the percentage back to the state is 5% or that so now the state will bill you for that amount. $100(\$25\text{each}) = \$2500 * 5\% = \$125$ goes back to the state or whatever percentage we decide is reasonable.
- Since Vital Records offices are fees based, they need to increase fees to have a modernized system, but this would not cover the costs of what it would take to modernize the system and get all of the older records in the system.

- A creative option for funding could be to ask the legislature (across one or two sessions) for a one-time grant to modernize the system. This has not been done in the past. This would provide the resources to get the older records in the system and make it fully electronic for all partners. A fee increase may be a viable solution for maintaining the system (but separate from the legislative ask to modernize)
- A creative option for funding could be to ask for general fund dollars is a creative approach that requires a careful balance, asking for a grant for immediate upgrade versus staffing (not for staffing on an ongoing basis) A one-time grant approach could be really effective.
- Creating something like the Indigent Disposition Fund. Increase the fees and distribute a portion to the state and to the county, or something along those lines. Could be more sustainable.
- Getting general fund money
- Service reductions or reallocation of different services or a combination of sorts, but there is already an issue or turnover and burnout
- Setting up some sort of fee sharing, but that would be splitting the same amount if there is not a fee increase.
- Currently the counties can distribute the certificates up to six months, and when someone goes into or orders from the county, the county retains the funds for that certificate, and then after the six months everything goes to the state. So there is a definite separation of funds between county and state up to the six month limit. If this becomes more accessible and people can order from the counties for more than the six-month limit, the state is the one that's going to suffer in the long run because they would lose that past six-month funding. If counties can order records past the six months, this will generate income for the counties, but then the state would lose that funding. It could stay the way it is for the six-month limit, but if it goes beyond the six-month limit, the state and the county could split the funding
- Create a financial structure for counties to cover some financial support of the system. At present, counties issue certificates out of the OVERS system and they rely on the registration, the amending, the statistics, the training – all of the different supports provided by the state, but without any financial support in exchange for any of these services. This is the fundamental issue with the shift to where certificates are being issued, but if that funding shifts from the state to the counties, the system would no longer be supported. If this happened, then the counties wouldn't be able to issue certificates either because none of those records would be getting registered or amended and there wouldn't be any staff training.
- Fee sharing of all certificates (so counties could issue for a year), or some sort of mechanism for the counties to invest would be a way to make sure these changes would be less impactful to the overall system.
- Keeping it to the county where the event occurred would be a good way to ensure stability and sustainability because it would diffuse potential competition between small and large counties and the state. For instance, if a large county was being favored to issue certificates, a smaller county may have to lay off employees if they have one main customer who decided to take their business to a larger county.
- Devise a way to share funding for the system as a whole

- Asking the legislature to fund a one-time grant to modernize the system (relating to #7 to have all records fully electronic)
- Come up with ways to share the maintenance of the system with the understanding that the state maintains the system and the state provides all the resources for the counties and the counties don't support the system.

9. to be adequately staffed with adequately trained employees with adequate classification.

- To be adequately staffed an assessment of workload and level of responsibilities is needed in order to avoid undue stress and burnout. Classification would depend on the level of specialization, but unfortunately, when resources are scarce, compensation is not always adequate, and it is difficult to change.
- Trainings should come from different sources, always offer guidance and time to stay up to date with changes.
- All our staff are cross trained
- Perhaps the standard classification the state implements in regard to the skills and experience necessary in order to do the work, needs to be the same for the counties. A uniform standard that would bring the level of training up to a higher standard. The counties work for the state in a roundabout way. If changes are implemented to allow more robust offerings to the public, then the training of the county staff needs a higher standard of requirements.
- The issue here is that the wage offered for the 'entry level' positions isn't especially desirable for people living in the Portland area. Therefore, there is a difficulty in recruiting and retaining quality people. If it is not possible to request a salary increase, would it be possible to make the job more appealing by offering a telecommuting option?
- This should be dealt with internally at each County to determine their needs and the State should be available to help as needed
- Increase pay
- Offer incentives
- More cross training so it does not fall all on one employee.
- The classification needs to match what is needed across the state. County classifications vary from county to county, but the state has a certain classification that can't be changed without a process. The classification has to match the skills and experiences necessary to do the level of work. This is not just a matter of staffing; the classifications need to be updated and accurate. The work has changed, but the levels have not.
- A creative solution could be to address fees with a modernized system with electronic official certification of a vital record: With an electronically certified record, customers would not have to

purchase paper copies (this is being explored across the nation) This would improve access and help customers with costs because they wouldn't have to have a hard copy being moved around in the mail, instead the electronic certified records could work with everyone everywhere

10. easier access to OVERS with a longer time-out on the login.

- IT would need to set time-out parameters for those users that are granted permissions to be working in OVERS. Depending on their account level and permissions, hopefully a longer log in session for those working hours in OVERS.
- Giving the option to OVERS' users to adjust the time before the system times them out. I am sure the short time allowed now is for protection of private information. If users are allowed to adjust their time, they can assess their work needs and similarly they can determine the time depending on their physical office, the ones that work alone or in a private space could adjust to a longer time.
- Whatever the longest time-out is allowed should be applied 😊
- This would be more convenient for the majority of OVERS users. If the IT requirements don't prevent this, it may be an easy adjustment to make. (Not knowing the internal workings of the system myself, I would inquire to the IT department as to if this would be possible.)
- Implemented at the State level
- Sounds like an adjustment in the system.
- Examine Office of Information Systems requirements for timing out of OVERS and determine if the time can be increased without causing performance issues. This does not require legislation.
- Login time-outs are likely governed by Office of Information Security best practices. Especially if death records are fully electronic, easier access to OVERS will be needed. It may be advantageous to partner with licensing agencies in Oregon and neighboring states to obtain funeral director or medical certifier information to help expedite signing people up for OVERS when needed. This may not require legislation.

11. better oversight and accountability for following the laws and procedures of the Vital Records.

- Create live webinars for new users, so they are able to ask questions and virtually meet OHA staff and other counties' staff members.
- Provide once a year training in the form of live webinars as well.
- Between Triennial Reviews, OHA should visit counties once a year, this would be an informal visit to discuss what's working, and what challenges we are experiencing. I value in-person meetings. I do understand the challenges that this would entail, but I think this effort would generate vast benefits.

- The triennial review is a great tool for the counties as far as accountability and understanding the laws. However, it seems that perhaps a yearly review could be a more effective way to implement training and accountability. The counties would be more connected to the needs of the state, and it would assist the counties in maintaining that higher standard of classification.
- The monthly Matters of Record is a great tool for understanding procedures and what the state is needing from the different groups that are involved in issuing birth and death records. I only wish it was utilized more by the funeral homes.
- Having a county liaison to reach out to has been very helpful when needing to understand procedures, as it is an immediate solution.
- There are already statutes in place for death records that aren't currently enforced. (i.e., physicians being required to sign-off in a timely manner – currently the statute states 48 hours- but this rarely happens.) Someone available from the Vital Records division to oversee this and contact “repeat offenders” would be helpful on our end.
- Counties should have direct access/contact to the State for immediate assistance
- have representatives go out to partners around the state to provide information and answer questions
- Review process that is more frequent than the triennial reviews
- Ensure that information on the laws, policies and procedures are accessible and updated (see need #2). Develop and provide comprehensive training on vital records processes (see need #9). Require all new vital records staff to take the training and current staff take a refresher training every other year. Review the PHAB Vital Records metrics to determine which one can be used for vital records at the state and county to ensure a functioning vital records and statistics system. These would complement the triennial tool.
- Conduct annual check ins with each vital records office to review performance and compliance. These would be virtual for counties that are not having an in-person triennial review. This would require additional staffing resources at the state at the Program Analyst level on \$172,000 a biennium.
- Another option is to have mandatory monthly or every other month County vital records trainings review procedures and laws, answer questions and get feedback for potential changes or process improvements.

12. more immediate communication for staffing and delays.

- If I am understanding this need well, I would say that in our county day to day vital records operations, I would like to see a live chat to communicate with OHA when questions arise. Emails and phone calls are effective means of communication, but we sometimes need immediate needs to talk to them.
- If there were staff at the state that could generate a bi-monthly email indicating trends, such as how long it is taking for AOP pending's to be filed, or any other helpful and immediate information.
- If I am understanding this correctly, this essentially means that if there will be delays in orders, amendments, etc. due to staffing issues, that it would be beneficial to communicate this to the

requestors. This could be easily implemented with an announcement on the Vital Records webpage, or in an email, if and/or when delays become significant.

- Better communication from the State for delays
- Counties should have direct access/contact to the State for immediate assistance
- Ensure the county vital records offices have information on how to access the web pages where the timeliness of processing records, especially amendments, is updated monthly. Detailed information based on the type of amendment is on the main Amendments home page (add link here).
- The web pages are being redesigned to be more customer oriented. Information on timeliness of processing for the public and partners will be easier to find.

Other:

- I believe we need a completely revamped system where the state runs the system and the counties have access to all records; old, new, other counties, etc.
- It is frustrating for Counties not to be able to reach someone at the State when needed. Counties end up leaving a message and their work is being put on hold awaiting a response from the State, which may not always happen within the same business day, therefore delaying work that should be done within a specified period of time.